

WHAT IS THE FACE OF THE UK CHURCH TO ADULTS WITH DISABILITIES? (A CRITICAL INVESTIGATION)

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Abbreviations

The following abbreviations are used:

LSI – Long-Standing Illness

MHC – Mental Health Condition

MI – Mobility Impairment

NHS – National Health Service

ONS – Office for National Statistics

RAD - Royal Association for Deaf People

SCI – Social Communication Impairment

SSI – Severely Sight Impaired (Blind)

Abstract

In 2004 it became a legal requirement for reasonable adjustments to be made to public buildings, including places of worship, to make them accessible. Access is just the beginning, invitation brings the prospect of diversity, and inclusion occurs when people have a voice. Belonging is achieved for disabled adults in the Church when their voices are heard. Literature indicates that the Church has been reluctant in its application of the law, seeking to meet the minimum standards rather than aim beyond access to inclusion, or even further towards belonging in the Christian community. The Apostle Paul describes the Church as the Body of Christ, in which those members perceived as weak or vulnerable are given the most honour. Through research the face of the Church as witnessed by disabled adults is found to generally provide access to buildings yet attitudes maintain barriers to the community. Disabled adults are often overlooked for ministry, and not encouraged, equipped or empowered to grow as disciples or in the discipleship of others. Provision for those who are unable to access a building (temporarily or permanently) is weak, however where a building provides poor access the research shows that there is often a better sense of inclusion in the life of a local church. Disability is not a subject that is often heard in churches, and inclusive language (which carries no cost) is lacking. Where you live has a bearing on access and belonging in a church community, as do different disabilities or conditions. Overall, research found the UK Church presents a face that is no better than society with regards to access and inclusion for disabled adults, and calls for change of mentality, from access to belonging.

Declaration

I declare that the dissertation is my own original work unless referenced clearly to the contrary, and that no portion of the work referred to in the dissertation has been submitted in support of an application for another degree or qualification of this or any other university or other institute of learning.

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Dedication

This work is dedicated to all those who have been and continue to be excluded from the Body of Christ that is the Church, and especially those who the author has undoubtedly and regrettably neglected at one time or another.

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1. Introduction

The story *The Twits*, describes a face not by physical features but moral characteristics,

You can have a wonky nose and a crooked mouth and a double chin and stick-out teeth, but if you have good thoughts it will shine out of your face like sunbeams and you will always look lovely.¹

The Church has many faces; the Pope and Archbishop of Canterbury with grand cathedrals and palaces, and lay pastors ministering from rudimentary structures in rural communities across the globe. Street preachers proselytise on high-streets displaying placards whilst other groups meet secretly out of fear of persecution. There is the grandeur of ceremonial occasions and the pew for a bed in a winter night shelter. There are Catholic, Orthodox, Protestant, Pentecostal, charismatic, contemplative, missional, monastic and non-conformist to name but a few expressions of church. The Church is described as the body of Christ and yet churches are both buildings and communities. The external appearance of the Church is its witness of Christ to the world and the face that one views is a portrayal of its beliefs (its notions regarding God and humankind). The same face can appear different, depending upon the context of the observer. This thesis seeks to identify the face of the Church in the United Kingdom as witnessed by disabled adults.

The face of the Church can be one of access or barrier, diversity or homogeny, inclusion or exclusion, belonging or neglect. Despite accessible buildings, disabled adults may find they are excluded and lack a voice within a church community,

¹ Roald Dahl, *The Twits* (London: Puffin Books, (1980) 2001), p.7.

regardless of their communication form. There are different versions of the following quote which are used in reference to all manner of social justice concerns,

Accessibility is being able to get in the building. Diversity is getting invited to the table. Inclusion is having a voice at the table. Belonging is having your voice heard at the table.²

Although this version was referenced in relation to race, the words correspond to experiences of disabled people. Alongside children, young people, women, and those of ethnic minority groups, disabled people are 'more likely to be vulnerable to social exclusion'³.

Anecdotal evidence suggests that adults with disabilities are not enabled to be fully equipped as Christian disciples, while buildings, theologies, ecclesiastical structures and attitudes provide barriers to engagement in church life. Mission and pastoral care are done to those with disability (the charity model), there is a desire to see people healed (the medical model) and people with disabilities are accused of lacking faith or harbouring sin as causes of disability.⁴ Church guidance in response to equality legislation advocates 'the basic issue is about how we see people and welcome them... it is changes of attitude that are crucial.'⁵ The Church could, and should, be empowering those with disabilities to be participants in the equipping of

² Ben Lindsay, 'We Need to Talk About Race: Black Experience in White Majority Churches', Adult Learning Event, St Pauls Cathedral (29 October 2019).

³ Pauline Heslop and Eric Emerson, 'A Worsening Picture: Poverty and Social Exclusion and Disabled People' in *Poverty and Social Exclusion in the UK: Volume 1*, Ed. by Esther Dermott and Gill Main (Bristol: Policy Press, 2018), pp.173-193 [185].

⁴ Arne Fritzson and Samuel Kabue, *Interpreting Disability: A Church of All and for All* (Geneva: WCC Publications, 2004), p.69.

⁵ Baptists Together, *Guideline Leaflet L12: Churches and Disability Issues* (Didcot: BUGB, 2017), p.2, <<https://www.baptist.org.uk/Publisher/File.aspx?ID=111328&view=browser>> [Accessed 15 January 2020].

the Church. This research seeks to identify the face of the Church for disabled adults, and to recognise potential opportunities and learning that might support the transformation of the Church from disabling institution into inclusive and enabling communities.

The essay begins exploring recent developments regarding disability in the UK and considers four characteristics of the face of the Church: access, diversity, inclusion, and belonging. Hypotheses are presented regarding the current face of the Church to adults with disabilities and examined through quantitative research. The results are subsequently analysed for patterns and the learning discussed.

2. Definitions and Language

Disability language is as diverse and complex as disability itself; it can be painful and misleading.⁶ The terms and language adopted for the research are used knowing they will not adequately describe or define participants. A desire to keep learning from one another is sought, alongside a hope for grace. Language regarding disability is important; there are personal preferences as well as different models of disability which bias particular language. The *Equality Act (2010)* uses the terms 'person with disability' and 'disabled person' interchangeably, defining disability as 'a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities'.⁷ This research follows the same pattern of terminology whilst acknowledging not all those characterised as

⁶ Brian Brock, *Wondrously Wounded: Theology, Disability, and the Body of Christ* (Waco, TX: Baylor University Press, 2019), p.xi.

⁷ *Equality Act 2010*, 'Disability' in 'Part 2 Equality: Key Concepts', (c.1) London: HMSO. <<http://www.legislation.gov.uk/ukpga/2010/15/section/6>>, [Accessed 2 December 2019].

disabled will view themselves as such and others may consider themselves disabled but are not defined as such. For example, somebody defined as disabled for the purposes of this research may identify themselves as having a health condition or impairment and where possible this is reflected in the categories of disability adopted.⁸

Descriptions and categorisations of disabilities vary and despite the limitations of generalisations the research makes use of abbreviations and shorthand for the purposes of readability. A list of abbreviations precedes the essay; however, it is important to include a note regarding the words deaf and blind. The term deaf is a generic term incorporating all degrees of hearing loss, Deaf (capital 'D') is widely used by the Deaf community to refer to people with no hearing or profound deafness.⁹ The same does not apply to blindness, whereby sight impaired is the adopted term.¹⁰ Deviations in language exist, particularly between the survey and the report as learning from the research informed the final essay.

3. Literature Review

3.1. Recent History

During recent decades perceptions of disability have evolved considerably. Prior to the World Wars (1914-1918 & 1939-1945) segregation, institutionalisation and

⁸ Department for Work & Pensions, *Inclusive Language: words to use and avoid when writing about disability* (London: UK Government, 2018) <<https://www.gov.uk/government/publications/inclusive-communication/inclusive-language-words-to-use-and-avoid-when-writing-about-disability>> [Accessed 2 December 2019].

⁹ RAD, *What is Deafness?* (Colchester: RAD, N.D.) <<https://www.royaldeaf.org.uk/about-us/what-is-deafness/>> [Accessed 2 December 2019].

¹⁰ NHS, *Blindness and Vision Loss* (NHS, 2018) <<https://www.nhs.uk/conditions/vision-loss/>> [Accessed 2 December 2019].

eugenics were common approaches to what were viewed as physical, educational and psychological deficiencies.¹¹ Typically termed the 'medical model' (whereby the disability is something to be cured) and the 'charity model' (whereby the person with a disability is a victim who needs support), traditional understandings view disability as a fault or impairment with an individual. 'The earliest recorded views of disability explained disability as resulting from immorality or sin'¹² and within Judeo-Christian traditions disability is customarily viewed as a result of God's wrath, judgement and punishment for cleansing the moral failings of ancestors, individual, or community.¹³ Disability and long-term ill health have also been understood by the Church as demonic activity and lack of faith for healing. Such views regard disability as loss, weakness, and vulnerability, requiring fixing or charity.¹⁴

The *Chronically Sick and Disabled Persons Act 1970* included responsibilities for local authorities to provide welfare, housing, equal access to education and recreation, including parking and toilet facilities for public buildings.¹⁵ The *Disabled Persons Act 1986* strengthened these rights, then in 1995 the *Disability Discrimination Act* introduced the requirement for reasonable adjustments to be made by employers and service providers. In 2004 it became a legal requirement for reasonable adjustments to make buildings accessible, including places of worship.¹⁶ McCloughry recalls a friend who taught churches their responsibilities under the

¹¹ Loren Grant (Ed.), *A Disability History Timeline* (NHS, 2013), p.8, <<https://www.merseycare.nhs.uk/media/1749/disability-timeline-2013.pdf>> [Accessed 2 December 2019].

¹² Romel W. Mackelprang and Richard O. Salsgiver, *Disability: A Diversity Model Approach in Human Service Practice*, 3rd Edn. (Oxford: Oxford University Press, 2016), p.98.

¹³ Mackelprang and Salsgiver, *Disability*, pp.98-99.

¹⁴ Fritzson and Kabue, *Interpreting Disability*, pp.68-69.

¹⁵ Grant, *A Disability History Timeline*, pp.13-14.

¹⁶ Grant, *A Disability History Timeline*, pp.14-15.

Disability Discrimination Act and quoted church leaders responding, “What’s the minimum we have to do to get away with this?”¹⁷ The face of the Church can be one of inspirational prophetic witness or begrudging sceptic forced into taking action.

Contemporary insights have developed the ‘social model’ (it is society that is disabling and society needs to change) and the ‘psychosocial model’ (which considers disability in relation to context and influences). The social model was officially recognised in a 2005 report in which then UK Prime Minister wrote,

Disabled people remain more likely to live in poverty, to have fewer educational qualifications, to be out of work and experience prejudice and abuse. ... This report therefore sets out an ambitious vision for improving the life chances of disabled people so that by 2025 disabled people have full opportunities and choices to improve their quality of life and will be respected and included as equal members of society.¹⁸

The *Equality Act 2010* replaced a significant number of separate legislation and lists nine protective characteristics, one of which is disability. A 2016 report stated ‘[the *Equality Act*] did not in practice benefit disabled people’¹⁹ and a report the following year described the UK and devolved governments as having ‘introduced some retrogressive measures that have had a significant negative effect on disabled people’²⁰. Societal, technological and medical advances offer improvements to access and opportunities, yet as recent reports demonstrate, there are still

¹⁷ Roy McCloughry, *The Enabled Life: Christianity in a Disabling World* (London: SPCK, 2013), p.103.

¹⁸ Tony Blair in *Improving the Life Chances of Disabled People* by Prime Minister’s Strategy Unit (London: Prime Minister’s Strategy Unit, 2005), p.6.
<<https://webarchive.nationalarchives.gov.uk/20101119185312/http://www.cabinetoffice.gov.uk/media/cabinetoffice/strategy/assets/disability.pdf>> [Accessed 2 December 2019].

¹⁹ Select Committee, *The Equality Act 2020: the impact on disabled people* (London: House of Lords, 2016), p.23 <<https://publications.parliament.uk/pa/ld201516/ldselect/ldeqact/117/117.pdf>> [Accessed 2 December 2019].

²⁰ UK Independent Mechanism, *Disability Rights in the UK* (Equality and human Rights Commission, 2017), p.8. <<https://www.equalityhumanrights.com/sites/default/files/crpd-shadow-report-august-2017.pdf>> [Accessed 2 December 2019].

considerable barriers for disabled people. As fresh understandings of disability have emerged in society so new theological interpretations have developed.²¹ The emergence of theologians reflecting on disability provides the Church with biblical foundations for adopting different understandings of disability. Creamer summarises traditional Christian understandings of disability as ‘punishment for sin, a test of faith, an opportunity to inspire others, a potential demonstration of God’s healing power, or simply a mysterious act of God’.²² Eiesland presents an alternative view, that Jesus’ resurrected body bears the scars of crucifixion and therefore, the unconventional bodies of disabled people are made in the likeness of God, *imago Dei*.²³ The emergence of disability theology as an academic discipline is to be celebrated as evidence of the progression of disability theology in academia and influence upon the Church. As Brock contends, ‘*what is today called “disability” is a crucible for Christian theology because it is the domain in which human beings enact their fundamental beliefs about what it means to be, and to recognise, another human being*’²⁴.

3.2. Access: Church as a Building

A visit to almost any UK town will offer an insight into the role of the Church within that neighbourhood because of the buildings; how they are currently used, ruins of a bygone era or those long gone but with street names highlighting history. Historic

²¹ Fritzson and Kabue, *Interpreting Disability*, p.69.

²² Deborah Beth Creamer, ‘Disability Theology’ in *Religion Compass* 6:7 (Hoboken, NJ: Wiley, 2012), pp.339-346 [342], <<https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1749-8171.2012.00366.x>> [Accessed 10 February 2020].

²³ Nancy Eiesland, ‘Sacramental bodies’, in *Journal of Religion, Disability and Health*, 13:3/4 (London: Taylor and Francis Online, 2009) pp.236-246 [237]. <<https://www.tandfonline.com/doi/abs/10.1080/15228960902931830>> [Accessed 10 February 2020].

²⁴ Brock, *Wondrously Wounded*, p.95.

church buildings were arguably built with the pure purpose of being ‘expressions of love and reverence’²⁵ for God and as ‘emblems of heaven on earth’²⁶. Despite his passion for these church buildings Taylor acknowledges they can appear as though they were built to ‘win the argument with pomp and grandeur’²⁷. The appearance of a building, whether historic or contemporary, can be the outward face of a church that either expresses welcome or repels different characters, regardless of ability or disability. Different features can offer a face that is unseen or unrecognised by those who are able. Steps, uneven surfaces, and narrow paths do not offer a face of welcome to those with mobility impairments regardless of the building’s aesthetics. The face of the Church as buildings emblematic of heaven on earth but without suitable access risks expressing heaven as inaccessible to those with disabilities. It is anticipated that the research will expose limitations of church building accessibility, though meeting legal requirements, but not innovators of accessibility.

3.3. Diversity: Church as a Body

Garland reasons the Apostle Paul’s use of the body metaphor in 1 Corinthians 12 does not reflect a body of Christians who, as individuals, comprise the many parts. Instead, he sees the body as Christ’s with its diversity indisputably meaningful and beneficial as the members are united by being in Christ.²⁸ Hays proposes that Paul is not simply using the language of body as a metaphor; the Church is actuated by the Holy Spirit and is thus more than a mere organisation. It is humankind in union with

²⁵ Richard Taylor, *How to Read a Church* (Mahwah, NJ: HiddenSpring, 2005), p.5.

²⁶ Taylor, *How to Read a Church*, p.5.

²⁷ Taylor, *How to Read a Church*, p.5.

²⁸ David E. Garland. *1 Corinthians*, Baker Exegetical Commentary on the New Testament (Grand Rapids, MI: Baker Academic, 2003), p.590.

Christ.²⁹ In his letter to the Church in Ephesus, Paul introduces a separate metaphor, 'For the husband is the head of the wife just as Christ is the head of the church, the body of which he is the Saviour.'³⁰ The passage speaks of reciprocal love and respect between husband and wife who 'become one', reflecting the nature of Christ and Church who are one. The face of the Church is, through the Spirit, the face of Christ. Such is the audacity of this concept that it should cause the Church to reflect thoroughly upon the face that is presented to the world as a witness of Christ.

Furthermore, the metaphor of the Church as the body of Christ is not one of physical perfection. Christ's resurrected body carries the scars of crucifixion.³¹ When Christ's body was beaten, weak and drained, this was simultaneously the moment of Christ's victory. 'Christ crucified is never any less a member of the Trinity or the perfect image of the invisible God.'³² Through Jesus' death and resurrection he subverts judgements by making holy the labels of disability, weakness and inferiority.³³ The Church as the body of Christ must therefore include the diversity of all members, those perceived as weak and vulnerable alongside those considered formidable and strong. Jesus' own ministry was one of valuing those deemed weakest and lowest by society, modelling for his Church 'a life centred on God, inclusive of all people'.³⁴

3.4. Inclusion: Church as a Community

²⁹ Richard B. Hays, *First Corinthians*, Interpretation (Louisville, KY: John Knox Press, 1997, 2011), p.214.

³⁰ Ephesians 5:23.

³¹ Luke 24:39-40; John 20:20, 27.

³² Kate Bowen-Evans, *A Disabled Reading of 1 Corinthians 12:12-27, The Body of Christ* (Unpublished Masters Dissertation) (Manchester: Nazarene Theological College, 2019), p.54.

³³ Bowen-Evans, *A Disabled Reading of 1 Corinthians 12:12-27*, p.57.

³⁴ Richard M. Gula, *Just Ministry*, (Mahwah, NJ: Paulist Press, 2007), p.9.

New Testament writers adopted the word *ekklesia* (ἐκκλησίαν), meaning to be called out to a public gathering or assembly. As Wright acknowledges, 'before the church ever takes form as an institution, and before we factor in any place for buildings and 'sacred places', the church is a community, a communion, a fellowship of persons in relationship.'³⁵ Volf contends 'the church is first of all an *assembly*,'³⁶ yet to assemble is not enough and with reference to 1 Peter 2:9-10 Ferguson defines the assembly as one by which 'God's people [gather] in Christ's name'³⁷. Yancey says that '[Christianity] can only be lived in community'³⁸ and Küng reasons that 'Christianity exists only where the memory of Jesus Christ is activated in theory and practice'³⁹. Linsey draws our attention to building access, however for the Church access is not just about a building but access to the community, wherever it gathers.

Calvin writes of the invisible and visible church. The former referring to those 'actually in God's presence' and the latter the men and women who profess to worship Christ.⁴⁰ This research seeks to identify the face of the visible church for disabled adults. Calvin offers recognisable characteristics of church members including confession of faith, lived example and sharing in the sacraments⁴¹ and says,

³⁵ Nigel G. Wright, *Free Church, Free State: The Positive Baptist Vision* (Eugene, OR: Wipf & Stock, 2005), p.5.

³⁶ Miroslav Volf, *After Our Likeness: The Church as the Image of the Trinity* (Grand Rapids, MI / Cambridge: William B. Eerdmans, 1998), p.137.

³⁷ Everett Ferguson, *The Church of Christ: A Biblical Ecclesiology for Today* (Grand Rapids, MI: William B. Eerdmans, 1996), p.72.

³⁸ Philip Yancey, *Church: Why Bother?* (Grand Rapids, MI: Zondervan, 1998), p.23.

³⁹ Hans Küng: *On Being Christian*, trans by Edward Quinn (London: Collins, 1977), p.126.

⁴⁰ John Calvin, 'Book Four: The External Means or Aids by which God Invites us into the Society of Christ and Holds us Therein', in *Institutes*, vol. 2, 4.1.7, 1009 in *Calvin's Institutes: A New Compend Trans.* Ed. by Hugh T Kerr By Ford Lewis Battles (Louisville, KY: Westminster/John Knox Press, 1989), pp.132-133.

⁴¹ Calvin, *Institutes*, vol. 2, 4.1.8, p.133.

From this the face of the church comes forth and becomes visible to our eyes. Wherever we see the Word of God purely preached and heard, and the sacraments administered according to Christ's institution, there, it is not doubted, a church of God exists (cf. Eph 2:20). For his promise cannot fail: "Wherever two or three are gathered in my name, there I am in the midst of them (Mt. 18:20).⁴²

For those who are severally sight impaired (SSI) this description is awkward, as they are unable to see physically the face of the Church. Given the biblical imagery of body and face is metaphorical the outward appearance need not only refer to what is seen with physical sight but through other senses. The greater challenge is the presentation of the Word of God to be preached and heard; someone who is Deaf cannot listen to the preached word and still others whose physical hearing is not impaired may be unable to process due to cognitive or intellectual conditions which are not accounted for in the methodology of preaching. Furthermore, if one cannot access the community to be present for the preaching of the Word of God, they are restricted from hearing – regardless of auditory, intellectual or cognitive abilities. In reference to the sacrament Volf explains 'no person can self-administer and yet each person must receive personally, symbolize most clearly the essentially communal character of the mediation of faith.'⁴³ If self-administration is not possible then anyone unable to access the gathered community of believers is excluded from the opportunity to partake in the sacraments and therefore excluded from opportunities to bear witness to Christ. The so-called visible church in such instances either becomes hidden from disabled adults or presents a face of barriers, exclusion and neglect.

⁴² Calvin, *Institutes*, vol. 2, 4.1.9, p.133.

⁴³ Volf, *After Our Likeness*, p.163.

Calvin's definition of church refers to Jesus' own words, 'For where two or three are gathered in my name, I am there among them.'⁴⁴ This is a sentiment that has echoed through Christian history. In his letter to the Smyrnaeans, Ignatius wrote 'wherever Jesus Christ is, there is the catholic [universal] church'.⁴⁵ Luther expressed his view 'where the word is, there is faith; and where faith is, there is the true church'.⁴⁶ This opens the possibilities for those unable to access a designated building the opportunity to meet in an accessible space. In parallel with Calvin, Luther held the view that it is through the preaching of God's Word and the sacraments that God's Spirit works in the life of the believer and the Church.⁴⁷ Although there are significant distinctions between Catholic, Orthodox and Protestant churches understanding of sacraments, Hammett highlights the prevalent view that administration belongs to the local church.⁴⁸ If the local church is responsible for the administration of the sacraments and the sacraments are a fundamental constituent of church life and the working of the Spirit, inclusion in the community is essential for access to the sacraments. In 2002 Block wrote of 'exclusion as a way of life' for people with disabilities, adding the 'lack of access to the sacraments' for believers is easily documented.⁴⁹ Block goes on to state omission from the gathering of believers and communion is a 'type of exclusion that is searing and devastating'.⁵⁰ Eighteen years

⁴⁴ Matthew 18:20.

⁴⁵ Ignatius, 'The Letters of Ignatius, Bishop of Antioch to the Smyrnaeans' in *The Apostolic Fathers* (2nd Edn.) Ed. By Michael W. Holmes, Trans by J. B. Lightfoot and J. R. Harmer (Leicester: Apollos, 1989), pp.110-115 [113].

⁴⁶ Martin Luther in *Luther's Works Volume 39: Church and Ministry I*, Ed. by Eric W. Gritsch (Philadelphia, PA: Fortress Press, 1970), p.xii.

⁴⁷ Veli-Matti Kärkkäinen, *An Introduction to Ecclesiology* (Downers Grove, IL: InterVarsity Press, 2002), p.44.

⁴⁸ John S. Hammett, *Biblical Foundations for Baptist Churches* (Grand Rapids, MI: Kregel Publications, 2005), p.299.

⁴⁹ Jennie Weiss Block, *Copious Hosting: A Theology of Access for People with Disabilities* (New York, NY: Continuum, 2002), p.115.

⁵⁰ Block, *Copious Hosting*, p.117.

later this research seeks to identify if such exclusion from the church community remains widespread.

3.5. Belonging: A Discipling Community

Reinders explains access is important but it is not enough; participation depends on shared practices between people who want to be part of one another's lives.⁵¹

Expressed another way, '*To be included you just need to be present. To belong you need to be missed.*'⁵² Inclusion and belonging are not about simply being present in a space or passive recipients, but being considered as contributory citizens. If belonging is having your voice heard, then in Christian communities belonging is to be included in discipleship and as disciplers (that is one who directs others in the ways of Christ). Morgan contends the term 'disciple' in the gospels is replaced by 'church' in the epistles.⁵³ It is her proposition, 'Discipleship is not something that the church *does*: it is what the church *is*: the church is the community which supports and directs our discipleship in the world.'⁵⁴ Cray states 'Churches have to realise that the core of their calling is to be disciple-making communities whatever else they do.'⁵⁵ Discipleship is a broad concept, yet Bosch helpfully describes a disciple as one who makes an initial decision to turn to both God and neighbour and proceeds in

⁵¹ Hans S. Reinders, *Receiving the Gift of Friendship: Profound Disability, Theological Anthropology and Ethics* (Grand Rapids, MI: William B. Eerdmans, 2008), pp.161-162.

⁵² John Swinton, 'From Inclusion to Belonging: A Practical Theology of Community, Disability and Humanness' in *Journal of Religion, Disability & Health*, 16:2 (London: Taylor & Francis, 2012) pp.172-190, [184], <<https://www.tandfonline.com/doi/abs/10.1080/15228967.2012.676243>> [Accessed 10 February 2020].

⁵³ Alison Morgan, *Following Jesus: The Plural of Disciple is Church* (Wells: Somerset, 2015), p.115.

⁵⁴ Morgan, *Following Jesus*, p.116.

⁵⁵ Graham Cray in *The Great Divide* by Mark Greene (London: LICC, 2010), p.24.

revealing “the reign of God and his justice” throughout life-long discovery.⁵⁶ Bosch also advocates that one cannot be a disciple alone, but must be a member of the body of disciples – that is the Church.⁵⁷

These notions of discipleship offer multiple dimensions – learning, community, mission (loving our neighbour), worship (turning to God) – which require administration, enactment and participation. Gula writes of cultivating gifts as a means of glorifying God and serving others, reasoning the community identify and affirm gifts as well as a call to ministry.⁵⁸ Of concern for this research is the extent disabled adults are recognised and enabled as disciples and disciplers. With a drive for numeric success, homogenous churches discard those who are considered ineffective, such as those who are poor, elderly or disabled.⁵⁹ The hypothesis of this research is that the more conspicuous and complex a disability the fewer opportunities provided by the Church for discipleship and discipling.

As Gill argues, it is not potential productivity but value for all church members as being “in Christ” that is most biblically consistent.⁶⁰ If, ‘a church is a group of people who are helping one another to deepen their relationship with Jesus’,⁶¹ then all have something to offer. In describing the Church as the body of Christ, Paul emphasises that *all* form one body,⁶² even highlighting that those deemed weaker by society at

⁵⁶ David J. Bosch, *Transforming Mission: Paradigm Shifts in Theology of Mission* (Maryknoll, NY: Orbis Books, 2014), p.83.

⁵⁷ Bosch, *Transforming Mission*, p.76.

⁵⁸ Gula, *Just Ministry*, pp.15-16.

⁵⁹ Malcolm Gill, ‘Missing in Action: Theological Reflection on the Absence of the Aged, Poor, and Disenfranchised in Contemporary Church Planting Movements’ in Brian Brock, John Swinton and Jana Bennett (Eds.), *Journal of Disability and Religion*, 21:1 (Philadelphia, PA: Taylor and Francis, 2017), pp.84-97 [91].

⁶⁰ Gill, ‘Missing in Action’, p.95.

⁶¹ Morgan, *Following Jesus*, p.116.

⁶² 1 Corinthians 12:6, 7, 11, 13, 27.

large are indispensable.⁶³ Accepting Brock's contention that disability is a crucible for theology⁶⁴ means the Church's understanding of gifts needs to be refined so as to recognise and appreciate the gifts of those with disabilities, even the gift of disability.

3.6. Summary and Hypothesis

In a 2019 article⁶⁵ Damien Rose shared his experience of being approached on the London Underground by a stranger offering prayer for healing so that his sight could be restored. Rose describes himself as blind, and explains that this is a common experience which 'has put me off Christianity' because he does not see himself as needing to be 'fixed'.⁶⁶ Although he may not be able to see with physical sight, the face of the Church to Rose appears to be a face of a people, representing a God, who does not accept people as they are but needs people to change. Rose quotes Christian author Lyndall Bywater, who is also severely sight impaired, as saying 'being alive and at peace with yourself while being blind is a bigger miracle than having your sight restored'.⁶⁷ Rose acknowledges that he is not religious but concludes his article saying, 'maybe if we were approached with the message that God loves us as we are, more disabled people might welcome that conversation'.⁶⁸

Churches and other places of worship are not exempt from legislation yet as Rose's experience on the Underground highlights, there is one face of the Church that

⁶³ 1 Corinthians 12:22.

⁶⁴ Brock, *Wondrously Wounded*, p.95.

⁶⁵ Damien Rose, 'Stop trying to 'heal' me' in *BBC News* (28 April 2019) <<https://www.bbc.co.uk/news/uk-48054113>>, [Accessed 15 January 2020].

⁶⁶ Rose, 'Stop trying to 'heal' me', (2019).

⁶⁷ Rose, 'Stop trying to 'heal' me', (2019).

⁶⁸ Rose, 'Stop trying to 'heal' me', (2019).

suggests a person must be fixed before they are welcome. The problem with this approach is that churches, both the buildings and the communities, remain inaccessible. More than 15 years since it became a legal requirement to make reasonable adjustments to provide access to church premises, it remains possible to visit churches without such adjustments or with adjustments that suggest a disabled person is a second-class citizen.⁶⁹ Instead of leading the way towards inclusion and providing a prophetic voice against discrimination, the Church has often lagged behind other places in society, reluctantly following social change when pressed to do so.⁷⁰

The church as a building offers a face which can be one of access or exclusion and this brief survey of the essentials of church community highlights issues of inclusion and belonging. The face of the Church is changing; legislation enforces alterations and theologians examine disability through the lens of scripture and vice-versa. The anticipation is that broadly speaking the Church continues to lag behind society with regards to access, diversity, inclusion and belonging for disabled adults in the UK. It is hoped there will be progress in some situations that exceeds expectations, with local congregations radiating the gift of welcome.

4. Methodology

⁶⁹ Specific examples are not provided as it is not appropriate to shame churches but the author is aware of church buildings without step free access, narrow aisles unsuited for wheelchairs, poor lighting, lack of signs, and inaccessible toilets amongst other aspects of a building which deny disabled people access.

⁷⁰ Fritzson and Kabue, *Interpreting Disability*, p.69.

Research was conducted using an online survey tool.⁷¹ The survey was freely available and publicised via social media with a view to attracting disabled adults in the UK. It is recognised that potential respondents who do not access online content would not be able to participate in the research, but in order to obtain a suitable sample within the constraints of the research, online survey tools presented the most efficient means of reaching the required demographic. Online tools also offer those who require assistance to participate utilising their own specific aids (such as text-to-speech technology) in addition to support from an assistant. The questions were designed to minimise the amount of writing required by respondents, primarily to support accessibility as well as providing quantitative results. It is acknowledged that people completing survey's regularly do so because they have a particularly positive or negative experience; this research seeks to hear all views.

The survey consisted of five sections: Background Information; Church Engagement; Disability; Access and Inclusion; and, Inclusion and Participation.

4.1. Background Information

Background information consisted of four questions asking about age, ethnicity, gender and the region respondents live in. The purpose of this information is to assist in the identification of patterns, as well as factors unrelated to disability which may influence responses. Churches and denominations have a range of understandings of gender and gender roles expressed through theology and ecclesiology. For example, women are recognised as priests or elders in some

⁷¹ Survey Legend, <<https://www.surveylegend.com/>> [Accessed 2 December 2019].

denominations but not others. As such, responses related to participation in church life and certain roles may be influenced by gender rather than disability or issues of intersectionality could apply. Additional information and rationale for the age ranges, ethnic categories and regional classification are available in *Appendix 1.1*.

4.2. Church Engagement

Church engagement asks about denominational associations of the respondents, their typical regularity of church attendance and satisfaction with this frequency, in addition to roles or positions held within the local church. The *UK Church Statistics* survey lists ten broad denominational groups,⁷² which are also utilised for the purposes of this research to understand the affiliations of respondents. The purpose being to identify theological or ecclesiological factors that influence the face of the Church to adults with disabilities. Similar reasons apply for understanding frequency of attendance and satisfaction with regularity. Denominational groups are listed in *Appendix 1.2*. along with the basis for adopting options for attendance frequency. There may be patterns with the access to buildings and church community that apply to specific denominations, or the nature of participants disabilities. The roles and positions held by respondents provides an insight into inclusion and belonging of the participants. Intersectionality is a possible factor with regards to certain positions being fulfilled by particular people, as discussed with regards to gender. However,

⁷² Peter Brierley, *Introduction: UK Church Statistics No 3: 2018 Edition* (Tonbridge: ADBC Publishers, 2017), p.2,
<<https://static1.squarespace.com/static/54228e0ce4b059910e19e44e/t/5a1591cb9140b7c306789dec/1511363021441/CS3+Page+0.2+Intro.pdf>> [Accessed 2 December 2019].

understanding the roles respondents hold is one factor in exploring whether they are invited to the table and have a voice that is heard.

4.3. Disability

The section on disability explores the disabilities and/or conditions of the respondents, the complexity and stability of their needs and whether they have acquired conditions or lived with disability since birth.

The descriptions of disability employed for the research are based on existing and widely used classifications with details in *Appendix 1.3.* alongside the abridged terms and abbreviations. Although ‘*No Disability*’ is an option in the survey, responses from participants with no disability are not included in the analysis which is interested only in adults with disabilities. A glossary of terms, including examples of the disabilities and conditions embraced within each category is provided in *Appendix 3.*

Additional considerations include participants living with multiple conditions and the severity or complexity of needs. The terms ‘severe’ and ‘complex’ are used in conjunction with different disabilities to denote heightened needs for carrying out day-to-day activities compared with those which are managed (or moderate), and mild. A disability that is stable, progressive, improving, or fluctuating will impact upon the participants own ability to manage their daily living as well as the requirements for aids and assistance. Participants who have been disabled since birth will have different experiences of disability compared with acquired conditions. Capturing this

information assists in analysing the face of the Church to each subset of respondents.

4.4. Access and Inclusion

Three questions explore experiences of access to buildings; access and inclusion in the worshipping community; and, theological messages heard in churches which project messages of inclusion or exclusion to the Christian community. Additional space is provided for each multi-answer question to encourage participants to explain answers and experiences.

4.5. Inclusion and Participation

Fifty statements conclude the survey, with options to select *Agree*, *Disagree* or *Not Applicable*. The statements enquire about participants experiences of different aspects of church life including: provisions and adaptations to enable participation; having their voice heard; support to grow in faith and minister to others; and, how their experiences of church in relation to their disability or condition makes them feel.

5. Results

The presentation of the results mirrors the five sections of survey with supportive charts available in *Appendix 2*.

5.1. Background Information

The self-selecting research attracted 218 individuals, with 136 completing all questions and meeting the required criteria. The majority of respondents (114, 84%) answered for themselves, the remainder receiving support or answering on behalf of someone else⁷³. Unless otherwise stated the results refer to all 136 completed surveys.

The range of age⁷⁴ and regions⁷⁵ of respondents provides significant breadth to enable comparisons. There were no responses from Northern Ireland and few from Wales, Scotland, and North-East England. Almost three-times as many females (94) responded as males (34).⁷⁶ Participants identifying as transgender, gender fluid, non-binary or as not having a gender but female biological sex combined to make up 4%; an additional 2% preferred not to say. Despite efforts to encourage ethnic diversity, 133 respondents identify as white, one Anglo-German and two preferred not to say; the research presents a white-face even if respondents are referring to an ethnically diverse church.

5.2. Church Engagement

The majority of respondents refer to Anglican (29%) and Baptist (40%) churches, the remaining 31% combine Independent, Methodist, New Churches, Pentecostal,

⁷³ Appendix 2.1, Figure 7.

⁷⁴ Appendix 2.1, Figure 8.

⁷⁵ Appendix 2.1, Figure 10.

⁷⁶ Appendix 2.1, Figure 9.

Quaker, United Reformed, or Other denominations.⁷⁷ Of all respondents 79% attend church at least once per month including 67% attending weekly, whilst 9% no longer attend at all.⁷⁸ Forty-four percent of respondents would like to attend church more frequently and 37% are satisfied with their attendance regularity.⁷⁹ Of the 19% who responded *Other* to satisfaction with church attendance reasons included: being “happy” with attendance, other commitments restricting availability, being able to “manage at the moment”, and one respondent sharing a desire to attend less frequently but having responsibilities to fulfil.

5.3. Disability

The range of disabilities experienced by participants is illustrated in *Figure 1*; figures surpass 136 as 70% of participants experience multiple conditions.⁸⁰ This figure reduces to 62% when corrective conditions are removed from the analysis.⁸¹ A glossary of the disabilities and conditions included within *Other* is provided in *Appendix 3*. One-third of respondents have been disabled since birth with the remaining two-thirds having acquired conditions.⁸²

⁷⁷ *Appendix 2.2, Figure 11.*

⁷⁸ *Appendix 2.2, Figure 12.*

⁷⁹ *Appendix 2.2, Figure 13.*

⁸⁰ *Appendix 2.3, Figure 16.*

⁸¹ *Appendix 2.3, Figure 17.*

⁸² *Appendix 2.3, Figure 19.*

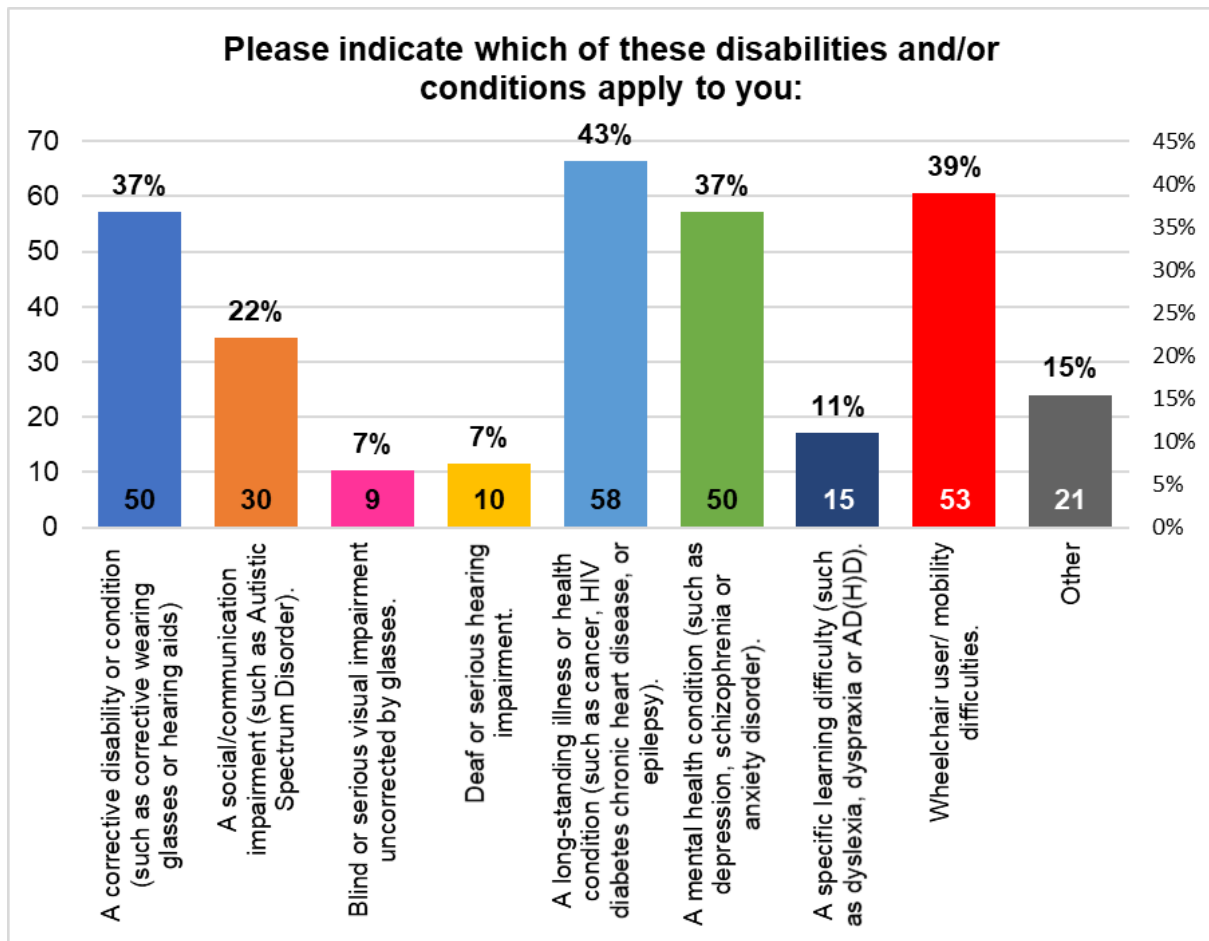


Figure 1: Participant Disabilities

The range complexities of disabilities or conditions included mild (18%), managed/ moderate (62%), complex (13%) and other (7%).⁸³ *Other* responses include those described as “profound” or “severe” but not requiring care, “mild with the need for assistance” or between the categories offered. The stability of respondent’s disabilities included stable (34%), progressive (21%), improving (3%) and fluctuating (42%).⁸⁴

⁸³ Appendix 2.3, Figure 18.

⁸⁴ Appendix 2.3, Figure 20.

5.4. Access and Inclusion

5.4.1. Church Building

Ninety respondents (66%) indicated the church building or primary place of worship is fully accessible (*Figure 2*). Eleven of these indicated some access needs; including using an alternative entrance or attending with a carer. Initially it appears 33% of participants said “Yes, but...” or “Yes, if...” regarding building access. However, this increases to 41% when these additional responses are included. Nobody said that the church building was completely inaccessible, however 4% said they were completely unable to access worship services. Eight respondents chose to highlight,

“Access is not just physical”.

A significant number of comments were made about noise, fluctuating needs and social exclusion. These included the need for a “good sound system” and being able to hear in the main space used for worship but poor acoustics in other rooms, thus excluding involvement and participation in other groups or events. One respondent shared that their church had enabled access by providing ear-defenders to assist with access for their adult son [25-39 years] with complex a Social Communication Impairment (SCI).

A number of responses included the ambient noise before and after a worship service as causing difficulties. One respondent commented

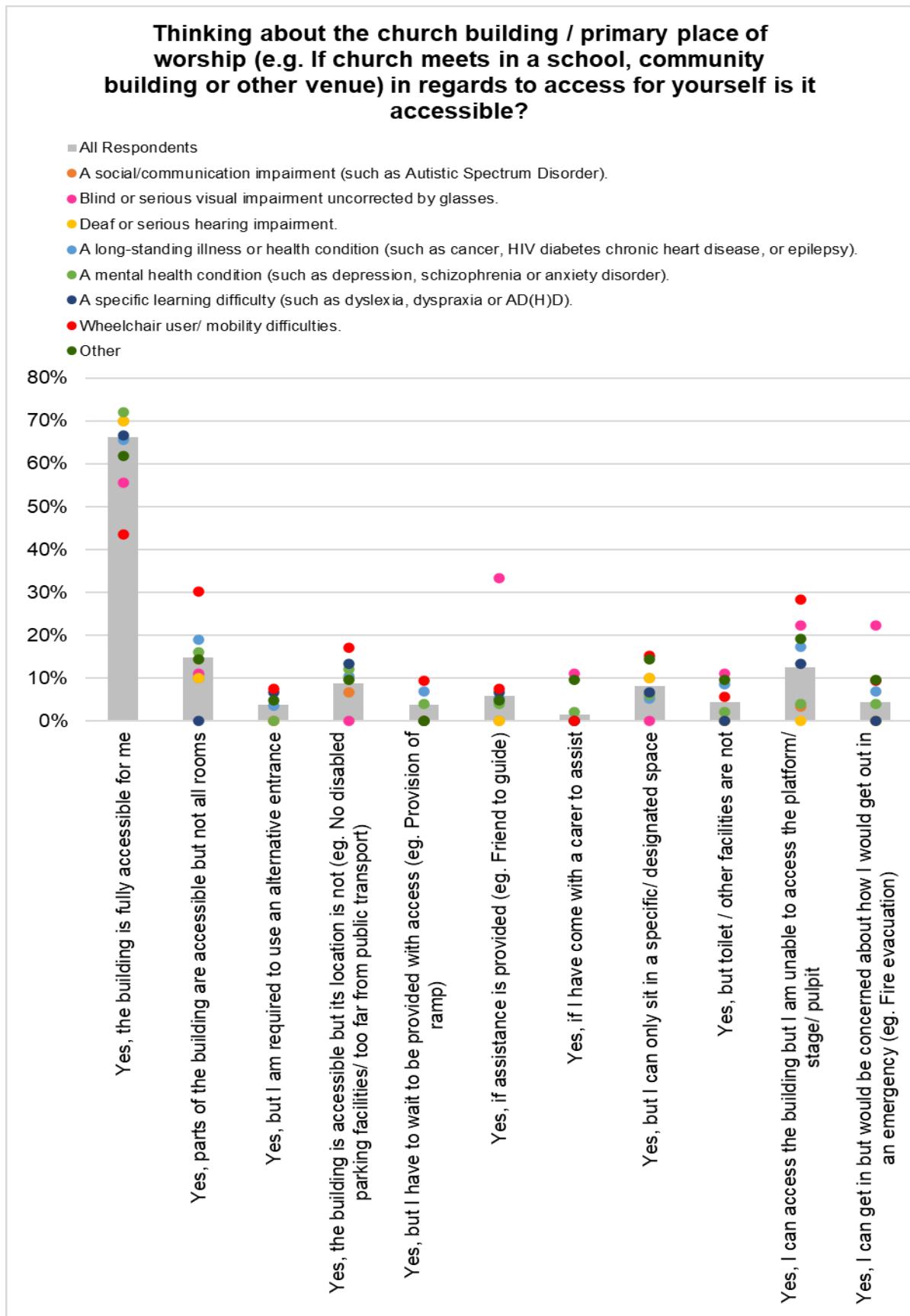


Figure 2: Access and Inclusion (Building) Disability Comparison

“Noise levels exclude me from social gatherings on the whole.”

Whilst another said

“When people have coffee, they stand around talking and speak at standing level so I can’t hear conversations. I find the social exclusion harder than physical access issues.”

People indicated the worship service can be challenging and an alternative space to “escape to if needed” would be helpful. Examples given include;

- “during a flare-up, there is nowhere comfortable to sit”;
- “being in a group of people can be exhausting”;
- “becoming panicky if there are a lot of people around”.

Those who shared that the location of the church building provides difficulties noted the lack of nearby parking, limited capacity and availability of street parking, and the cost of parking inhibitive for midweek meetings. Public transport was cited as irregular and cause for heightening anxiety.

Encouraging comments regarding access include:

“My fellow worshipers help me.”

“Church provides specific support & church friends willingly step in to help as needed.”

“My church has always been very supportive practically and emotionally, paying for aides to enable me to minister.”

Issues relating to building accessibility referred to needs for assistance navigating moveable obstacles (such as chairs or tables), the proximity of seating, lighting, and the visibility of the projector screen including graphic quality and an unobstructed view.

Two-thirds of participants with mobility impairments (MIs) report buildings are not fully accessible. However, 50% of participants with MIs for whom the building is not fully accessible have a role or position within their respective churches. After those with MIs it is severely sight impaired (SSI) respondents who report most challenges regarding access to church buildings.

5.4.2. Worship and Teaching

Particular requirements for accessing worship and teaching were indicated by 76 participants, of whom 39 are also represented in the 93 respondents stating they are able to access worship and teaching (*Figure 3*). Six participants recorded that they were unable to access worship services at all; five gave factors relating to their disability or condition, and one choosing to access an online-community. A further 11 respondents provided *Other* responses regarding their access to worship and teaching. These *Other* explanations include sometimes being able to access worship because of a fluctuating condition or depending on the skills of the preacher and quality of visuals used in a service. One person commented that they have to “avoid some visiting preachers” and another could access “main stream” services

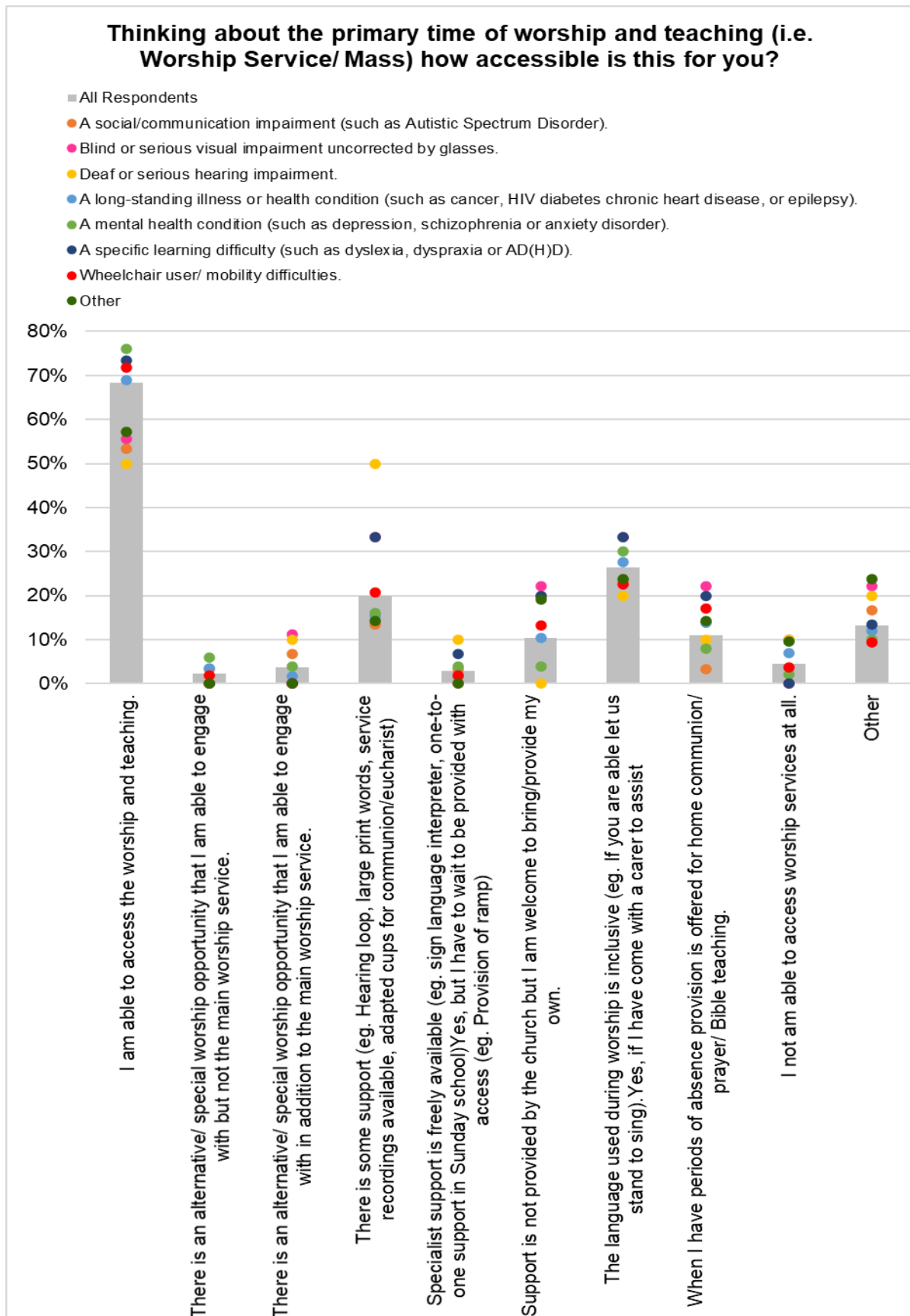


Figure 3: Access and Inclusion (Worship/Teaching) Disability Comparison

only when an interpreter is available. Three of these 11 respondents indicated that they cannot access the primary worship; one accesses sermons online and is discussing with their church how they could be included further. It is therefore more accurate to say eight respondents (6%) cannot access worship and teaching at all.

Three respondents cannot access the primary worship service but have access to an alternative service along with five for whom this is available in addition to the primary worship. A “mainstream” Sunday evening service (which is preferable to a morning service as, “my chronic fatigue doesn't allow me to be up, washed, dressed etc. by 10am”) and a midweek midday service are examples of provision utilised by those unable to access the primary service. For some, the alternative services are preferred to the primary worship, however for others they

“do not make up for the gaps in community of missing the main service”.

Special services for those with disabilities were seldom mentioned though a Deaf Church was cited, and a once a month service “for adults with disabilities, especially learning difficulties” in addition to a fortnightly house group where “materials are adapted for us creatively”.

Half of Deaf respondents said that they cannot access worship and teaching, with 10% unable to access worship services at all. Compared with other disabilities, access to alternative worship, some support (namely a hearing loop) and specialist support (such as an interpreter) is reported as more widely available. Participants

with SCIs or Mental Health Conditions (MHCs) are least likely to receive home visits for sharing communion, prayer or Bible teaching.

5.4.3. Theological Perceptions

The percentage of respondents who are in churches that have made them feel disability is a 'result or sin' or 'lack of faith for healing' is less than 30% (*Figure 4*). Comparing different disabilities highlights SSI to be more likely to be attributed to 'one's own sin' (22%), 'generational sin' (11%), or 'own lack of faith for healing' (22%) than other disabilities. Those who with SSI are however more likely to be made to feel their disability 'provides an important perspective that the church needs to hear' (67%). Conversely those with SCIs are less likely to be made to feel 'disability provides them with an important perspective' (27%). Those with SCIs are also less likely to be made to feel their condition is a 'result of their own sin' (7%), 'generational sin' (3%), or 'own lack of faith for healing' (13%).

Respondents with Long-Standing Illnesses (LSIs) are more likely to be made to feel their condition is a result of their 'own lack of faith for healing' (28%), the 'condition is temporary' (40%) and only 12% made to feel they are 'made in the image of God with a disability'. This contrasts with those who are Deaf of whom 30% are affirmed that they are 'made in the image of God' and for whom only 10% were made to feel they 'lack faith for healing', with 20% who feel 'in eternity there will be no disability'.

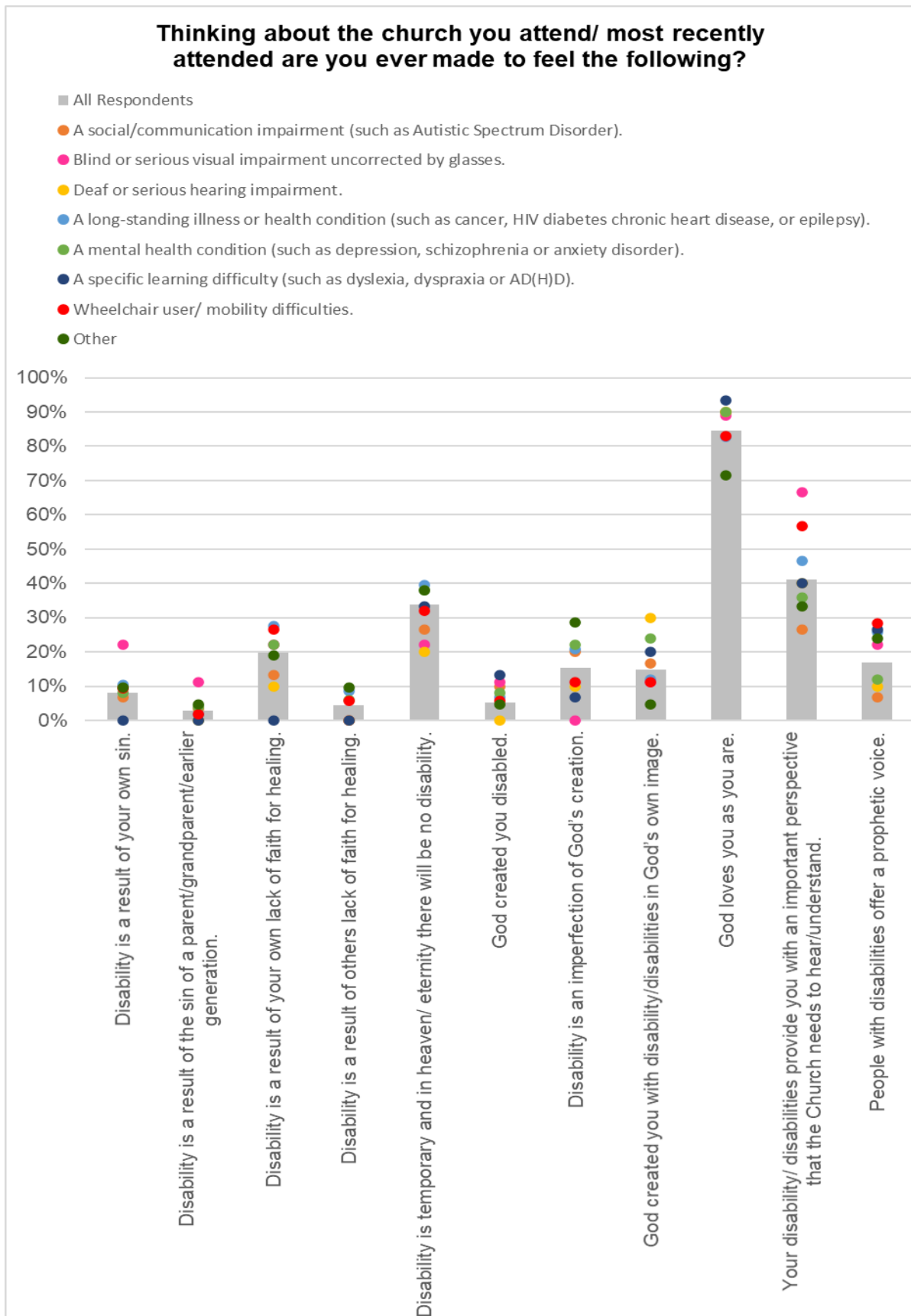


Figure 4: Access and Inclusion (Theological Messages) Disability Comparison

Whilst an average of 85% of respondents said they are made to feel *God loves them as they are* this figure drops to 71% for those who have indicated *Other* disabilities than those offered. Eighty-three percent of participants with MIs and those with LSIs are made to feel 'God loves them as they are', rising to 93% for respondents with Specific Learning Difficulties (SpLDs).

5.5. Inclusion and Participation

The 50 statements in the survey with *Agree*, *Disagree* or *Not Applicable* response options provide a wealth of insights into the face of the Church for adults with disabilities (*Figures 5 and 6*). The statement receiving the most *Not Applicable* responses was 'at church people only engage with my carer' which correlates with the lower percentage of respondents (13%) who indicated full-time care needs. Of the three people who agreed with this statement the range of complexity of disability includes mild, moderate and complex.

The question with the closest uniformity across all disabilities was 'I am the only person with disabilities in the church when I attend' with an average of 3% agreeing, 90% disagreeing and the remainder indicating this was not applicable to them. No

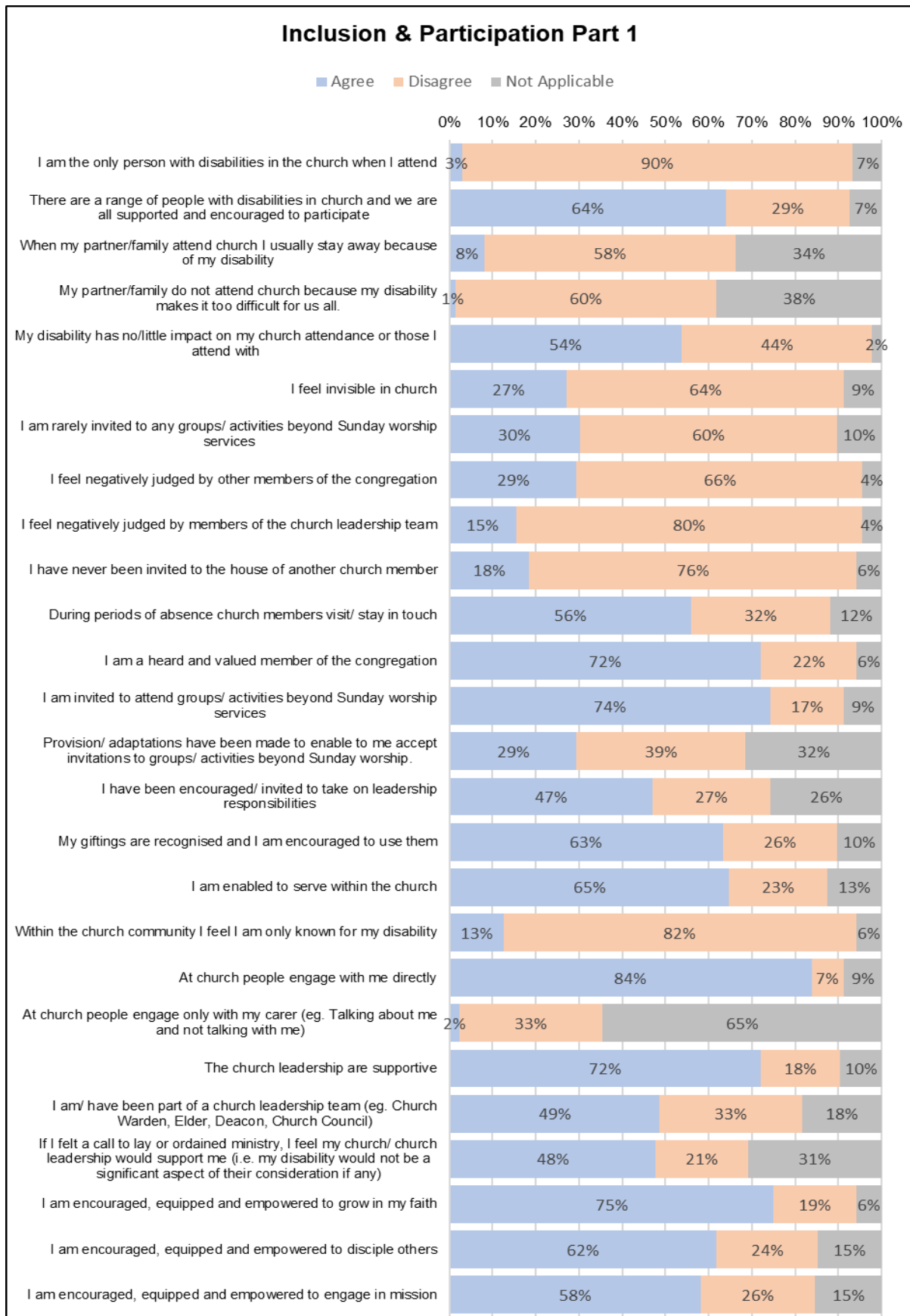


Figure 5: Inclusion and Participation (Part 1)

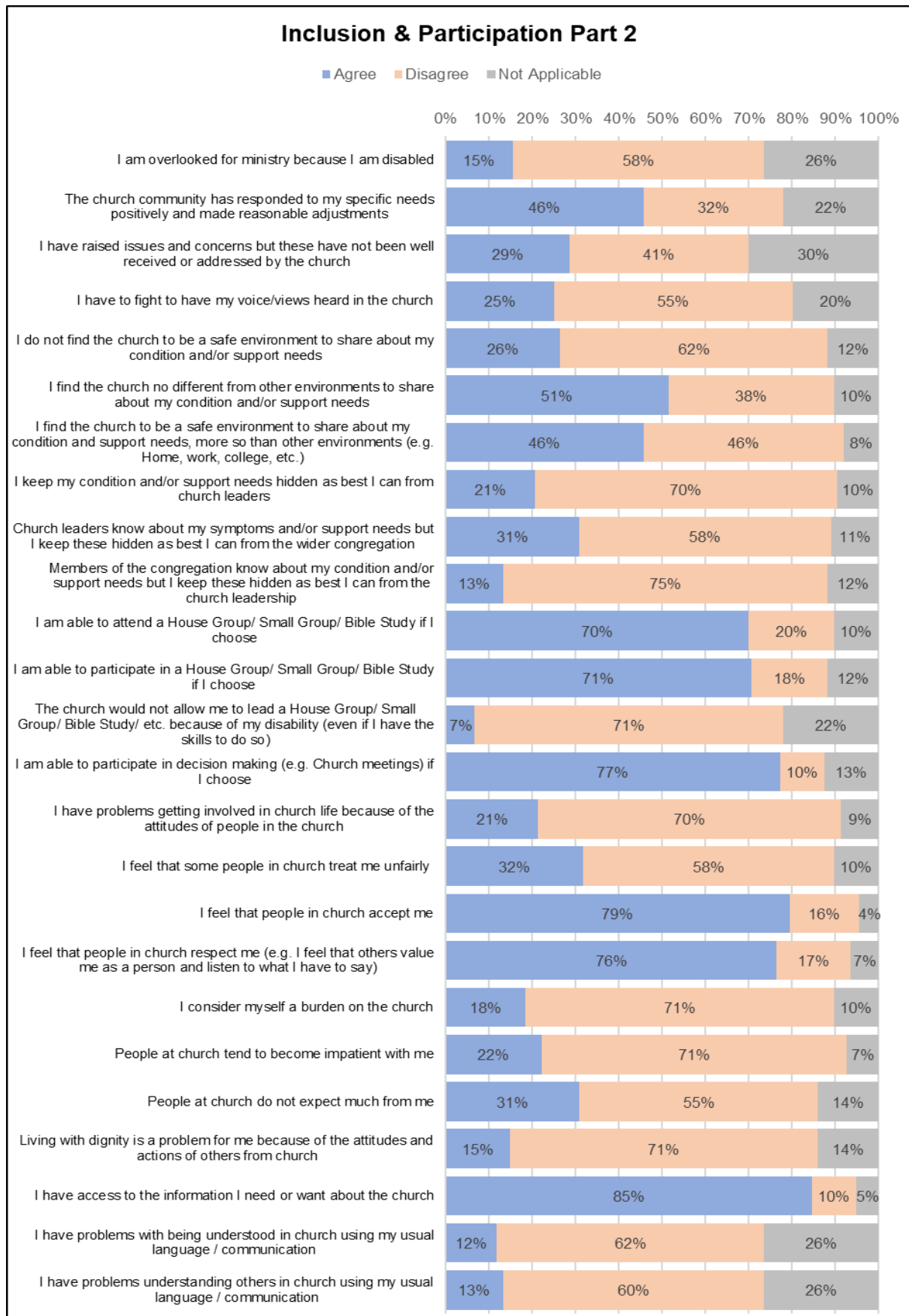


Figure 6: Inclusion and Participation (Part 2)

Deaf participants, nor those with SpLDs agreed with the statement, contrasting with 11% of those with SSI who did. The variance for disagreeing was also low, with 78% of SSI respondents compared with 94% of those with MHCs.⁸⁵

Respondents with SCIs and those with MHCs frequently responded similarly to the statements, consistently contrasting to responses of participants with SpLDs and those who are Deaf. For example, 90% of Deaf participants and 80% of those with SpLDs feel their giftings are recognised; they are encouraged to use them; and, they are enabled to serve within the church, compared with 37% of respondents with SCIs and 54% of those with MHCs.⁸⁶

Of Deaf respondents, 90% disagree (and none agree) with the statement 'I do not find the church to be a safe environment to share about my condition and/or support needs' alongside 73% of those with SpLDs.⁸⁷ Contrastingly, 40% of respondents with SCIs and 46% of those with MHCs disagreed, while 27% of respondents with SCIs felt the question was not applicable compared with 6% of those with MHCs. Of respondents with MHCs, 48% do not find the church to be a safe environment to share about their needs.⁸⁸

Significant divergence was reported regarding statements related to being equipped, encouraged and empowered to; 'grow in faith', 'disciple others', and 'engage in 'mission'.⁸⁹ As a general rule the percentage of respondents agreeing with these

⁸⁵ Appendix 2.5, Figure 36.

⁸⁶ Appendix 2.5, Figure 34.

⁸⁷ Appendix 2.5, Figures 36-37.

⁸⁸ Appendix 2.5, Figures 34-35.

⁸⁹ Appendix 2.5, Figure 34.

statements reduced from growing in faith to discipling others and further to engaging in mission. Those who are SSI and those with SpLDs indicated a greater engagement with mission than discipleship. These two categories of respondents were those with the widest divergence between those who agreed they are encouraged to grow in faith (89% and 93%) and empowered to disciple others (44% and 50%). It is those who are Deaf (100%) and those with SpLDs (93%) who are more likely to feel that are encouraged, equipped and empowered to grow in their faith, compared with respondents with SCIs (57%) and MHCs (60%).

Comparing those who are Deaf with those with SSI provides an interesting variety of responses where the answers converge and diverge. Examples include feeling reasonably in agreement regarding the church community responding to their specific needs and making reasonable adjustments (78%; 80%); church members staying in touch during periods of absence (67%;70%); being invited to groups and activities beyond Sunday worship (78%; 80%); and, being able to attend such groups if they choose (56%; 50%). However, those who are Deaf are more likely to feel encouraged to take on leadership responsibilities (60%); have their gifts recognised (90%); and, disciple others (90%), compared with those with SSI (33%, 56%, and 44%, respectively). A greater proportion of those who are SSI say their disability has no or little impact on their church attendance and who they attend with (78%) and find church no different from other environments to share about their condition and support needs (56%), compared with those who are Deaf (30%; 20% respectively).⁹⁰

⁹⁰ Appendix 2.5, Figures 34-35.

6. Patterns and Discussion

Two-thirds of respondents are able to attend church at least weekly, rising to more than three-quarters at least monthly.⁹¹ Church buildings are fully accessible to 66% of participants,⁹² which is comparable with the third of disabled people in the general population who experience difficulties in accessing public, commercial and leisure facilities.⁹³ Eleven-percent of respondents are unable to attend church more frequently than they do because of the inadequacy of the churches provision and 6% are unable to access worship and teaching at all. Eighty-five percent of participants have been made to feel that God loves them as they are by the church they currently attend. Seventy-two percent of participants say that they are heard and valued, with an equal number saying the church leadership are supportive. This compares with 23% of disabled adults who feel valued by society as a whole.⁹⁴ Seventy-five percent of participants are encouraged, equipped and empowered to grow in their faith, 79% say that they feel accepted by people in church, and 85% have access to the information they need or want.⁹⁵ It would be fascinating to compare these statistics with a control group inclusive of 'able-bodied' church-goers to better understand the impact of disability upon access and belonging – a consideration for additional research. This discussion explores patterns identified within the results, beginning with insights from each category of disabilities and subsequently assessing the themes related to access, diversity, inclusion and belonging.

⁹¹ Appendix 2.2, Figure 12.

⁹² Figure 2.

⁹³ Papworth Trust, *Facts and Figures 2018: Disability in the UK*, (Huntingdon: Papworth Trust, 2018), p.48, <<https://www.papworthtrust.org.uk/about-us/publications/papworth-trust-disability-facts-and-figures-2018.pdf>> [Accessed 1 April 2020].

⁹⁴ Ceri Smith and Simon Dixon, *Independent. Confident. Connected.* (Leeds: SCOPE, 2018), p.7, <<https://www.scope.org.uk/campaigns/independent-confident-connected/>> [Accessed 1 April 2020].

⁹⁵ Appendix 2.5, Figures 34-35.

6.1. Disabilities

Preliminary examination suggests adults who are Deaf and those with SpLDs have a higher probability of experiencing access, inclusion and belonging than those with MHCs and SCIs. However, due to lower proportion of respondents who are SSI, Deaf, or have SpLDs the results consistently present at the extremes. The results show those who are Deaf or SSI to more strongly *agree* or *disagree* with the survey statements, and whilst this may be accurate, the lower number of respondents means just one or two individuals influence the overall result. The results imply those who are SSI or Deaf frequently hold opposing views on issues of access and inclusion, it would be interesting to know if this is generally true; no existing research was identified comparing this phenomenon. Whilst the sample size is small, it does highlight the important factor that needs are diverse just as people are diverse. Peterson addresses the dilemma of diversity, with the knowledge that all require certain degrees of conformity. His contention is that ‘freedom is the guardian of diversity’⁹⁶ and for Christians, freedom is found in Christ. Peterson acknowledges the tension when people are viewed through the lens of ‘us’ and ‘them’ or in his language the ‘served’ and the ‘server’.⁹⁷ In reference to disability the ‘othering’ of people can be between ‘disabled’ and ‘abled’, or as the research highlights between different disabilities, such as SSI and Deaf. Contemporary language and movements of inclusion fail to address or achieve true diversity because of underlying motivations that those who have been excluded from a group become included

⁹⁶ Jim Petersen, *Church Without Walls* (Colorado Springs, CO: Navpress, 1992), p.146.

⁹⁷ Petersen, *Church Without Walls*, p.145.

within that community. For now, despite being included they are often still labelled as 'included' and thus continue to be 'other'.⁹⁸ It is noteworthy that this research sustains an 'othering' by distinguishing between church-goers and disabled church-goers. The challenge for the Church is not to baulk at the conflicting needs; either becoming paralysed by fear of getting it wrong or addressing a set of needs that favours one over another. Jesus's approach was to receive all, making room in his heart (not a building) for all, and the Church reflects this face when it treats 'others as persons and not as customers',⁹⁹ imitating God's nurturing and liberating power.

Given the highest proportion of respondents have an LSI, MHC, or MI (comparable to the general population),¹⁰⁰ it is inevitable these feature closest to the overall average in the results. Considering just these three disabilities, MHCs are the outlier, with respondents reporting a lower sense of inclusion and belonging than the others. This could imply distinctions between hidden and visible disabilities but the results are more nuanced. Hidden disabilities include MHCs, and SCIs, though also many LSIs (such as epilepsy and chronic fatigue syndrome). SpLDs are also encompassed within this categorisation for which the research does not offer the same pattern as MHCs and SCIs. Hypothetically, respondents with LSIs which are hidden compared with those which are visible may offset one another's responses; such distinction is not available within the available results and further research examining specific disabilities and conditions would be required to confirm this. The results suggest adults with MHCs are more likely to feel invisible, to keep their

⁹⁸ Brock, *Wondrously Wounded*, p.201.

⁹⁹ Gula, *Just Ministry*, p.9.

¹⁰⁰ University of St Andrews, *Facts on Disability* (St Andrews: University of St Andrews, N.D.) <<https://www.st-andrews.ac.uk/hr/edi/disability/facts/>> [Accessed 1 April 2020].

condition and support needs hidden, and to feel people do not expect much from them at church.¹⁰¹ They are also less likely to feel heard or valued, be enabled to serve, to feel supported by the church leadership, for the church to have responded positively to their needs and made reasonable adjustments for them to feel accepted and respected.

This chapter commends evidence that portrays the Church as presenting a face that is generally inclusive while showing room for improvement in all aspects of disability. However, the need is greatest with regards to mental health. Approximately one-in-four adults in the UK have a diagnosed MHC during their lifetime,¹⁰² so the needs are significant, and evidence suggests religious belief helps with resilience and improved recovery from MHCs.¹⁰³ Social exclusion is both a cause and effect of MHCs, arising (for example) from unemployment and poor social capita but also leading to isolation, loneliness and low self-esteem.¹⁰⁴ It is hoped this research will encourage churches to discuss disability generally and shift from asking about minimum requirements to continually considering what more can be done. If just one area of disability is to be addressed then in terms of prevalence, and lower sense of inclusion and belonging in church it must be mental health. The literature review presents both God and Church as relational. If humans are 'called to form

¹⁰¹ Appendix 2.5, Figures 34-37.

¹⁰² Ben Ryan, *Christianity and Mental Health: Theology, Activities, Potential* (London: Theos, 2017), p.7.

<<https://www.theosthinktank.co.uk/cmsfiles/archive/files/Christianity%20and%20Mental%20Health%20FINAL%20COPY%20FOR%20WEB.pdf>> [Accessed 1 April 2020].

¹⁰³ Ryan, *Christianity and Mental Health*, p.9.

¹⁰⁴ Sarah Payne, *Mental Health, Poverty and Exclusion* (Swindon: ESRC, 2012), p.2.

<[https://www.poverty.ac.uk/sites/default/files/attachments/Conceptual%20note%20No.%209%20-%20Mental%20Health%20\(Payne%20Dec2012\).pdf](https://www.poverty.ac.uk/sites/default/files/attachments/Conceptual%20note%20No.%209%20-%20Mental%20Health%20(Payne%20Dec2012).pdf)> [Accessed 1 April 2020].

relationships in order to be fully human',¹⁰⁵ then the Church needs to consider the issue of forming relationships with regards people with MHCs.

6.2. Access

This essay began with a quote from *The Twits* saying that beauty is observed through the good thoughts shining from a face regardless of cosmetic irregularities. The research demonstrates that a building with perhaps a wonky floor and a crooked screen can also be home to a church community providing meaningful access to worship and teaching. More than two-thirds of respondents in East Anglia reported fully accessible buildings compared with half this in North-West England.¹⁰⁶ However, fewer than half of the participants in East Anglia reported access to the primary worship and teaching compared with 93% of those in North-West England.¹⁰⁷ A similar disparity is revealed for Generation-Z with 93% reporting accessible buildings¹⁰⁸ compared with 57% accessing worship and teaching.¹⁰⁹ Anglican and Baptist Churches revealed comparable access; Baptists have fractionally more accessible buildings whilst Anglican worship is marginally more accessible.¹¹⁰ New Churches were the only other denominational category with more than 10 respondents and these scored highly for access to the building (80%) but dropped in reference to access to worship (60%) and zero for inclusive language or home provision. The face of the Church based on access alone is varied by need,

¹⁰⁵ Ryan, *Christianity and Mental Health*, p.27.

¹⁰⁶ Appendix 2.4, Figure 24.

¹⁰⁷ Appendix 2.4, Figure 29.

¹⁰⁸ Appendix 2.4, Figure 23.

¹⁰⁹ Appendix 2.4, Figure 28.

¹¹⁰ Appendix 2.4, Figures 25 and 30.

age, denomination and geography, but perhaps most significantly fully accessible buildings do not result in access to worship and teaching. The evidence appears to expose the practice of churches seeking to fulfil minimal criteria for access,¹¹¹ or viewing provision of access as a singular event – such that once people can get into a building, they consider the work is complete. Duggin writes, ‘it is lack of awareness that most commonly results in things being inaccessible’.¹¹² The research suggests that churches with buildings that are not fully accessible develop awareness of needs so as to overcome the flaws of the building to enable inclusion and belonging. Reynolds writes of how accessible spaces are a challenge in themselves but moreover how disabled people are excluded from participation or only included paternalistically.¹¹³ This is an issue of value.

It must not be forgotten that access to buildings is important, as one participant explained,

“Before ramps and lifts were installed access was very difficult and limiting.”

Access is the first stage towards belonging. Churches without fully accessible buildings should be seeking to make improvements yet as McCloughry highlights, rights and justice ‘have the capacity to open up public spaces, but they do not suggest what to do with them.’¹¹⁴ He reasons the absence of friendship is what helps

¹¹¹ McCloughry, *The Enabled Life*, p.103.

¹¹² Alistair Duggin, ‘What we mean when we talk about accessibility’ in *Accessibility in Government* (London: Civil Service, 2016) <<https://accessibility.blog.gov.uk/2016/05/16/what-we-mean-when-we-talk-about-accessibility-2/>> [Accessed 2 April 2020].

¹¹³ Thomas E. Reynolds, ‘Invoking Deep Access: Disability Beyond Inclusion in the Church’ in *Dialog*, 51:3 (Hoboken, NJ: Wiley, 2012), pp.212-223 [213], <<https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1540-6385.2012.00687.x>> [Accessed 2 April 2020].

¹¹⁴ McCloughry, *The Enabled Life*, p.33.

churches to understand the place (or lack of place) of disabled people within their community. Reinders encourages friendship as vocation that will change the lives of all involved.¹¹⁵ One respondent in Generation-Z attending church in East Anglia shared that they were recently supplied with a simple aid by the church which they did not realise they needed and have found it very helpful. Such insight from the church comes from a place of awareness which comes through relationship.

It is through friendship that understanding “access is not just physical” enters the consciousness of the Church and resolutions to remove barriers can be identified together, in relationship. Jack (speaking about racial diversity in elite U.S. colleges but appropriate to disability and church in UK) says, there are unwritten social and institutional rules and hurdles that continue to keep people out; ‘we must move from access to inclusion’.¹¹⁶

6.3. Diversity

Over half of participants indicated they have a role or position in church,¹¹⁷ from volunteer helper to leaders, staff and clergy, across the range of disabilities and complexities, which is comparable to the general population.¹¹⁸ Approximately two-thirds of participants agree their gifts are recognised and they are enabled to serve

¹¹⁵ Reinders, *Receiving the Gift of Friendship*, p.163.

¹¹⁶ Anthony Jack, ‘Access Ain’t Inclusion’, YouTube Video [12:42], (13 June 2019) <<https://www.youtube.com/watch?v=j7w2Gv7ueOc>> [Accessed 2 April 2020].

¹¹⁷ Appendix 2.2, Figure 14.

¹¹⁸ Office for National Statistics, *Disability and Social Participation, England: 2018* (London: ONS, 2019), <<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/disability/bulletins/disabilityandsocialparticipationengland/2018>> [Accessed 3 April 2020].

within church, with half encouraged to take on leadership responsibilities.¹¹⁹ Those in Generation-Z were considerably less likely to share in this feeling,¹²⁰ and the disparity between regions was significant; North-West England offering more opportunities than East Anglia by a variance of almost 50 percentage points with regards to being enabled to serve.¹²¹ One area where the divergence of responses between those born disabled and those with acquired conditions is most apparent relates to the recognition of gifts.¹²² Hypothetically those with acquired conditions have their gifts recognised before the onset of disablement which is not an option for those born disabled. Relationships are again crucial as Reynolds reasons, 'Deep love and fulfilment comes from being-with and witnessing each other's lives, learning from the gifts all bring to the table in different ways.'¹²³ Gula reasons one role of the church community is to develop gifts for the common good, and in so doing to glorify God. It is within community that a call to ministry is experienced, to serve the community and to be sustained by it.¹²⁴ If gifts are not recognised and given provision to be enacted, the spiritual development of both individual and church is hindered. The research suggests one-quarter of disabled adults in UK churches do not feel their gifts are recognised.¹²⁵ Brock contends rather than intending gifts of the Spirit to be seen and identified along the lines of which gift each person possesses, the Apostle Paul is seeking to cause the Church to ask '*How, here and now, do I embrace the giving of the Spirit?[sic.]*'.¹²⁶ Reynold's recognises the emergence of disability causes disruption because it is by its nature provoking and disturbing the

¹¹⁹ Figure 5.

¹²⁰ Appendix 2.5, Figures 40-41.

¹²¹ Appendix 2.5, Figures 44-45.

¹²² Appendix 2.5, Figure 48-49.

¹²³ Reynolds, 'Invoking Deep Access, p.217.

¹²⁴ Gula, *Just Ministry*, pp.16-17.

¹²⁵ Figure 5.

¹²⁶ Brock, *Wondrously Wounded*, p.213.

social, theological and ecclesiological normalities. He goes on to say that habitually the response to the disruption of disability, as with other differences, is discrimination and exclusion, but there is also the space for new possibilities to arise.¹²⁷ Brock suggests that the Apostle Paul is asking the Church to look again, and describes how in relationship with his son ‘it took time to receive the relationship that exists with this other member of the christic body *as it actually is* [sic.]’.¹²⁸ It is through relationship that gifts are recognised, which for example, allows a woman with Down Syndrome to play “Mary in the adult Nativity and have the role of server in our services.”

A number of participants reported having “never heard disability mentioned in church” with one particularly telling comment provided by someone who described themselves as single and childless. They spoke of having heard many sermons on marriage and parenting but none on disability, “not even the basics”, and certainly no teaching from the Bible. A brief survey of popular sermon hosting websites supports this claim.¹²⁹ Research reveals two-thirds of the general population feel uncomfortable talking to disabled people and nearly half do not know anyone who is disabled.¹³⁰ This alone is one reason churches may fail to include disability in the preaching and teaching, if those speaking are not comfortable with disability it is a subject that will not be addressed. From personal experience, the author of this

¹²⁷ Reynolds, ‘Invoking Deep Access’, p.216.

¹²⁸ Brock, *Wondrously Wounded*, p.221.

¹²⁹ Searching for the term “Disability” on www.sermonaudio.com returned 75 sermons compared with 13,917 for “marriage” and 3,019 for “parenting”. The same terms were searched at www.sermoncentral.com resulting in 2,015 returns for “disability”, 22,113 for “marriage”, and 32,030 for “parenting”. [Accessed 3 April 2020].

¹³⁰ Scope, *Brits feel uncomfortable with disabled people* (Leeds: Scope, 2014) <<https://www.scope.org.uk/media/press-releases/brits-feel-uncomfortable-with-disabled-people/>> [Accessed 3 April 2020].

research can share that besides consideration of mental health needs during teaching on pastoral care, fewer than two hours were given over to the subject of disability over three years of recent training for ordination.

In 2014 the Evangelical Alliance published an article titled 'Disability: the elephant in the church?'¹³¹ Six years later the research indicates too frequently this is the case. Literature relating to disability theology indicates that when disability is preached it is typically in the context of cause (sin) or a lack of faith for healing.¹³² The research reveals at least one-in-five disabled adults in the UK have been made to feel disability is a result of their own lack of faith for healing.¹³³ Participants disclosed pressure from church members for them to "be well" because "God doesn't want this for you". The language used in prayer was also highlighted as emblematic of the theology of the church. One participant who expressed a desire for their own healing and had experienced a wealth of prayer said "we need to pray from a place of love not of judgement, and reassuring the person that God values them whether or not he chooses to heal them, and that starts by the church valuing them too." Gaventa advocates for preaching on disability, suggesting passages and themes to aid preachers,¹³⁴ but prefaces this by recognising that the majority of communication is non-verbal. He advocates listening to the faith-stories of disabled people, embracing the learning that emerges with a willingness to be transformed before orating a

¹³¹ Evangelical Alliance, *Disability: the elephant in the church?* (London: Evangelical Alliance, 2014) <<https://www.eauk.org/church/stories/disability.cfm>> [Accessed 3 April 2020].

¹³² William C. Gaventa, 'Preaching Disability: The whole of Christ's body in word and practice' in *Review and Expositor: An International Baptist Journal*, 113:2 (Thousand Oaks, CA: SAGE, 2016), pp.225-242 [226], <<https://journals.sagepub.com/doi/10.1177/0034637316641022>> [Accessed 3 April 2020].

¹³³ *Figure 4.*

¹³⁴ Gaventa, 'Preaching Disability', pp.235-239.

sermon.¹³⁵ Gaventa does not place all responsibility upon the preacher, rather encouraging those with disabilities to aid the preacher in understanding their needs and empowering the preacher in their use of plain language, non-verbal communication, pictures, and symbols; becoming their guide to disability.¹³⁶ The approach advocated by Gaventa would address issues raised by participants about contents being “too tricky”, “too reliant on words” and “very emotional and metaphorical” language which is difficult to engage with. It could address sensory challenges, such as ambient noise and other auditory processing needs and visually busy environments. Again, this takes a relational approach to understanding needs, collaborating for positive outcomes, however it falls short of the disabled person becoming the preacher, which would be an indication of belonging.

6.4. Inclusion

Gaventa’s approach to preaching on disability is not simply focused on the sermon but humble enquiry and comprehension of disability developed through relationship. Disabled people should be included in all aspects of church life, which involves incorporating them in the language used. The research found that just one-in-four adults with disabilities experience inclusive language in worship services.¹³⁷

Comments included,

“Service leaders often forget to use inclusive language.”

“Language does not include me as disabled and LGBTQ.”

¹³⁵ Gaventa, ‘Preaching Disability’, p.226.

¹³⁶ Gaventa, ‘Preaching Disability’, pp. 240-241.

¹³⁷ *Appendix 2.4, Figure 30.*

It has been revealed that 49% of people with disabilities in the UK feel excluded from society.¹³⁸ An average of 27% of participants revealed they feel invisible in church, including just under a quarter of those with MIs and almost half of respondents with MHCs.¹³⁹ This research implies the Church is more inclusive than society, which is positive but not satisfactory given the low benchmark. Furthermore, the research has only attracted participants who engage with church. Evidence shows disabled people are less likely to attend worship than persons without disabilities,¹⁴⁰ although research also reveals participation in a faith community generally aids well-being.¹⁴¹

One-in-seven participants (including those with mild or moderate needs) revealed that other people at church do not engage with them directly,¹⁴² less than half of whom require a full-time carer. One respondent described their church as “perfect”, for many it appears this is not the case. For those who are able to access the building and attend worship, social exclusion presents itself as follows:

- Anxiety in large assembled groups;
- Being unable to stand, or limited to standing for short periods, and therefore excluded by not being able to hear or engage in conversation during social gatherings before and after church which routinely involve standing;

¹³⁸ Smith and Dixon, *Independent. Confident. Connected.*, p.7.

¹³⁹ Appendix 2.5, Figure 34.

¹⁴⁰ Gerry Hendershot, 'A Statistical Note on the Religiosity of Persons with Disabilities' in *Disability Studies Quarterly*, 26:4 (Eureka, CA: Society for Disability Studies, 2006) <<https://dsq-sds.org/article/view/813/988>> [Accessed 4 April 2020].

¹⁴¹ Local Government Association, *Working with Faith Groups to Promote Health and Wellbeing* (London: LGA, 2017), p.9, <<https://www.local.gov.uk/sites/default/files/documents/working-faith-groups-prom-6ff.pdf>> [Accessed 4 April 2020].

¹⁴² Appendix 2.5, Figure 34.

- Relying on carers who may be unable to support regular church attendance, or when attending church being situated in a position that limits social interactions, “meaning the church isn’t aware of what they need to do to include us”.

As hitherto discussed, Peterson advocates freedom found in Christ as the guardian of diversity and Reinders promotes the idea of friendship as a life changing vocation. Reinders argument is that participation (and therefore inclusion) ‘does not depend on personal freedom but on shared practices of communion’¹⁴³.

The literature review included Swinton’s quote, ‘*To be included you just need to be present. To belong you need to be missed.*’¹⁴⁴ The research indicates that to be included does not *just* require presence, inclusion requires engagement. However, the principal of being missed as a measure of belonging is significant. Only 11% of participants reported some form of home provision for communion or prayer offered by the church when they are unable to attend.¹⁴⁵ This figure drops to 7% for people disabled since birth and 6% for adults with complex needs, however the Anglican Church is shown to offer more home provision (18%) than its Baptist counterpart (11%).¹⁴⁶ The figures improve to an average of 32% for the broader question of church members visiting and staying in touch,¹⁴⁷ leaving two-thirds of disabled adults receiving no contact from church when they are unable to attend.

¹⁴³ Reinders, *Receiving the Gift of Friendship*, pp.161-162.

¹⁴⁴ Swinton, ‘From Inclusion to Belonging’, p.184.

¹⁴⁵ *Figure 3.*

¹⁴⁶ *Appendix 2.4, Figure 30.*

¹⁴⁷ *Appendix 2.5, Figure 24.*

One participant wrote of the assurance that should they be absent from church they could,

“guarantee that someone would make the service accessible online or someone would meet me”.

They went on to say, “it is perfect”. Comparably, weekly visits to a care home by a Minister or other church members described another positive example. These comments contrast with the respondents who stated,

“No home worship offered”;

“When unwell I see/hear from nobody like I don’t exist”;

And, “I feel I have fallen off the radar and my faith is affected by not being around other Christians”.

Concern was also expressed that home communion, prayer or visits are only provided upon request, meaning that “people with mental health needs may miss out” because they “cannot always ask for support when they need it”. A further response reflected on the positive welcome of the church and of receiving cards during periods of absence from worship but “no offers of home visit or communion”.

In 2002 Block wrote, ‘Those who participate in actions that deny access, intentionally or unintentionally, bear a heavy burden.’¹⁴⁸ Access is just the beginning, the research indicates that despite the significant proportion of disabled adults being able to access churches in 2020 there is a considerable work required to achieve inclusion. Barr declares to his own denomination, ‘It is our responsibility to ensure that the

¹⁴⁸ Block, *Copious Hosting*, p.117.

body of Christ is not broken by exclusion.’¹⁴⁹ The same message applies across denominations; it is not someone else’s responsibility to be inclusive. It is the responsibility of the whole Church, the spirit-enacted body of Christ, to be in communion with the whole body – including those who we have shown, by our actions, to be thought of as ‘less than honourable’.¹⁵⁰ If,

it is of the essence of being church to believe the message of the gospel which asks for repentance and faith, to demonstrate this through being baptised, and then to be devoted to the community of the church which is informed by the apostles.¹⁵¹

Then, regarding disability the Church should repent and, with a willingness to be transformed, devote itself to those who are disabled. In the words of Fritzson and Kabue, ‘Some aspects of God’s image in Christ can only be reflected in the Church as the body of Christ by full inclusion and honouring of those who have bodies that are likewise impaired.’¹⁵²

6.5. Belonging

The research reveals one-in-five disabled adults are not encouraged, equipped or empowered to grow in faith, with a quarter not enabled to disciple others or engage in mission.¹⁵³ Though two-thirds of disabled adults report being heard and valued in church, more than one-in-five disagree, rising to almost one-in-three adults with

¹⁴⁹ Russell Barr, in *Learning Disability Action Pack* by Learning Disability Action Group (Edinburgh: Church of Scotland, 2017), p.5.
<https://www.churchofscotland.org.uk/data/assets/pdf_file/0003/43491/Learning_Disability_Action_Pack.pdf> [Accessed 10 February 2020].

¹⁵⁰ 1 Corinthians 12:23.

¹⁵¹ Wright, *Free Church, Free State*, p.20.

¹⁵² Fritzson and Kabue, *Interpreting Disability*, p.72.

¹⁵³ *Figure 5*.

MHCs.¹⁵⁴ On average 15% of disabled adults feel that they are overlooked for ministry specifically because of their disability, for people with LSIs this becomes 20%, and 25% for those with MHCs.¹⁵⁵

One participant spoke of a sense of being personally valued and enabled to participate in the life of the church as much as they chose but added, “it’s my views and challenges about disability issues that they don’t value”. This reflection emphasises the homogeneous face of Church, which requires fitting in with the accepted customs and rules (both written and unwritten) of the majority group but without full reciprocation. This echoes Reynolds notion of paternalistic inclusion, which can ‘be deceptively marginalizing, functioning implicitly as forms of exclusion’¹⁵⁶ even with honourable intentions. On the scale from accessibility to belonging, such a church could be described as best as inclusive, but to belong the voice must be heard and result in action. The task of the Church is not to inculcate people into conformity with the local incarnation of church, but as Peterson reasons, to invite people to conform to Christ in the context of their own culture and character.¹⁵⁷ When the Church hears the voice of all members, she will profit from prophetic insights necessitating repentance and ultimately leading to being further transformed into the likeness of Christ. When the Church chooses not to listen, it is little wonder when someone who describes themselves as holding the role of “accessibility representative” for their church, emphasises how hard they have to work to get anything done, saying it was “ironic and sad”. What is especially sad is

¹⁵⁴ *Appendix 2.5, Figure 34.*

¹⁵⁵ *Figure 6.*

¹⁵⁶ Reynolds, ‘Invoking Deep Access’, p. 213.

¹⁵⁷ Petersen, *Church Without Walls*, p.146.

the research shows 15% of disabled adults feel negatively judged by members of church leaderships, a figure that doubles in relation to the wider congregation.¹⁵⁸

One consideration with regards to some MHCs is that perceived negative judgement may be the illness talking. There is enough evidence to signal this cannot be used as excuse or reasoning for all cases. Excluding the figures respondents with MHCs only generates a minor alteration with the feeling of negative judgement felt by adults with disabilities from the Church. This should be of considerable concern for the Church, as a judgemental church results in Christianity itself keeping people from Christ.¹⁵⁹

A quarter of participants report having to fight to have their voice heard and the same number do not find the church to be a safe environment to share about their needs, with a further 50% who find church no safer than any other setting.¹⁶⁰ Barth contends that the world does not need 'another variation of its own way, but to be pointed beyond it in unambiguous practice.'¹⁶¹ He goes on to say,

[The Church exists to follow Christ in what he does], and therefore to set up in the world a new sign which is radically dissimilar to its own manner and which contradicts it in a way which is full of promise.¹⁶²

This research does not reveal the Church to be offering that new sign for disabled adults, although there are glimmers of hope. As one participant wrote,

¹⁵⁸ Figure 5.

¹⁵⁹ Yancey, *Church: Why Bother?*, p.19.

¹⁶⁰ Figure 6.

¹⁶¹ Karl Barth, *Church Dogmatics: IV/3.2 The Doctrine of Reconciliation*, [779] trans. By G. W. Bomiley (London: T&T Clarck, 2010), p.96.

¹⁶² Barth, *Church Dogmatics: IV/3.2* [779], p.96.

“My church made me feel welcomed, loved, and accepted for who I am, as I was, when it felt very different in the rest of society”.

To have one’s voice heard requires a safe environment in which to raise one’s voice (or typical forms of communication) and the research has found the Church does not offer this. Anglican’s are 15 percentage points more likely than Baptists to feel they have to fight to have their voice heard,¹⁶³ a possible consequence of the contrasting ecclesiological structures of episcopal and congregational polity. Conversely, Anglican’s are 12 percentage points more likely than Baptist to find the church a safe environment (compared with other settings) to share about their condition and support needs. Women are 24 percentage points more likely than men to find the church an unsafe place to share about their needs.¹⁶⁴

Despite the research only attracting adults who are in some way connected with the church (and not those fully disconnected or never engaged), the face of the Church is lacking as a community of belonging to and with disabled adults.

7. Lessons & Recommendations

For the research to have any benefit, consideration must be given to the lessons learned and practical recommendations the Church (institutional and community) can take to progress from access to belonging. The principal lesson is that adults labelled ‘disabled’ are not considered of equal value to those considered ‘able’. Too often Church is no better than wider society and if Church is to move beyond access to belonging, authentic relationships that foster respect are fundamental.

¹⁶³ *Appendix 2.5, Figure 47.*

¹⁶⁴ *Appendix 2.5, Figure 47.*

7.1. Access

The sign on the door might read “All Are Welcome” but no single church can accommodate everyone. It was acknowledged by one participant that

“our church tries to be open accepting and inclusive but it struggles when to do this for one person makes it difficult for another”.

The research shows that access to church buildings is reasonable, with welcome improvements of recent decades driven predominantly by legislation. Several participants commented about sensory needs with additional references stating “access is not just physical”. Denominations and para-church organisations have produced ‘access audits’¹⁶⁵ for buildings and the recommendation is for local churches to heed the guidance and move from a position which one participant phrased as “we’ve done all we can” to “is there anything else we can do?”

An access audit should not be a single event or a tick-box exercise, but a live analysis, regularly reviewed and actioned, demonstrating an inclusive attitude and willingness to engage with fluctuating needs.

7.2. Diversity

¹⁶⁵ Examples of Access Audits include Church of Scotland <https://www.scotland.anglican.org/vestry-resources/buildings/access-audit-checklist/> and Church of England <https://www.london.anglican.org/kb/provision-for-people-with-disabilities/> [Accessed 4 April 2020].

Pastors and preachers have a responsibility to include disability in the teaching of the Church. Through Bible studies and sermon series, disability is a subject that involves people, is addressed throughout scripture, and should not be as one participant described, “very niche”.

The recommendation of the research echoes Gaventa¹⁶⁶ and Reinders¹⁶⁷ challenge to cultivate relationships with those labelled ‘disabled’. Christian leaders must set an example; to be willingly transformed through relationship and allow their theology to be tested by the crucible that is disability.¹⁶⁸

Due to contrasting needs not everyone can always be included. Yet a diverse, relational and Kingdom-minded approach can include supporting people to find an alternative worshipping community. This may raise questions of orthodoxy and ecclesiology but there are situations when ecumenical differences should be set aside to promote discipleship. One participant remarked,

“I have found Baptist services increasingly difficult to access due to a lack of structure and routine. As a result, I mostly worship in Anglican contexts now.”

There may be learning for Baptist churches from this particular example, though it is an opportunity to celebrate someone finding an agreeable context for worship. This recommendation should not be interpreted as an excuse for not engaging and including disabled adults. Rather, as one instrument in a diverse toolkit, and, rooted

¹⁶⁶ Gaventa, ‘Preaching Disability’, pp.235-239.

¹⁶⁷ Reinders, *Receiving the Gift of Friendship*, p.163.

¹⁶⁸ Brock, *Wondrously Wounded*, p.95.

in relationship support given to encourage, equip and empower the growing of faith, discipleship and mission in a contextually relevant environment.

7.3. Inclusion

Language that includes disabled adults is important in all aspects of the life of the church. Amending language, to remind people they do not have to stand to sing or that not participating in the sharing of 'the peace' is permissible, carries no costs.

In addition to spoken words in a church service, signs and images displayed around the building or on the church website illustrate who is included. Beyond an access audit, denominationally and institutionally the Church would benefit from an inclusion audit, moving beyond whether people can get into the building to whether they are included in the community of believers. In 2018, the Church of England launched a set of resources aiming to move beyond access to inclusion. The resource shows promise stating, 'Disabled people are already here, and should have as much opportunity as others to develop in leadership and vocation'.¹⁶⁹ However, the associated audit referred to as an 'Access Appraisal'¹⁷⁰ focusses largely on the building and makes no mention of reviewing inclusion of disabled adults in community life, faith growth, discipleship or mission, or whether disabled people participate in conducting the appraisal. The Baptists Together guidance refers to

¹⁶⁹ Church of England, *A Place to Belong*, (London: Church of England, 2018), p.1, <<https://www.churchofengland.org/sites/default/files/2018-07/A%20place%20to%20belong%20Guide.pdf>> [Accessed 3 April 2020].

¹⁷⁰ Church of England, *A Place to Belong: Template for an Access Appraisal* (London: Church of England, 2018), p.1, <<https://www.churchofengland.org/sites/default/files/2018-07/A%20place%20to%20belong%20Template%20for%20audits.doc>> [Accessed 3 April 2020].

'Disability Issues'.¹⁷¹ Whilst saying, 'If we truly value the person with a disability we will want to see that that they are not disadvantaged but are welcomed, included and enabled to participate',¹⁷² the guidance refers to access and sits within Legal and Operations guidance, not Ministries or Faith and Society.

An inclusion audit can take into consideration aspects of how the building is used; the layout of rooms to encourage interaction whilst allowing for those who benefit from space. Furthermore, such an audit could look at access to the community and sacraments for those unable to attend church. Technology may have a significant role to play; participants referred to the availability of live streamed sermons online. As the research is being finalised, Covid-19 has brought about unprecedented restrictions and as such new challenges and opportunities. Churches have adopted a range of tools to keep in touch virtually (which anecdotally has increased inclusion for some previously excluded adults and probably vice-versa).¹⁷³ Church communities will need to review how these tools can be utilised to offer inclusion when customary church gatherings resume.

As one respondent mentioned, this does not make up for the personal interactions and how to be included in communion. Theological divergence such as consubstantiation and memorialist are just one aspect, the need for two or three to gather in order to administer the sacraments requires further practical consideration.

¹⁷¹ Baptists Together, *Guideline Leaflet L12*, p.1.

¹⁷² Baptists Together, *Guideline Leaflet L12*, p.2.

¹⁷³ Baptist's Together, 'Keeping your church community connected during the Coronavirus shutdown' in *Good Practice Guidelines* (Didcot: BUGB, 2020), https://www.baptist.org.uk/Articles/569110/Keeping_your_church.aspx [Accessed 4 April 2020].

7.4. Belonging

The Church needs to actively demonstrate that disabled people belong. Belonging of disabled adults transforms the church, not by supernatural miracles (though God is miraculous) but by the miracle of incarnation: God with us, disability with us. If God is in and with those labelled 'disabled' then the Church is disabled by excluding them. The most significant recommendation is for the Church to adopt a change of attitude, to move from 'preaching at' towards 'listening to', and from defensiveness to openness.

The Church (members and leaders) needs to repent of ideas and attitudes that result in exclusion and neglect. Access has been enforced by legislation, diversity and inclusion are creeping forward as disability theology advances. Yet the research reveals belonging, that is to have 'your voice heard at the table',¹⁷⁴ to be lacking.

It is the proposition of the author that the Church pursues a theology of disability that celebrates the contradictory diversity of difference and disabled belonging, with the miraculous healing of impairment, the whole individual and the whole community. In other words, disabled people must be welcome as they are, to be and to worship as they are, included amongst the disciples and disciplers as they are, just as those labelled 'able-bodied'. The Church needs to comprehend that together we are transformed into the likeness of Christ by the gifts *all* bring to the communion of saints.

¹⁷⁴ Lindsay, 'We Need to Talk About Race' (29 October 2019).

8. Conclusions

The research sought to identity the face of the UK Church for adults with disabilities. Existing literature suggests the driving force behind improvements to building access was external, with the emergence of the disability theology making significant but limited inroads into the Church's consideration of inclusion. The Church is said to be the Body of Christ, that is a diverse community which values the gifts of all members, especially those perceived as weak and vulnerable.¹⁷⁵ However, the literature indicated exclusion is a way of life for disabled adults, including exclusion from the sacraments.¹⁷⁶ It was hypothesised that the gifts of disabled adults would be overlooked and that the more noticeable and profound a disability the fewer openings there would be for discipleship and discipling. The expectation was for the Church to continue to lag behind society with regards to access, diversity, inclusion and belonging but with hope for positive examples that go against this trend and offer prophetic inclusion and belonging from which the wider Church and society can learn.

The self-selecting nature of the research led to an all-white group of participants, the majority responding with reference to Baptist or Anglican denominations. All respondents either currently attend or have attended church, and those who no longer attend report being open to returning or being unable to attend because of disability. The research therefore, does not include those who have never attended or who only attend for special occasions (such as Occasional Offices). Therefore, the voice of Damien Rose, author of the 2019 article discussed in the literature review,

¹⁷⁵ 1 Corinthians 12.

¹⁷⁶ Block, *Copious Hosting*, pp.115-116.

and others like him, is not heard in the results. Further research to incorporate non-churched adults, and increased ethical and cultural diversity (including comparative experiences of non-disabled adults), would present a clearer image of the face of the UK Church. Judging from comments reported in the research of a church unwilling to listen it may not be an appearance the Church will readily accept.

On the whole the research supports the literature and the predicted discoveries of the face of the Church. There are issues with access; not everyone can enter every room and consideration beyond physical access needs is limited. There are resources and audits available to enable local churches to consider these matters. On the issue of access overall, the Church mirrors society.

All too often, the research found the Church's silence on disability speaks volumes. The research indicates 85% of disabled adults engaged with church are made to feel "God loves them as they are" by the Church.¹⁷⁷ However, despite the proliferation of disability in society and church the research reveals this is not a subject that is common in preaching or teaching and just one-in-four disabled adults experience inclusive language in church.

The research calls for a change of attitude. Resources are available to support churches who wish to increase inclusion and transition to communities of belonging, however until attitudes change such resources will gather dust.¹⁷⁸ As with the two-

¹⁷⁷ Figure 4.

¹⁷⁸ Kay Morgan-Gurr, 'Disability inclusion: why it's about more than a ramp', in *Christianity Today* (26 July 2018) <www.christiantoday.com/article/disability-inclusion-why-its-about-more-than-a-ramp/130083.htm> [Access 4 April 2020].

thirds of the population who feel uncomfortable talking to disabled people,¹⁷⁹ the barrier to inclusion is thin but significant. To overcome it requires a desire to become friends, to become vulnerable, listen, repent and learn. The belonging of people labelled 'disabled' transforms the church community, and the belonging of the Church in a person's life transforms the individual. Jesus' resurrected body remains disabled by the scars of crucifixion and yet healed from the forsakenness of death. Healing is not only the supernatural removal of an individual's impairment (as wonderful as this can be) but restoration of relationship in vulnerable communion regardless of labels of ability. Christians, and especially church leaders, have a responsibility to become incarnate in the lives of disabled people and be open to disabled people being incarnate in their lives, for the benefit of the Church, and witness to the world, as the whole body of Christ.

More than 15 years since legislation required churches to make reasonable adjustments, disabled people are still 'struggling to bring about change in a church that still does not understand their needs'.¹⁸⁰ The research does reveal the Church to be more inclusive than society, for those disabled adults who engage with the Church. Whilst most people are able to access buildings, there are feelings of social exclusion, with omission from discipleship and opportunities to disciple. Dahl wrote that thoughts are exposed by the face;¹⁸¹ the research suggests that in general the face of the Church portrays a welcome into a building and an invitation to the table. It is a face that expresses some disabled adults have a voice, although there is a

¹⁷⁹ Scope, *Brits feel uncomfortable with disabled people* (2014).

¹⁸⁰ Wayne Morris, *Theology without Words: Theology in the Deaf Community* (Aldershot: Ashgate, 2008), p.122.

¹⁸¹ Dahl, *The Twits*, p.7.

postcode lottery and if what is said will require changes the face all too often becomes unreceptive, revealing accessible churches in which disabled adults find no greater sense of belonging than in society as a whole.

9. Recommendations for Further Research

The research provides insights into the face of the UK Church to adults with disabilities but there are limitations that would benefit from additional research. The recommendations for further research include, but are not limited to:

- Extending the research to deliberately increase the range of ethnic, regional and denominational diversity, as well as those who are 'de-churched' or 'non-churched'¹⁸².
- Expanding the methodology to enable participation for those whom an online survey is not accessible; whether due to internet access, disability or other reasons.
- Broadening the scope of the research to enable a control group to compare the face of the Church to disabled adults with that of those who are 'able-bodied'.

¹⁸² Jacinta Ashworth and Ian Farthing, *Churchgoing in the UK* (Teddington: Tearfund, 2007), p.13, <http://news.bbc.co.uk/1/shared/bsp/hi/pdfs/03_04_07_tearfundchurch.pdf> [Accessed 2 April 2020].

- Increasing categories (or at least sub-categories) of disability, so as to establish patterns between visible and hidden disabilities, and to include people labelled as having intellectual disabilities.

Bibliography

Bibles

All quotations are from the New Revised Standard Version (NRSVA) unless otherwise indicated.

New Revised Standard Version Bible (NRSVA): Anglicised Edition (Cambridge: Cambridge University Press, 1995)

Books

Barth, Karl, *Church Dogmatics: IV/3.2 The Doctrine of Reconciliation*, trans. by G. W. Bomiley (London: T&T Clarck, 2010)

Block, Jennie Weiss, *Copious Hosting: A Theology of Access for People with Disabilities* (New York, NY: Continuum, 2002)

Bosch, David J., *Transforming Mission: Paradigm Shifts in Theology of Mission* (Maryknoll, NY: Orbis Books, 2014)

Bowen-Evans, Kate, *A Disabled Reading of 1 Corinthians 12:12-27, The Body of Christ* (Unpublished Masters Dissertation) (Manchester: Nazarene Theological College, 2019)

Brock, Brian, *Wondrously Wounded: Theology, Disability, and the Body of Christ* (Waco, TX: Baylor University Press, 2019)

Calvin, John, *Institutes*, vol. 2, in *Calvin's Institutes: A New Compend* trans. by T Kerr, Hugh, ed. by Battles, Ford Lewis (Louisville, KY: Westminster/John Knox Press, 1989)

Dahl, Roald, *The Twits* (London: Puffin Books, (1980) 2001)

Ferguson, Everett, *The Church of Christ: A Biblical Ecclesiology for Today* (Grand Rapids, MI: William B. Eerdmans, 1996)

Fritzson, Arne, and Kabue, Samuel, *Interpreting Disability: A Church of All and for All* (Geneva: WCC Publications, 2004)

Garland, David E., *1 Corinthians*, Baker Exegetical Commentary on the New Testament (Grand Rapids, MI: Baker Academic, 2003)

Greene, Mark, *The Great Divide*, (London: LICC, 2010)

Gula, Richard M., *Just Ministry*, (Mahwah, NJ: Paulist Press, 2007)

Hammett, John S., *Biblical Foundations for Baptist Churches* (Grand Rapids, MI: Kregel Publications, 2005)

Hays, Richard B., *First Corinthians*, Interpretation (Louisville, KY: John Knox Press, 1997, 2011)

Heslop, Pauline and Emerson, Eric, 'A Worsening Picture: Poverty and Social Exclusion and Disabled People' in *Poverty and Social Exclusion in the UK: Volume 1*, Ed. by Esther Dermott and Gill Main (Bristol: Policy Press, 2018), pp.173-193.

Ignatius, 'The Letters of Ignatius, Bishop of Antioch to the Smyrnaeans' in *The Apostolic Fathers* (2nd Edn.) ed. by Michael W. Holmes, Trans by J. B. Lightfoot and J. R. Harmer (Leicester: Apollos, 1989), pp.110-115.

Kärkkäinen, Veli-Matti, *An Introduction to Ecclesiology* (Downers Grove, IL: InterVarsity Press, 2002)

Küng, Hans: *On Being Christian*, trans by Edward Quinn (London: Collins, 1977)

Luther, Martin in *Luther's Works Volume 39: Church and Ministry I*, Ed. by Eric W. Gritsch (Philadelphia, PA: Fortress Press, 1970)

Mackelprang, Romel W. and Salsgiver, Richard O., *Disability: A Diversity Model Approach in Human Service Practice*, 3rd Edn. (Oxford: Oxford University Press, 2016)

McCloughry, Roy, *The Enabled Life: Christianity in a Disabling World* (London: SPCK, 2013)

Morgan, Alison, *Following Jesus: The Plural of Disciple is Church* (Wells: Somerset, 2015)

Morris, Wayne, *Theology without Words: Theology in the Deaf Community* (Aldershot: Ashgate, 2008)

Petersen, Jim, *Church Without Walls* (Colorado Springs, CO: Navpress, 1992)

Reinders, Hans S., *Receiving the Gift of Friendship: Profound Disability, Theological Anthropology and Ethics* (Grand Rapids, MI: William B. Eerdmans, 2008)

Taylor, Richard, *How to Read a Church: A Guide to Symbols and Images in Churches and Cathedrals* (Mahwah, NJ: HiddenSpring, 2005)

Volf, Miroslav, *After Our Likeness: The Church as the Image of the Trinity* (Grand Rapids, MI / Cambridge: William B. Eerdmans, 1998)

Wright, Nigel G., *Free Church, Free State: The Positive Baptist Vision* (Eugene, OR: Wipf & Stock, 2005)

Yancey, Philip, *Church: Why Bother?* (Grand Rapids, MI: Zondervan, 1998)

Journal Articles

Creamer, Deborah Beth, 'Disability Theology' in *Religion Compass* 6:7 (Hoboken, NJ: Wiley, 2012), pp.339-346, <<https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1749-8171.2012.00366.x>> [Accessed 10 February 2020].

Eiesland, Nancy, 'Sacramental bodies', in *Journal of Religion, Disability and Health*, 13:3/4 (London: Taylor and Francis Online, 2009), pp.236-246, <<https://www.tandfonline.com/doi/abs/10.1080/15228960902931830>> [Accessed 10 February 2020].

Gaventa, William C., 'Preaching Disability: The whole of Christ's body in word and practice' in *Review and Expositor: An International Baptist Journal*, 113:2 (Thousand Oaks, CA: SAGE, 2016), pp.225-242, <<https://journals.sagepub.com/doi/10.1177/0034637316641022>> [Accessed 3 April 2020].

Gill, Malcolm, 'Missing in Action: Theological Reflection on the Absence of the Aged, Poor, and Disenfranchised in Contemporary Church Planting Movements' in Brian Brock, John Swinton and Jana Bennett (Eds.), *Journal of Disability and Religion*, 21:1 (Philadelphia, PA: Taylor and Francis, 2017), pp.84-97.

Hendershot, Gerry, 'A Statistical Note on the Religiosity of Persons with Disabilities' in *Disability Studies Quarterly*, 26:4 (Eureka, CA: Society for Disability Studies, 2006), <<https://dsq-sds.org/article/view/813/988>> [Accessed 4 April 2020].

Reynolds, Thomas E., 'Invoking Deep Access: Disability Beyond Inclusion in the Church' in *Dialog*, 51:3 (Hoboken, NJ: Wiley, 2012), pp.212-223 [217], <<https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1540-6385.2012.00687.x>> [Accessed 2 April 2020].

Swinton, John, 'From Inclusion to Belonging: A Practical Theology of Community, Disability and Humanness' in *Journal of Religion, Disability & Health*, 16:2 (London: Taylor & Francis, 2012) pp.172-190, <<https://www.tandfonline.com/doi/abs/10.1080/15228967.2012.676243>> [Accessed 10 February 2020].

Websites

Ashworth, Jacinta and Farthing, Ian, *Churchgoing in the UK* (Teddington: Tearfund, 2007), <http://news.bbc.co.uk/1/shared/bsp/hi/pdfs/03_04_07_tearfundchurch.pdf> [Accessed 2 April 2020].

Baptist's Together, 'Keeping your church community connected during the Coronavirus shutdown' in *Good Practice Guidelines* (Didcot: BUGB, 2020),

<https://www.baptist.org.uk/Articles/569110/Keeping_your_church.aspx> [Accessed 4 April 2020].

Baptists Together, *Guideline Leaflet L12: Churches and Disability Issues* (Didcot: BUGB, 2017),

<<https://www.baptist.org.uk/Publisher/File.aspx?ID=111328&view=browser>> [Accessed 15 January 2020].

Brierley, Peter, *Introduction: UK Church Statistics No 3: 2018 Edition* (Tonbridge: ADBC Publishers, 2017),

<<https://static1.squarespace.com/static/54228e0ce4b059910e19e44e/t/5a1591cb9140b7c306789dec/1511363021441/CS3+Page+0.2+Intro.pdf>> [Accessed 2 December 2019].

Church of England, *A Place to Belong*, (London: Church of England, 2018),

<<https://www.churchofengland.org/sites/default/files/2018-07/A%20place%20to%20belong%20Guide.pdf>> [Accessed 3 April 2020].

Church of England, *A Place to Belong: Template for an Access Appraisal* (London: Church of England, 2018),

<<https://www.churchofengland.org/sites/default/files/2018-07/A%20place%20to%20belong%20Template%20for%20audits.doc>> [Accessed 3 April 2020].

Department for Work & Pensions, *Inclusive Language: words to use and avoid when writing about disability* (London: UK Government, 2018)

<<https://www.gov.uk/government/publications/inclusive-communication/inclusive-language-words-to-use-and-avoid-when-writing-about-disability>> [Accessed 2 December 2019].

Didot, Ernie, *Technology Advice & Experience for Churches Responding to COVID-19* (New Malden: Gafcon, 2020)

<www.gafcon.org/news/technology-advice-experience-for-churches-responding-to-covid-19> [Accessed 4 April 2020].

Duggin, Alistair, 'What we mean when we talk about accessibility' in *Accessibility in Government* (London: Civil Service, 2016),

<<https://accessibility.blog.gov.uk/2016/05/16/what-we-mean-when-we-talk-about-accessibility-2/>> [Accessed 2 April 2020].

Equality Act 2010, 'Disability' in 'Part 2 Equality: Key Concepts', (c.1) London:

HMSO. <<http://www.legislation.gov.uk/ukpga/2010/15/section/6>>, [Accessed 2 December 2019].

Evangelical Alliance, *Disability: the elephant in the church?* (London: Evangelical Alliance, 2014)

<<https://www.eauk.org/church/stories/disability.cfm>> [Accessed 3 April 2020].

Grant, Loren, (Ed.), *A Disability History Timeline: The Struggle for Equal Rights Through the Ages* (NHS, 2013),

<<https://www.merseycare.nhs.uk/media/1749/disability-timeline-2013.pdf>> [Accessed 2 December 2019].

Jack, Anthony, 'Access Ain't Inclusion', YouTube Video [12:42], (13 June 2019) <<https://www.youtube.com/watch?v=j7w2Gv7ueOc>> [Accessed 2 April 2020].

Learning Disability Action Group, *Learning Disability Action Pack* (Edinburgh: Church of Scotland, 2017), <https://www.churchofscotland.org.uk/_data/assets/pdf_file/0003/43491/Learning_Disability_Action_Pack.pdf> [Accessed 10 February 2020].

Local Government Association, *Working with Faith Groups to Promote Health and Wellbeing* (London: LGA, 2017) <<https://www.local.gov.uk/sites/default/files/documents/working-faith-groups-prom-6ff.pdf>> [Accessed 4 April 2020].

Morgan-Gurr, Kay, 'Disability inclusion: why it's about more than a ramp', in *Christianity Today* (26 July 2018) <www.christiantoday.com/article/disability-inclusion-why-its-about-more-than-a-ramp/130083.htm> [Access 4 April 2020].

NHS, *Blindness and Vision Loss* (NHS, 2018) <<https://www.nhs.uk/conditions/vision-loss/>> [Accessed 2 December 2019].

Office for National Statistics, *Disability and Social Participation, England: 2018* (London: ONS, 2019), <<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/disability/bulletins/disabilityandsocialparticipationengland/2018>> [Accessed 3 April 2020].

Papworth Trust, *Facts and Figures 2018: Disability in the UK*, (Huntingdon: Papworth Trust, 2018), <<https://www.papworthtrust.org.uk/about-us/publications/papworth-trust-disability-facts-and-figures-2018.pdf>> [Accessed 1 April 2020].

Payne, Sarah, *Mental Health, Poverty and Exclusion* (Swindon: ESRC, 2012), <[https://www.poverty.ac.uk/sites/default/files/attachments/Conceptual%20note%20No.%209%20-%20Mental%20Health%20\(Payne%20Dec2012\).pdf](https://www.poverty.ac.uk/sites/default/files/attachments/Conceptual%20note%20No.%209%20-%20Mental%20Health%20(Payne%20Dec2012).pdf)> [Accessed 1 April 2020].

Prime Minister's Strategy Unit, *Improving the Life Chances of Disabled People* (London: Prime Minister's Strategy Unit, 2005), <<https://webarchive.nationalarchives.gov.uk/20101119185312/http://www.cabinetoffice.gov.uk/media/cabinetoffice/strategy/assets/disability.pdf>> [Accessed 2 December 2019].

RAD, *What is Deafness?* (Colchester: RAD, N.D.), <<https://www.royaldeaf.org.uk/about-us/what-is-deafness/>> [Accessed 2 December 2019].

Rose, Damien, 'Stop trying to 'heal' me' in *BBC News* (28 April 2019) <<https://www.bbc.co.uk/news/uk-48054113>>, [Accessed 15 January 2020].

Ryan, Ben, *Christianity and Mental Health: Theology, Activities, Potential* (London: Theos, 2017),

<<https://www.theosthinktank.co.uk/cmsfiles/archive/files/Christianity%20and%20Mental%20Health%20FINAL%20COPY%20FOR%20WEB.pdf>> [Accessed 1 April 2020].

Scope, *Brits feel uncomfortable with disabled people* (Leeds: Scope, 2014) <<https://www.scope.org.uk/media/press-releases/brits-feel-uncomfortable-with-disabled-people/>> [Accessed 3 April 2020].

Select Committee, *The Equality Act 2020: the impact on disabled people* (London: House of Lords, 2016), <<https://publications.parliament.uk/pa/ld201516/ldselect/ldeqact/117/117.pdf>> [Accessed 2 December 2019].

Smith, Ceri and Dixon, Simon, *Independent. Confident. Connected.* (Leeds: SCOPE, 2018), <<https://www.scope.org.uk/campaigns/independent-confident-connected/>> [Accessed 1 April 2020].

UCAS, "Students with disabilities (How to)", *UCAS* [Video], 3:52, No Date, <<https://www.ucas.com/undergraduate/applying-university/individual-needs/disabled-students>> [Accessed 2 December 2019].

UK Independent Mechanism, *Disability Rights in the UK* (Equality and human Rights Commission, 2017), <<https://www.equalityhumanrights.com/sites/default/files/crpd-shadow-report-august-2017.pdf>> [Accessed 2 December 2019].

University of St Andrews, *Facts on Disability* (St Andrews: University of St Andrews, N.D.) <<https://www.st-andrews.ac.uk/hr/edi/disability/facts/>> [Accessed 1 April 2020].

Other

Lindsay, Ben, 'We Need to Talk About Race: Black Experience in White Majority Churches', Adult Learning Event, St Pauls Cathedral (29 October 2019).

Appendix 1: Methodology Rationale

The following offers additional rationale for the selection of demographic demarcations, denominational categorisation, and terminology utilised for the research.

1.1. Background Information

1.1.1. Age

The age ranges used are those reflecting generational delineations as depicted in Table A1.1.1 are taken from *Time*, who were the first to give names to each generation.¹⁸³

Birth Year	Age Range	Generation Name
1995 onwards	18-24 Years	Generation Z
1980-1994	25-39 Years	Generation Y / Millennials
1965-1979	40-54 Years	Generation X
1946-1964	55-73 Years	Baby Boomer
1925-1945	74-94 Years	The Silent Generation
1910-1924	95+ Years	The Greatest Generation

Table 1: Age Range/ Generation Name

1.1.2. Ethnicity

The UK government recognises eighteen ethnic groups in England and Wales, with five broad recommended categories.¹⁸⁴ The survey utilises these same categories:

- *White*
- *Mixed / Multiple ethnic groups*
- *Asian / Asian British*
- *Black / African / Caribbean / Black British*
- *Other ethnic group.*

¹⁸³ Josh Sanburn, 'How Every Generation of the Last Century Got Its Nickname', in *Time*, 1 December 2015, <<https://time.com/4131982/generations-names-millennials-founders/>> [Accessed 2 December 2019].

¹⁸⁴ Cabinet Office, *List of Ethnic Groups* (London: UK Government, N.D.) <<https://www.ethnicity-facts-figures.service.gov.uk/ethnic-groups>> [Accessed 2 December 2019].

1.1.3.Regions

The Nomenclature of Territorial Units for Statistics, level 1 (NUTS1) for the United Kingdom are the twelve regions¹⁸⁵ used in the research to ensure respondents live within the geographic constituency that is the subject of the research. These regions are:

- North-West (England)
- North-East (England)
- Yorkshire and the Humber
- East Midlands
- West Midlands
- East of England (East Anglia)
- London
- South-East (England)
- South-West (England)
- Wales
- Scotland
- Northern Ireland

1.2. Church Engagement

1.2.1.Denominations

The *UK Church Statistics*¹⁸⁶ survey lists ten broad denominational groups which are also utilised for the purposes of this research. These denominations are:

- Anglican
- Baptist
- Catholic
- Church of Scotland
- Independent
- Lutheran
- Methodist
- New Churches
- Orthodox
- Pentecostal
- Presbyterian
- Quaker
- Seventh Day Adventist
- United Reformed

1.2.1.Church Attendance

The categories for church attendance mirror those of the *Churchgoing in the UK* report¹⁸⁷ which catalogues attendance as:

¹⁸⁵ ONS, *NUTS Level 1 (January 2018) Names and Codes in the United Kingdom*, (Titchfield: ONS, 2019) <<https://geoportal.statistics.gov.uk/datasets/nuts-level-1-january-2018-names-and-codes-in-the-united-kingdom/data>> [Accessed 2 December 2019].

¹⁸⁶ Peter Brierley, *Introduction: UK Church Statistics No 3: 2018 Edition* (Tonbridge: ADBC Publishers, 2017), p.2, <<https://static1.squarespace.com/static/54228e0ce4b059910e19e44e/t/5a1591cb9140b7c306789dec/1511363021441/CS3+Page+0.2+Intro.pdf>> [Accessed 2 December 2019].

¹⁸⁷ Jacinta Ashworth and Ian Farthing, *Churchgoing in the UK* (Teddington: Tearfund, 2007), p.13, <http://news.bbc.co.uk/1/shared/bsp/hi/pdfs/03_04_07_tearfundchurch.pdf> [Accessed 2 December 2019].

- At least once per week
- At least once per month
- At least 6 times per year
- Less often but at least annually
- No longer attend but am open to returning
- No longer attend and unlikely to return
- Not been to church but would be open to it
- Not been to church and wouldn't consider it

1.3. Disability

Classifications of disability utilised for the research are based on an established series of categories. The existing categories which met the requirements of this research were adopted from the Universities and Colleges and the Admissions Service (UCAS)¹⁸⁸. The categories are displayed in *Table A1.3.1.* alongside the abridged terms and abbreviations utilised in the body of the report.

Disability Category Description in Survey	Condensed Term / Abbreviation
No disability or long-standing health condition	No Disability
A corrective disability or condition (<i>such as corrective wearing glasses or hearing aids</i>)	Corrective Disability
A social/communication impairment (<i>such as Autistic Spectrum Disorder</i>)	Social Communication Impairment (SCI)
Blind or serious visual impairment	Severely Sight Impaired (Blind)
Deaf or serious hearing impairment	Deaf
A long-standing illness or health condition (such as cancer, HIV diabetes chronic heart disease, or epilepsy)	Long-Standing Illness (LSI)
A mental health condition (such as depression, schizophrenia or anxiety disorder)	Mental Health Condition (MHC)
A specific learning difficulty (such as dyslexia, dyspraxia or AD(H)D)	Specific Learning Difficulty (SpLD)
Wheelchair user/ mobility difficulties	Mobility Impairment (MI)

¹⁸⁸ UCAS, "Students with disabilities (How to)", UCAS Video, 3:52, No Date, <<https://www.ucas.com/undergraduate/applying-university/individual-needs/disabled-students>> [Accessed 2 December 2019].

Disability, impairment or medical condition not listed above	Other
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Table 2: Disability Category Descriptions

A glossary of terms, including examples of the disabilities and conditions which are embraced within each category is included in *Appendix 3*.

Appendix 2: Results

The following pages display quantitative results provided by the survey relating to the analysis of the research.

2.1. Results: Background Information

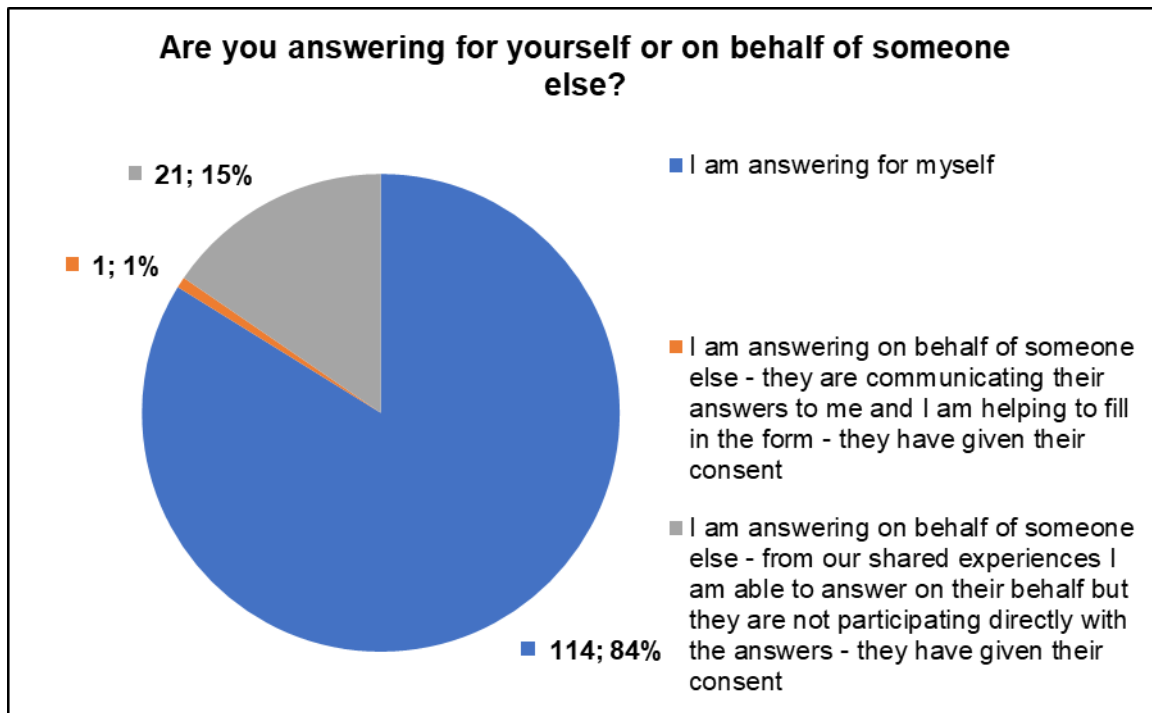


Figure 7: Background Information (Participant)

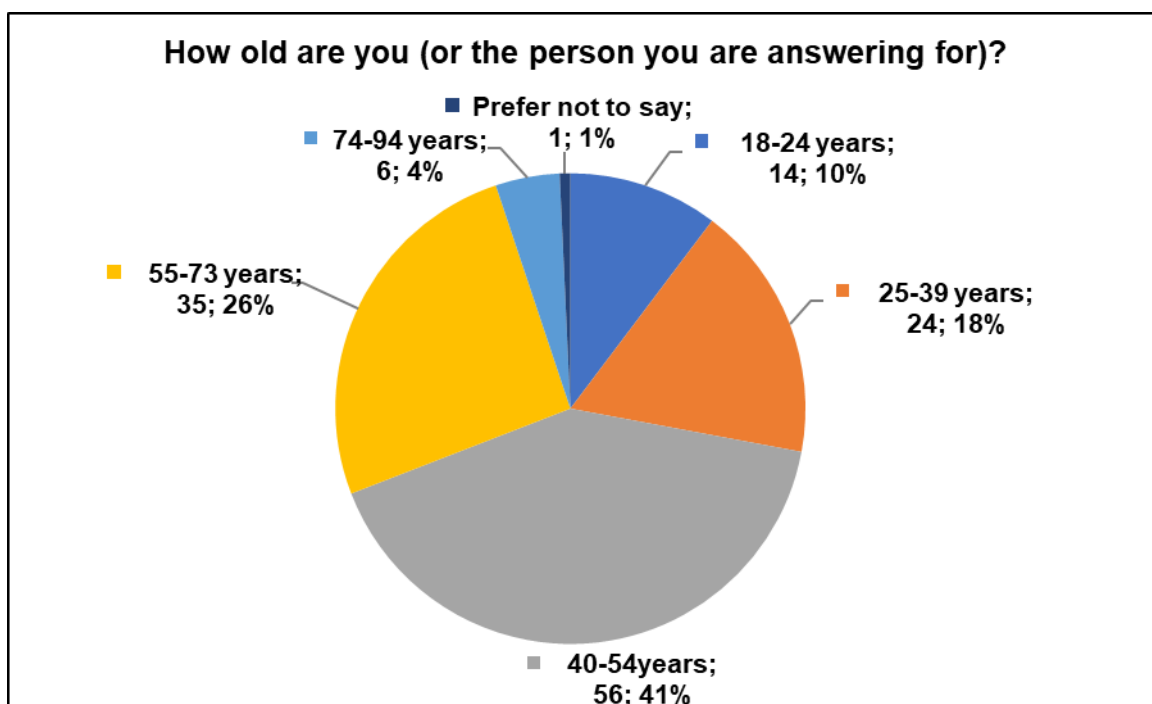


Figure 8: Background Information (Age)

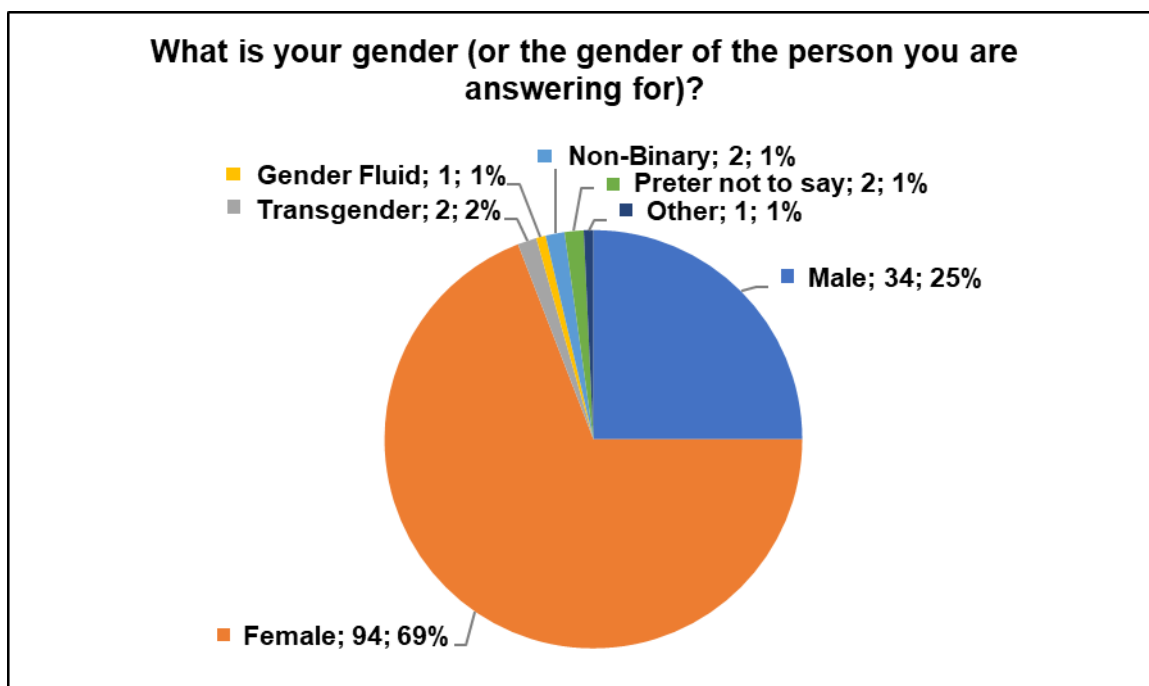


Figure 9: Background Information (Gender)

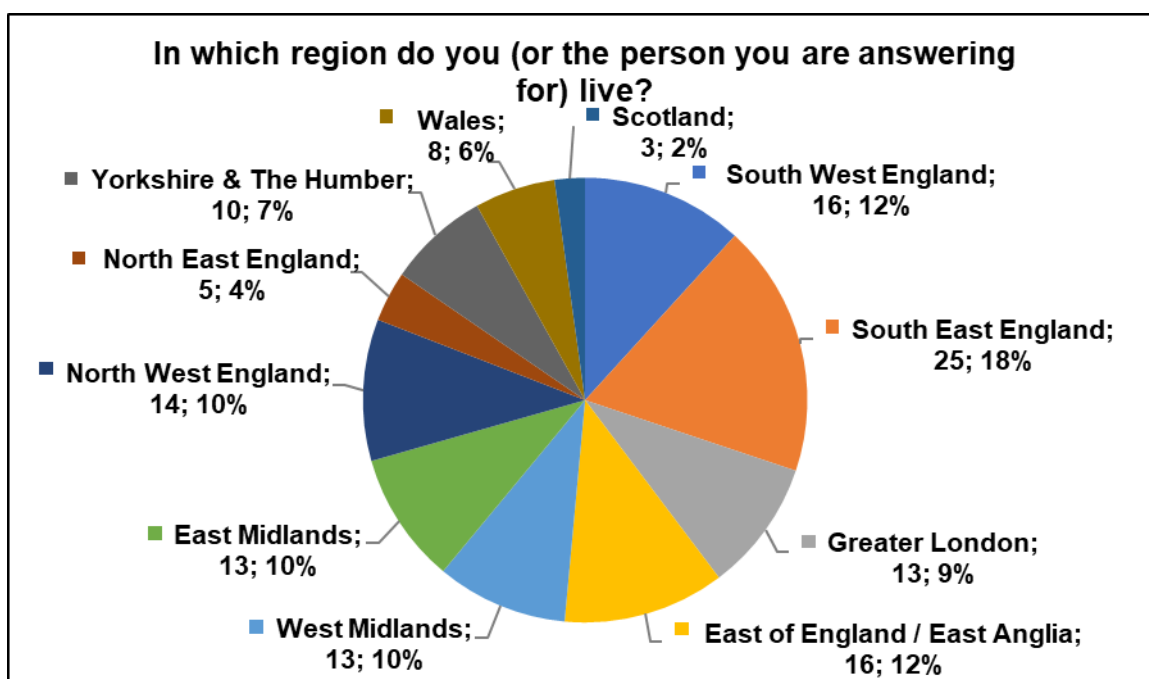


Figure 10: Background Information (Region)

2.2. Results: Church Engagement

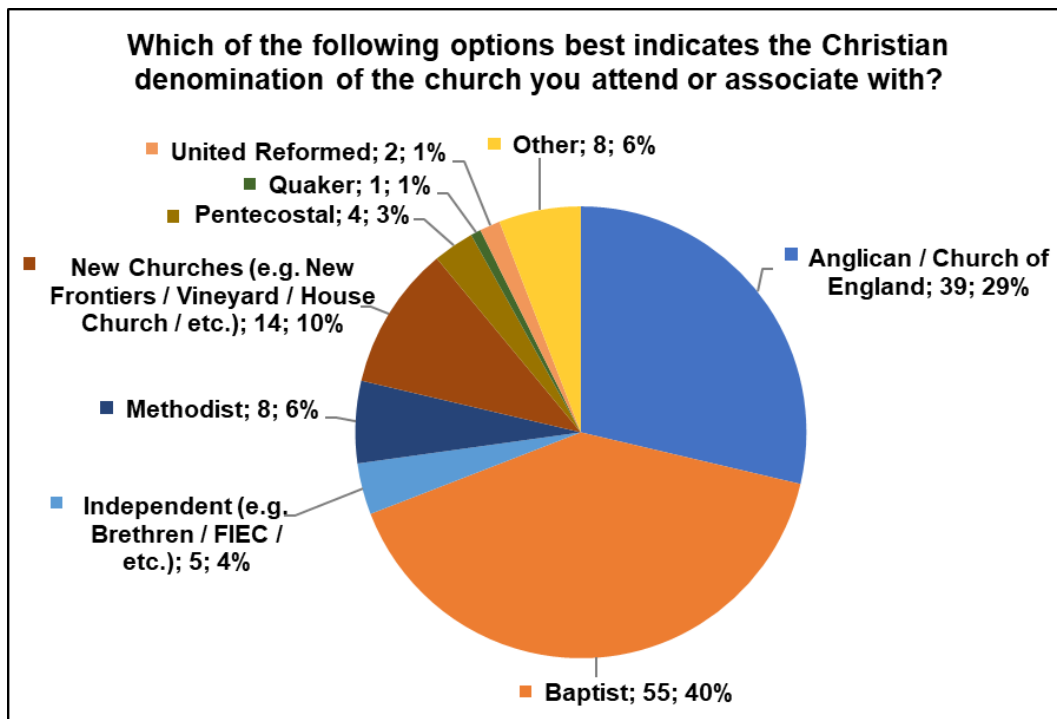


Figure 11: Church Engagement (Denomination)

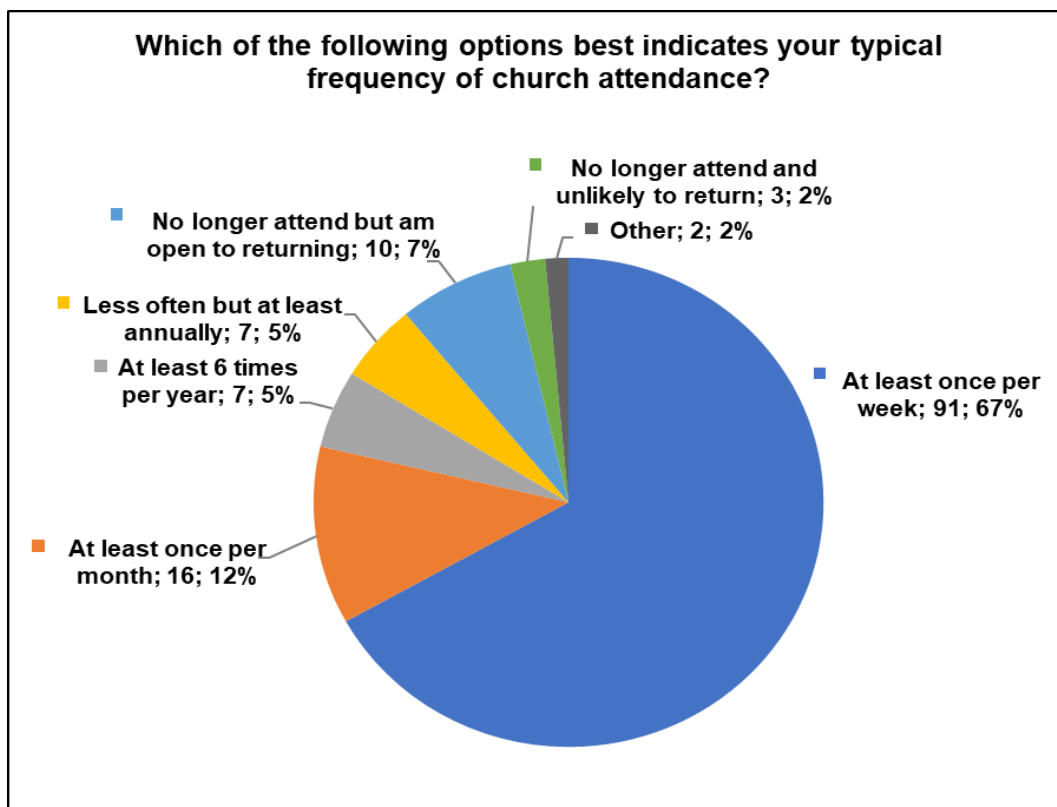


Figure 12: Church Engagement (Attendance)

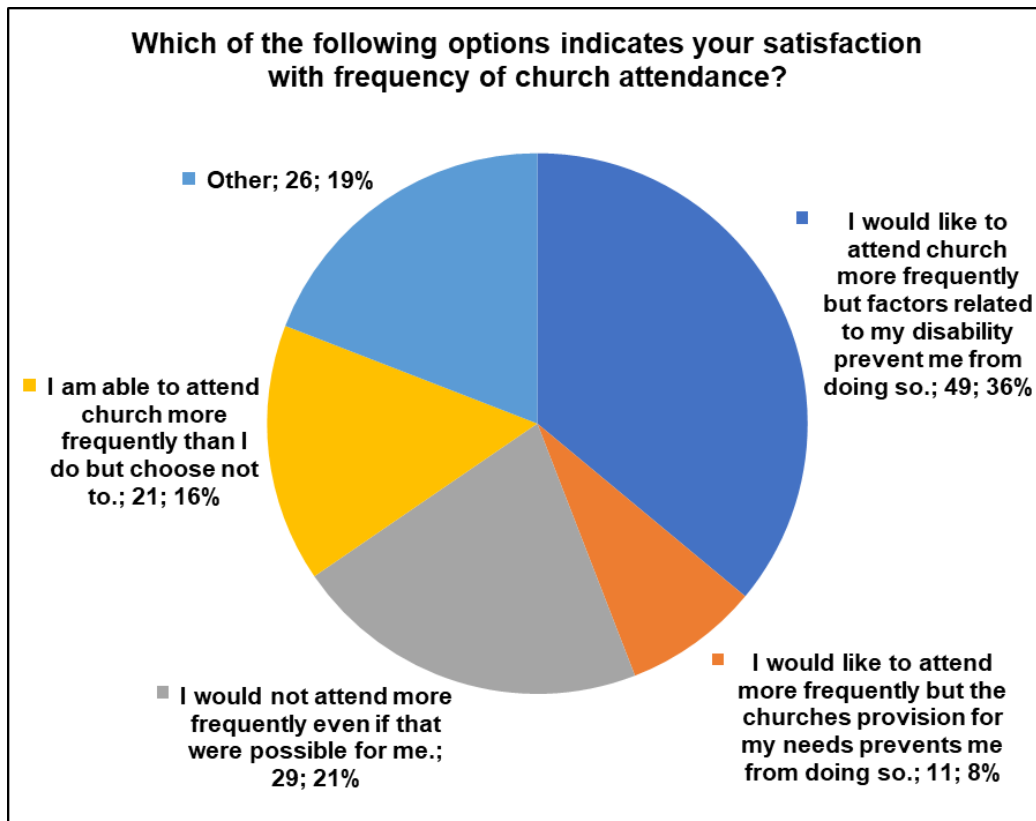


Figure 13: Church Engagement (Attendance Satisfaction)

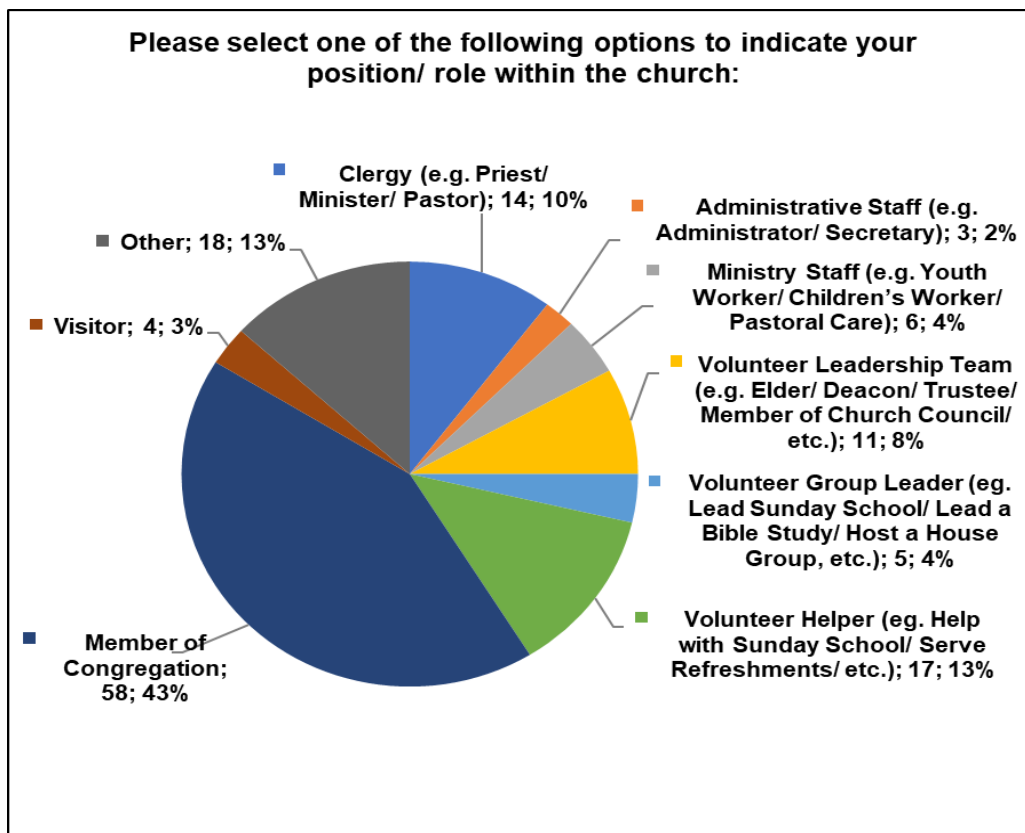


Figure 14: Church Engagement (Role/Position)

2.3. Results: Disability

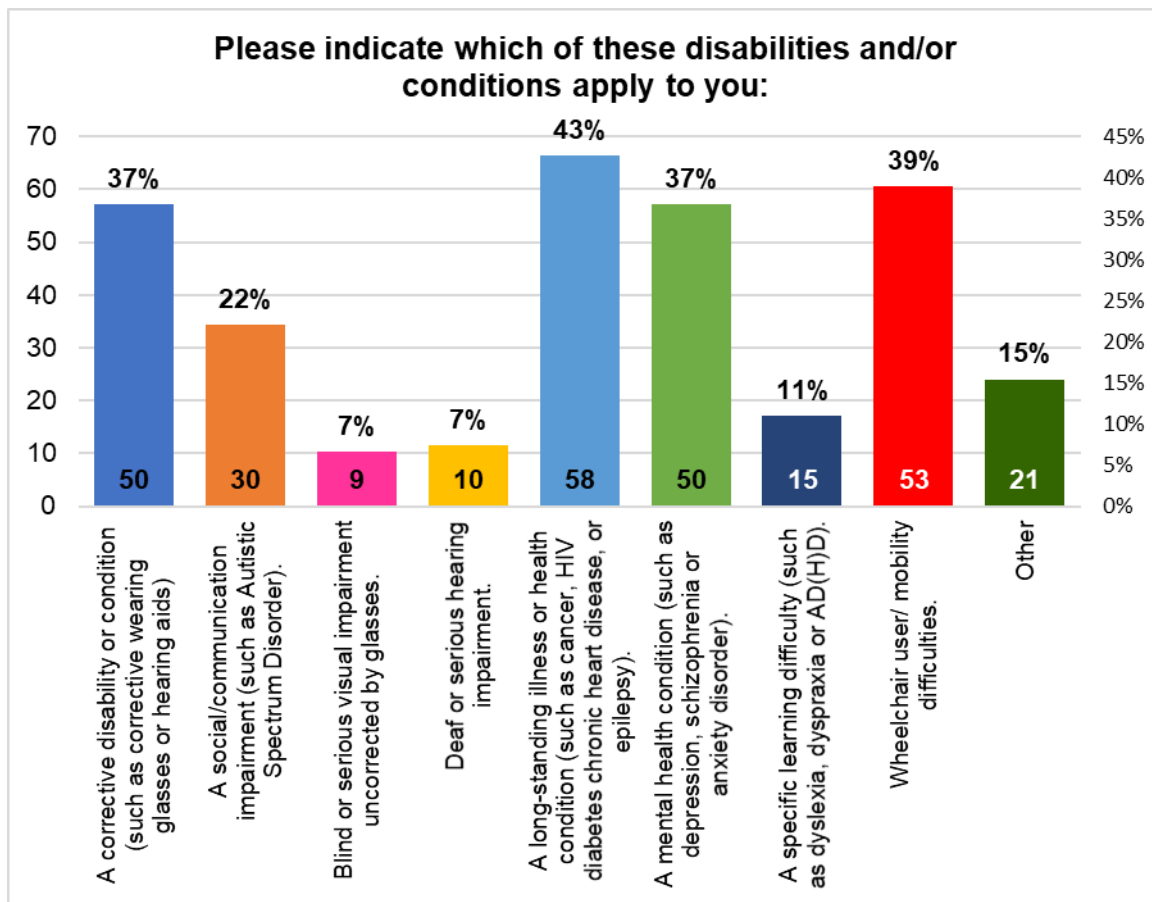


Figure 15: Disability (Condition/Disability)

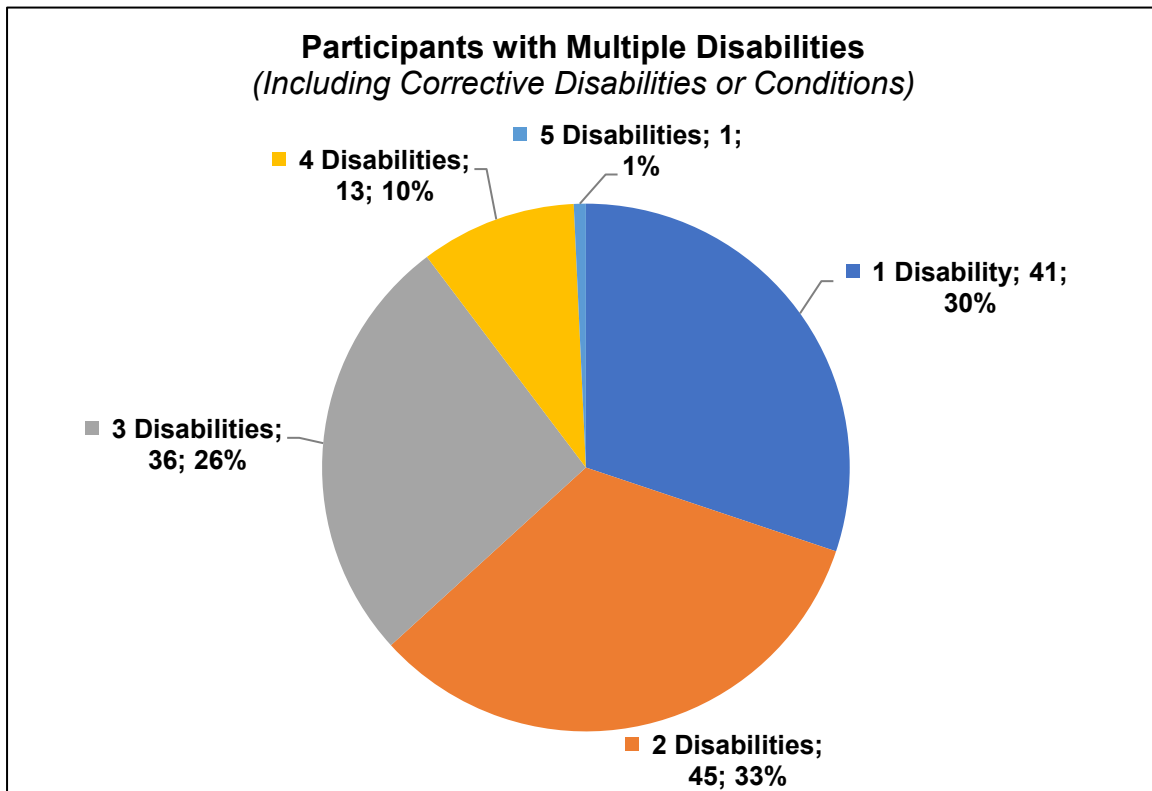


Figure 16: Disability (Comorbidity Including Corrective Disabilities)

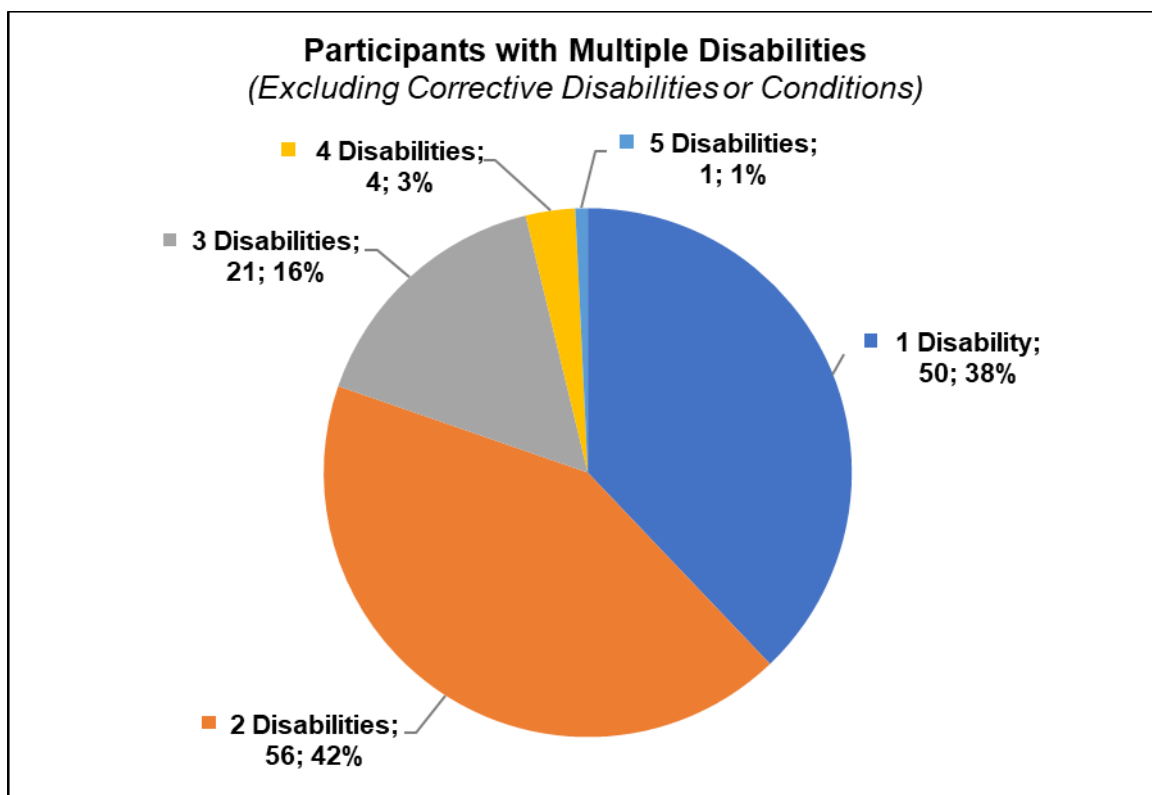


Figure 17: Disability (Comorbidity Excluding Corrective Disabilities)

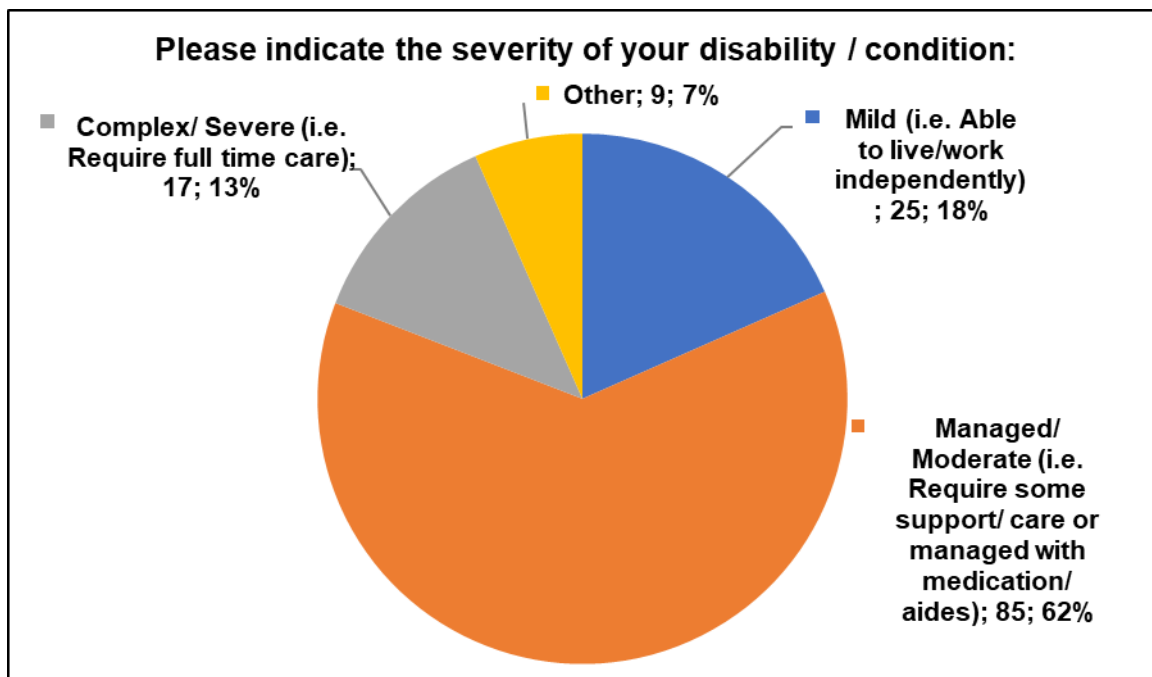


Figure 18: Disability (Complexity/Severity)

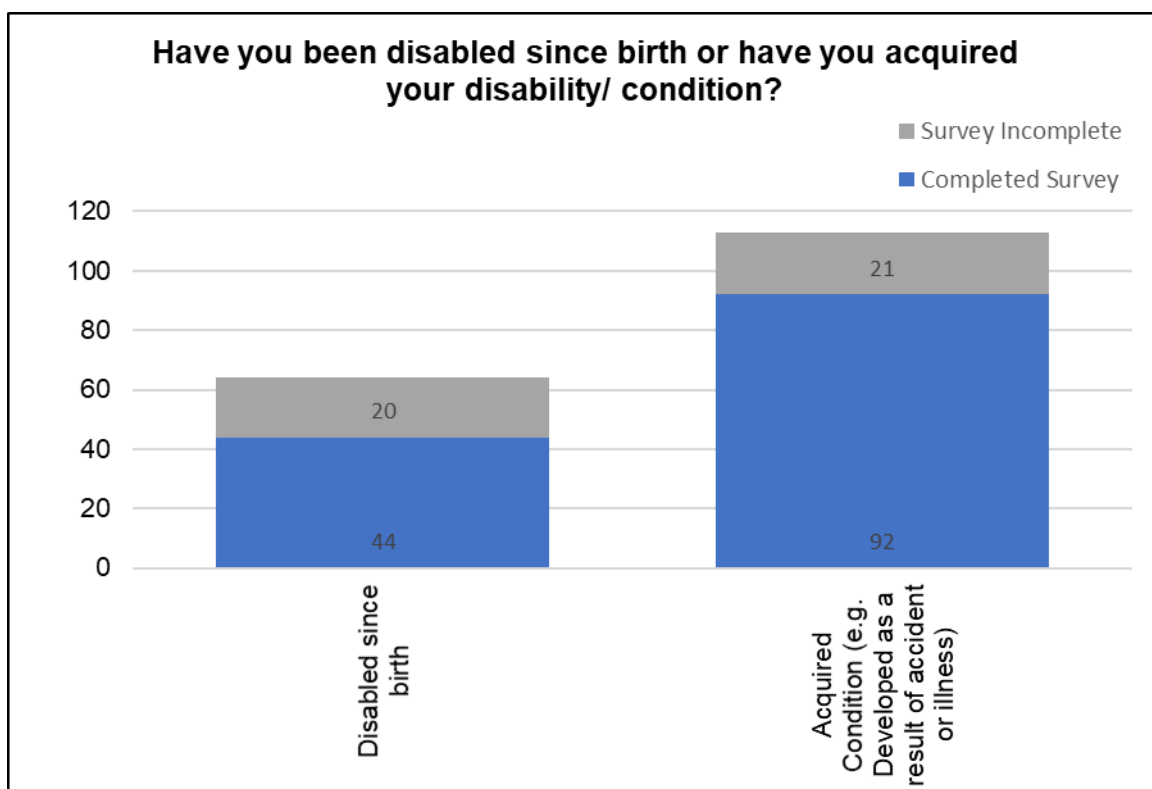


Figure 19: Disability (Birth/Acquired)

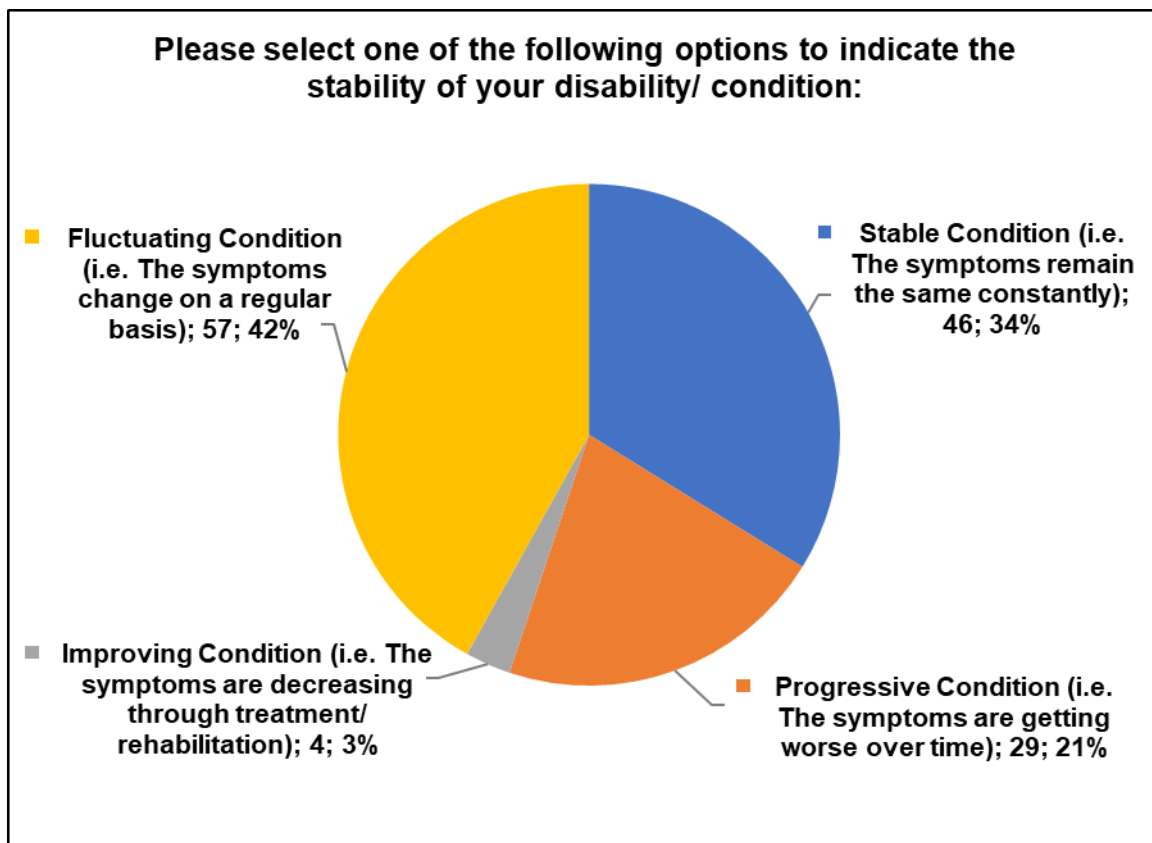


Figure 20: Disability (Stability)

2.4. Results: Access and Inclusion

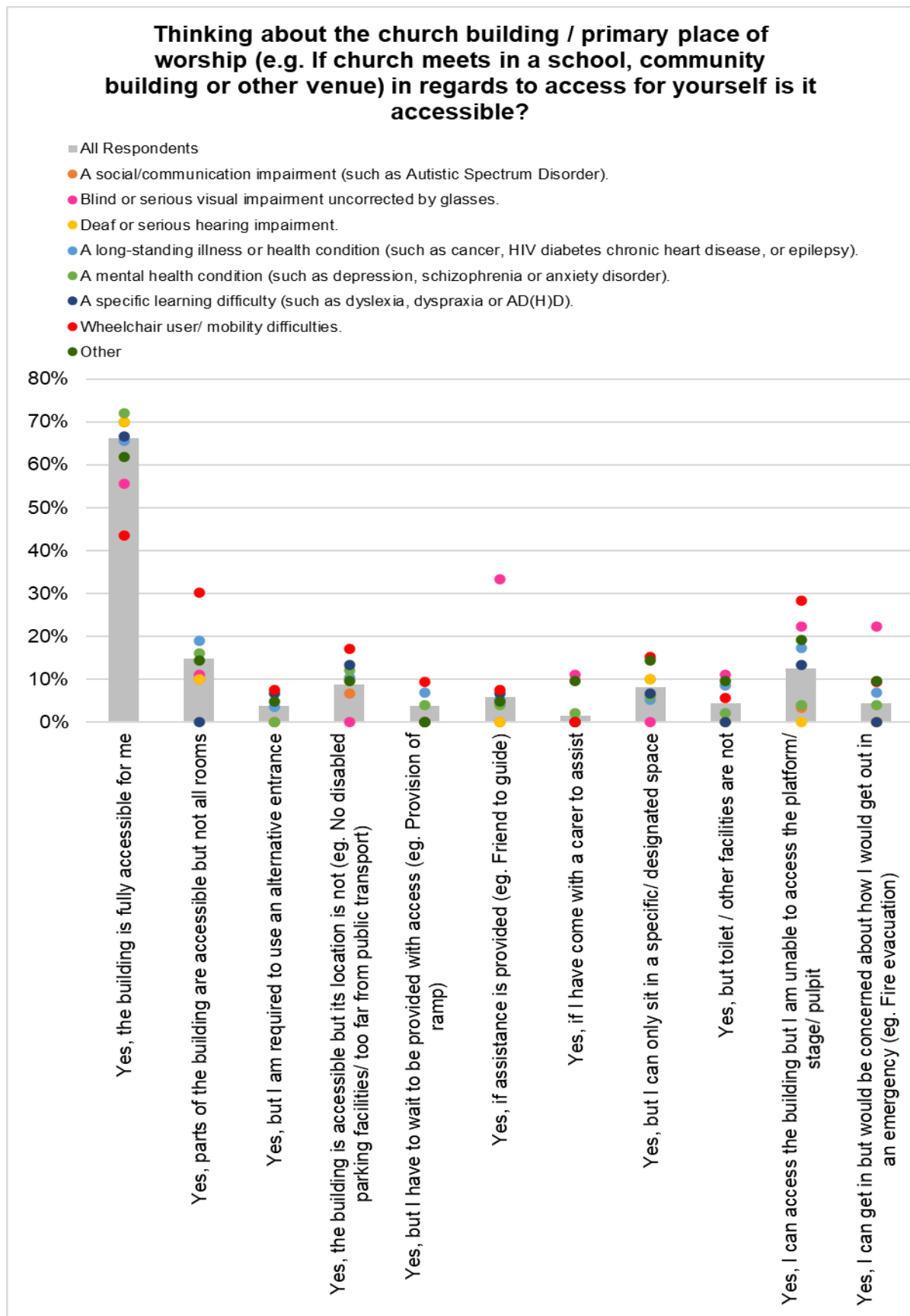


Figure 21: Access and Inclusion (Building) Disability Comparison

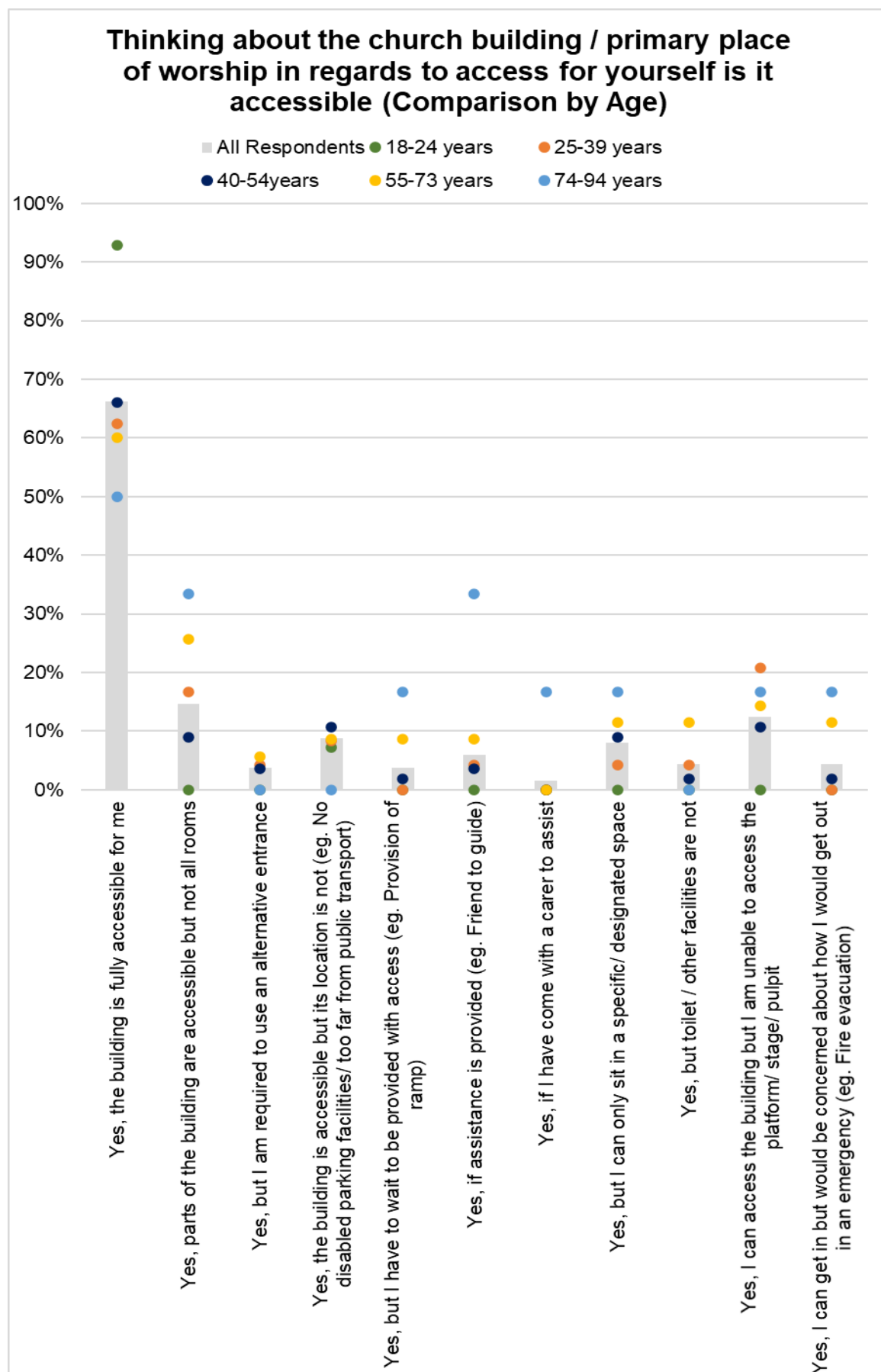


Figure 22: Access and Inclusion (Building) Age Comparison

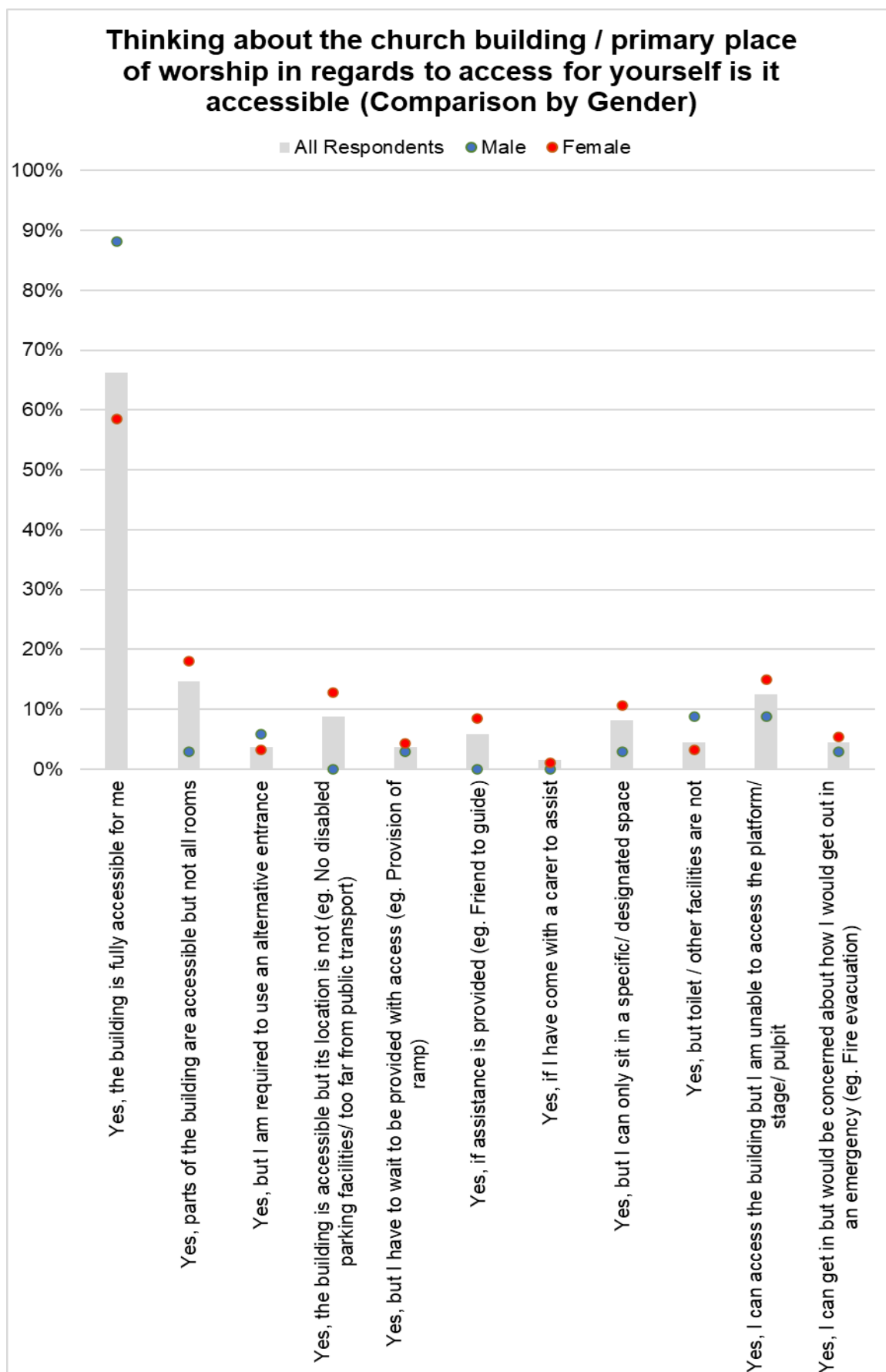


Figure 23: Access and Inclusion (Building) Gender Comparison

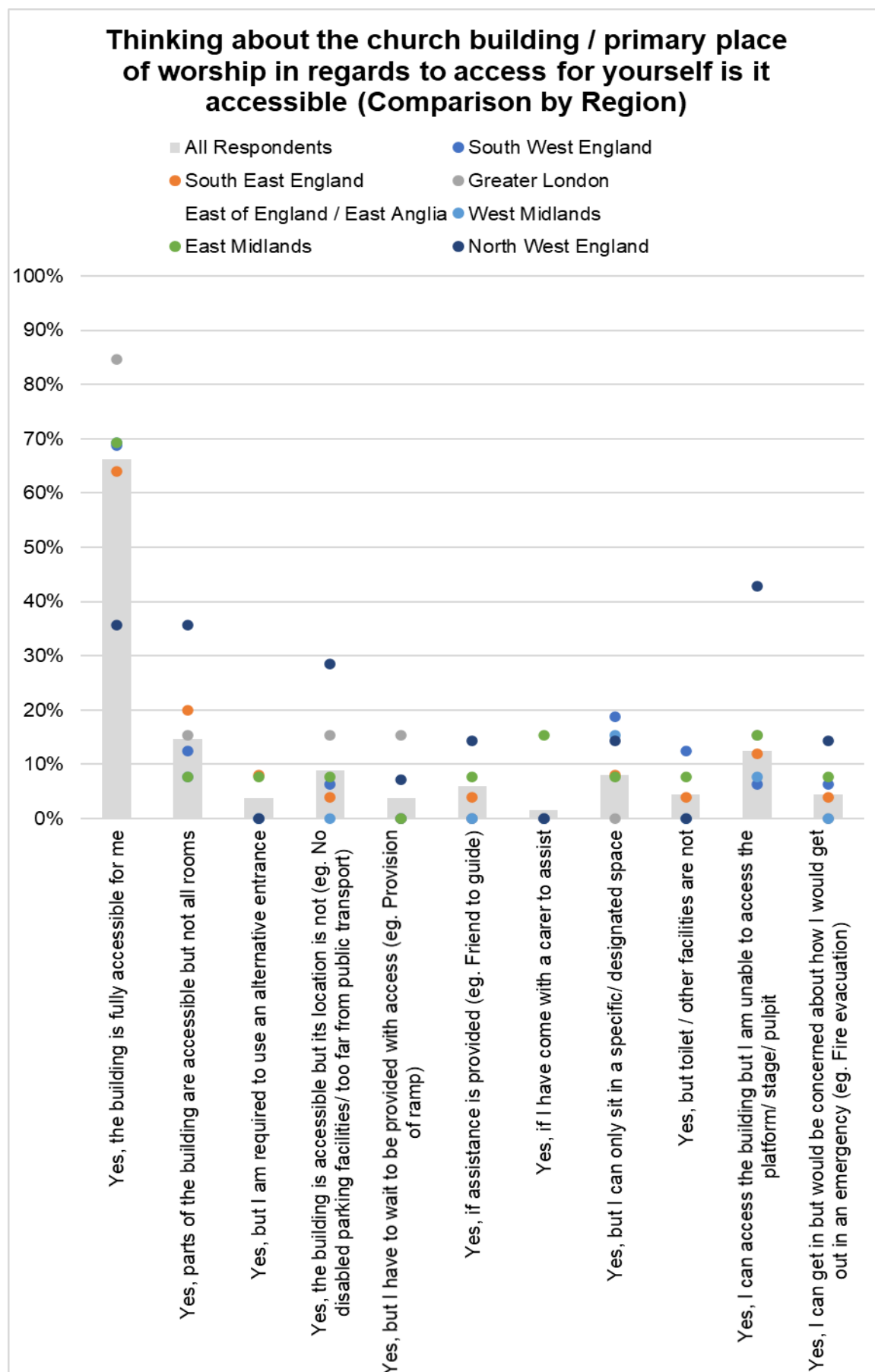


Figure 24: Access and Inclusion (Building) Region Comparison

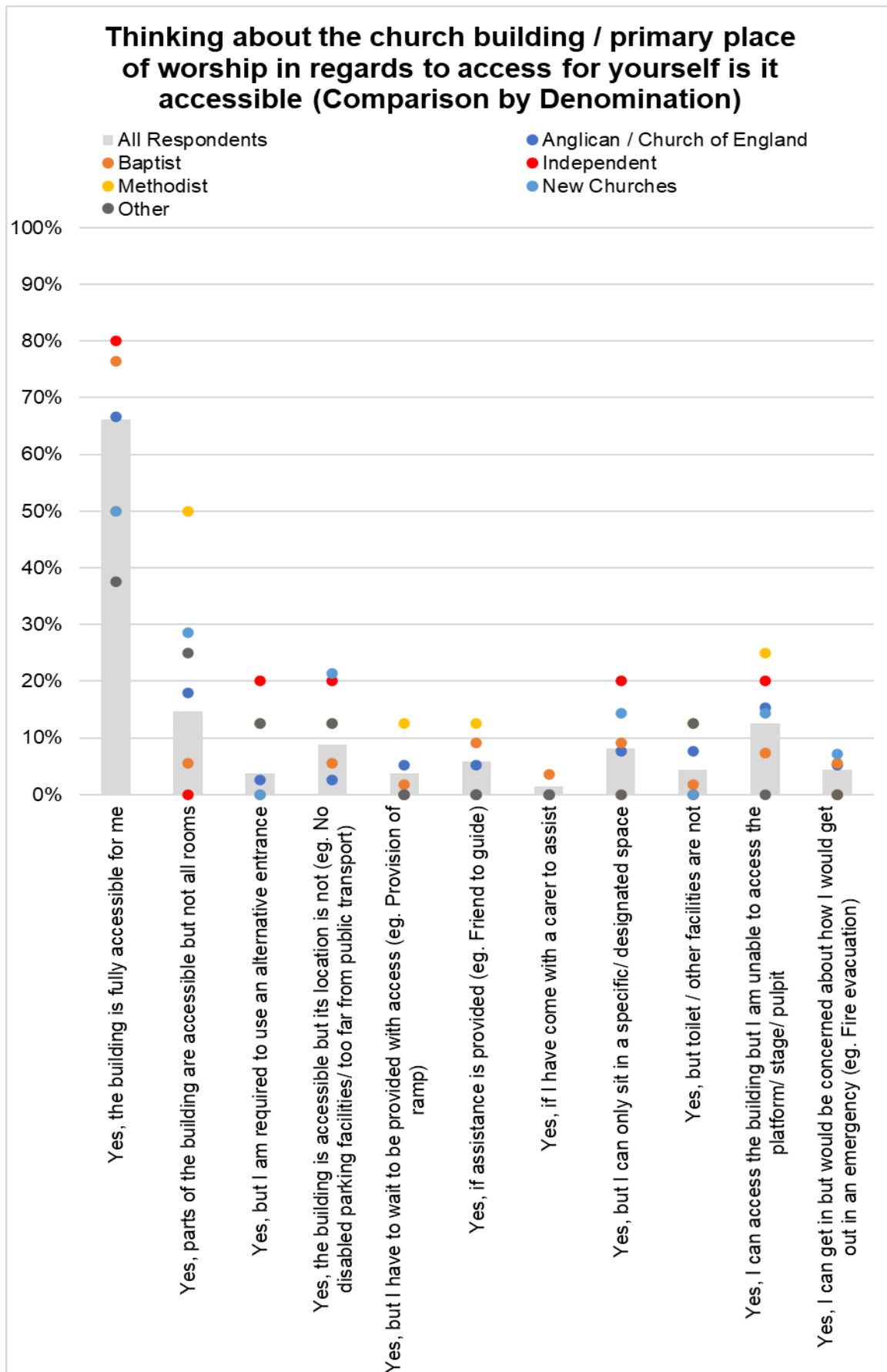


Figure 25: Access and Inclusion (Building) Denominational Comparison

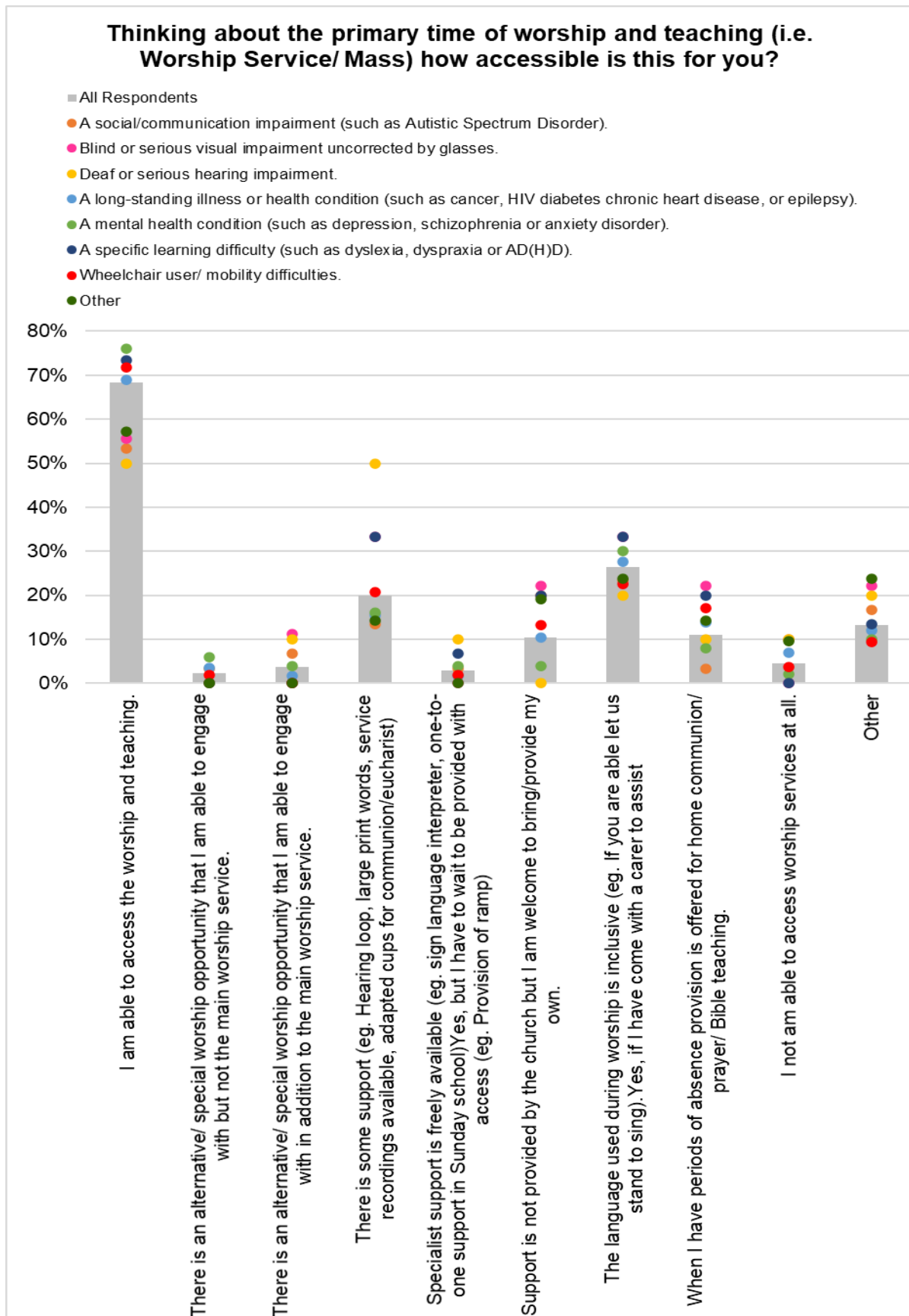


Figure 26: Access and Inclusion (Worship/Teaching) Disability Comparison

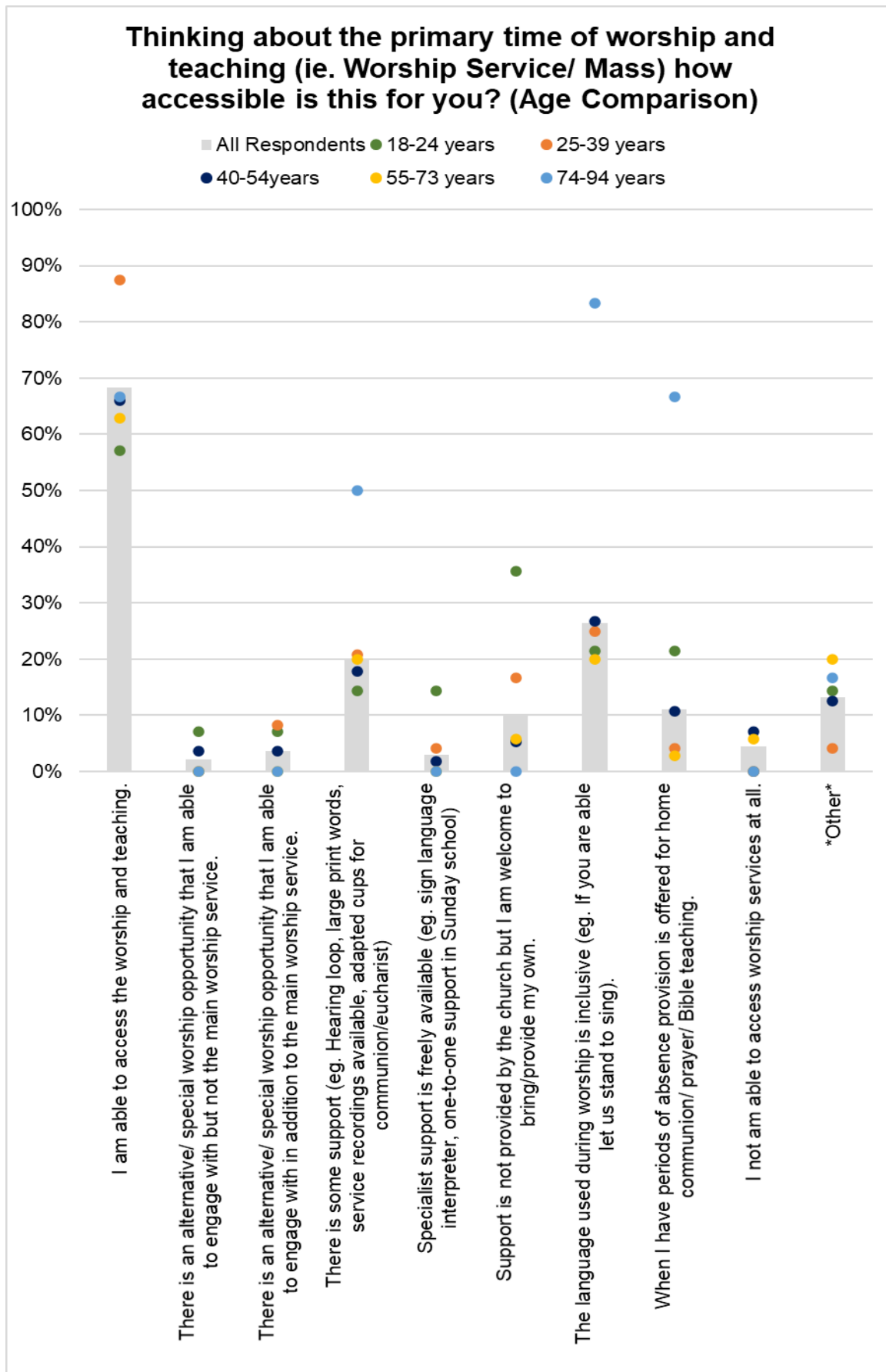


Figure 27: Access and Inclusion (Worship/Teaching) Age Comparison

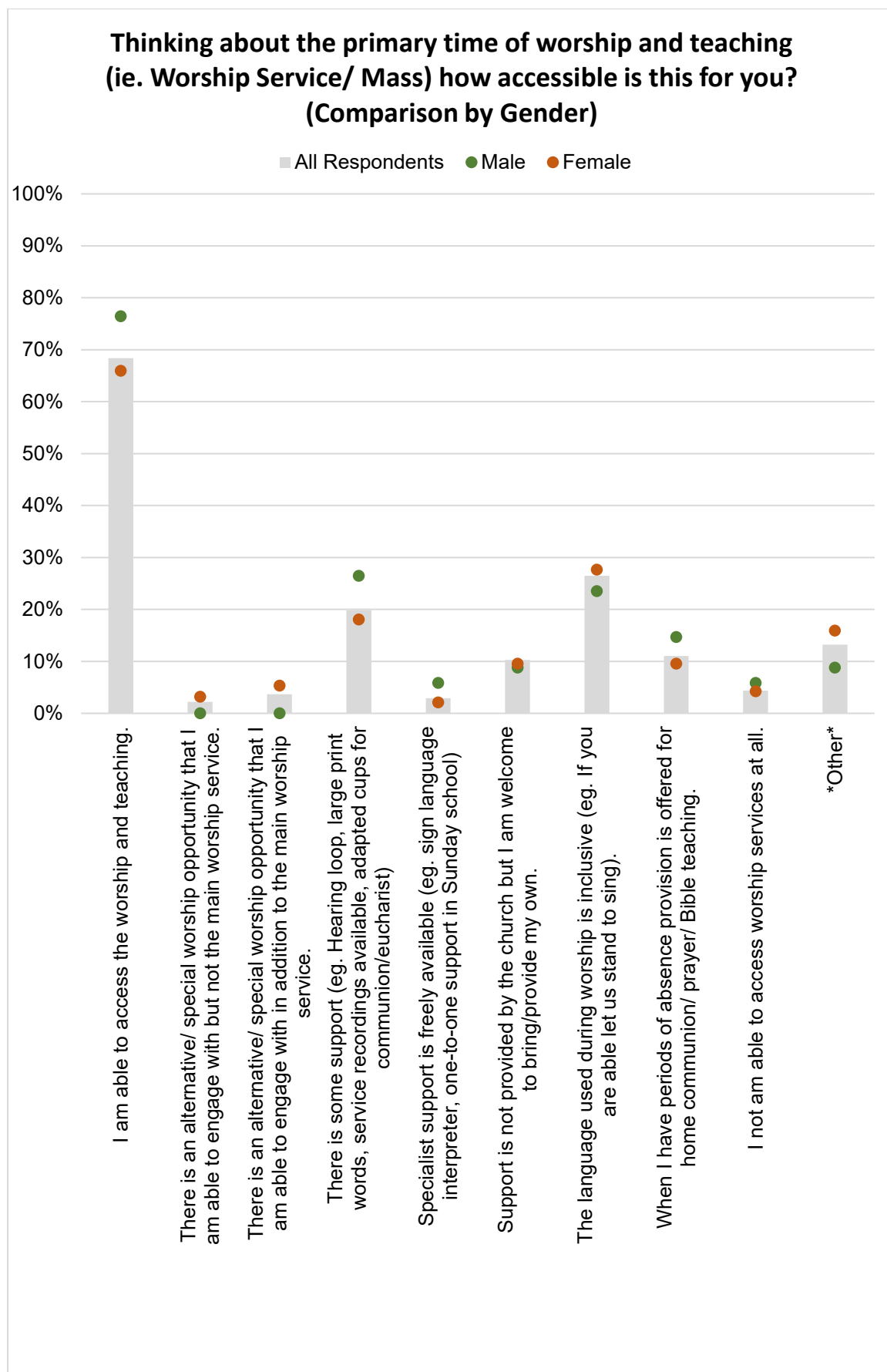


Figure 28: Access and Inclusion (Worship/Teaching) Gender Comparison

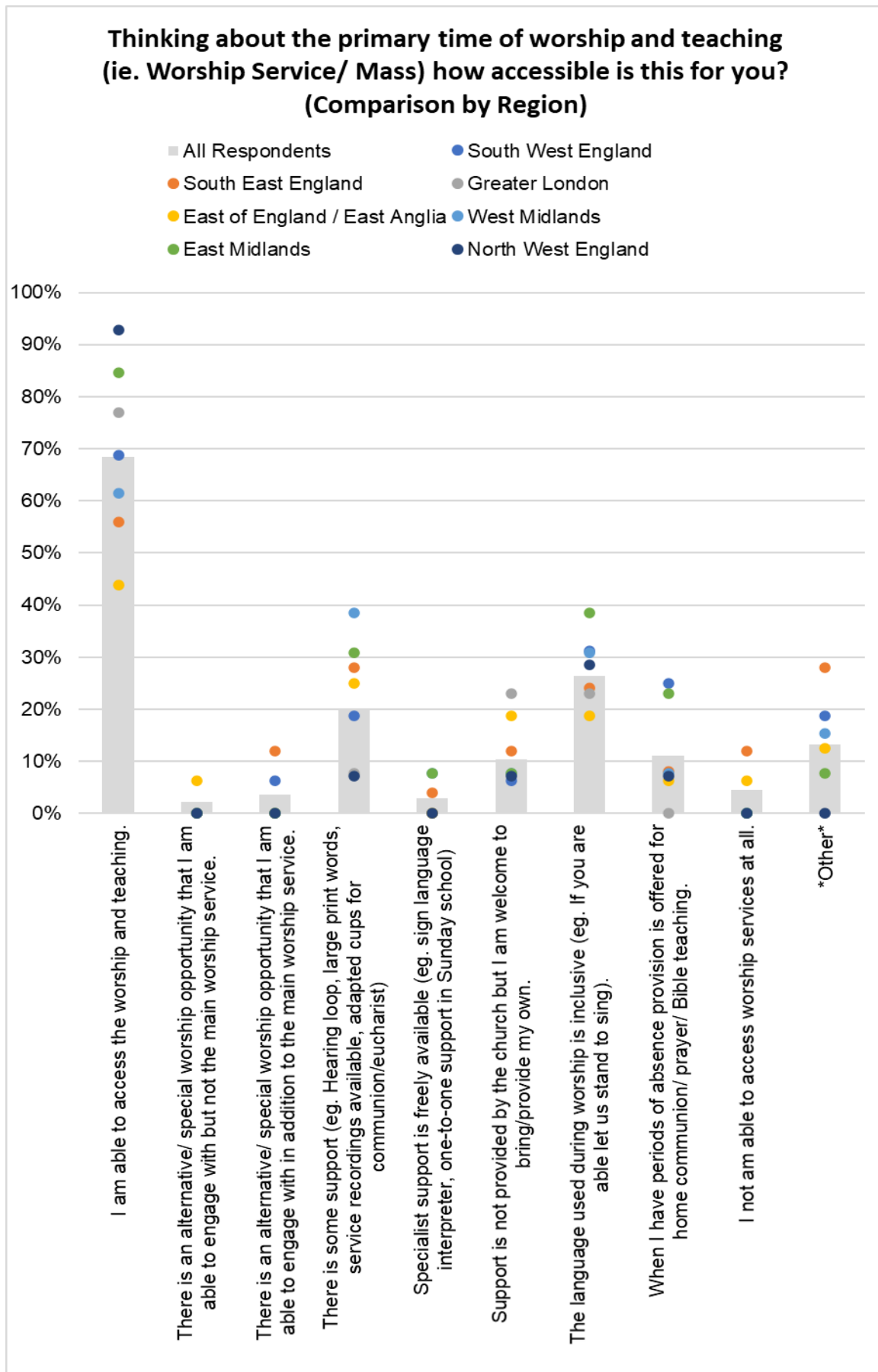


Figure 29: Access and Inclusion (Worship/Teaching) Regional Comparison

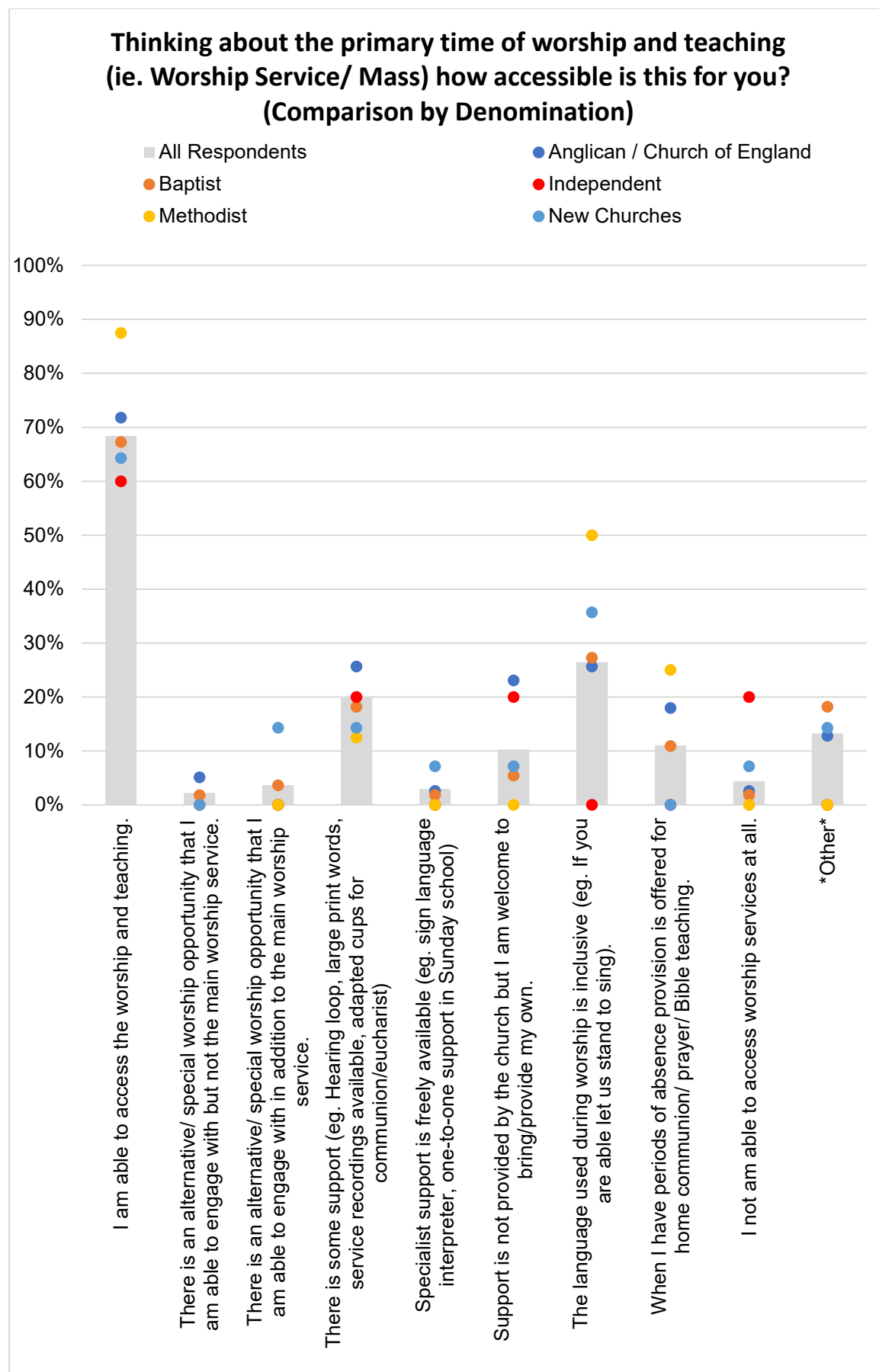


Figure 30: Access and Inclusion (Worship/Teaching) Denominational Comparison

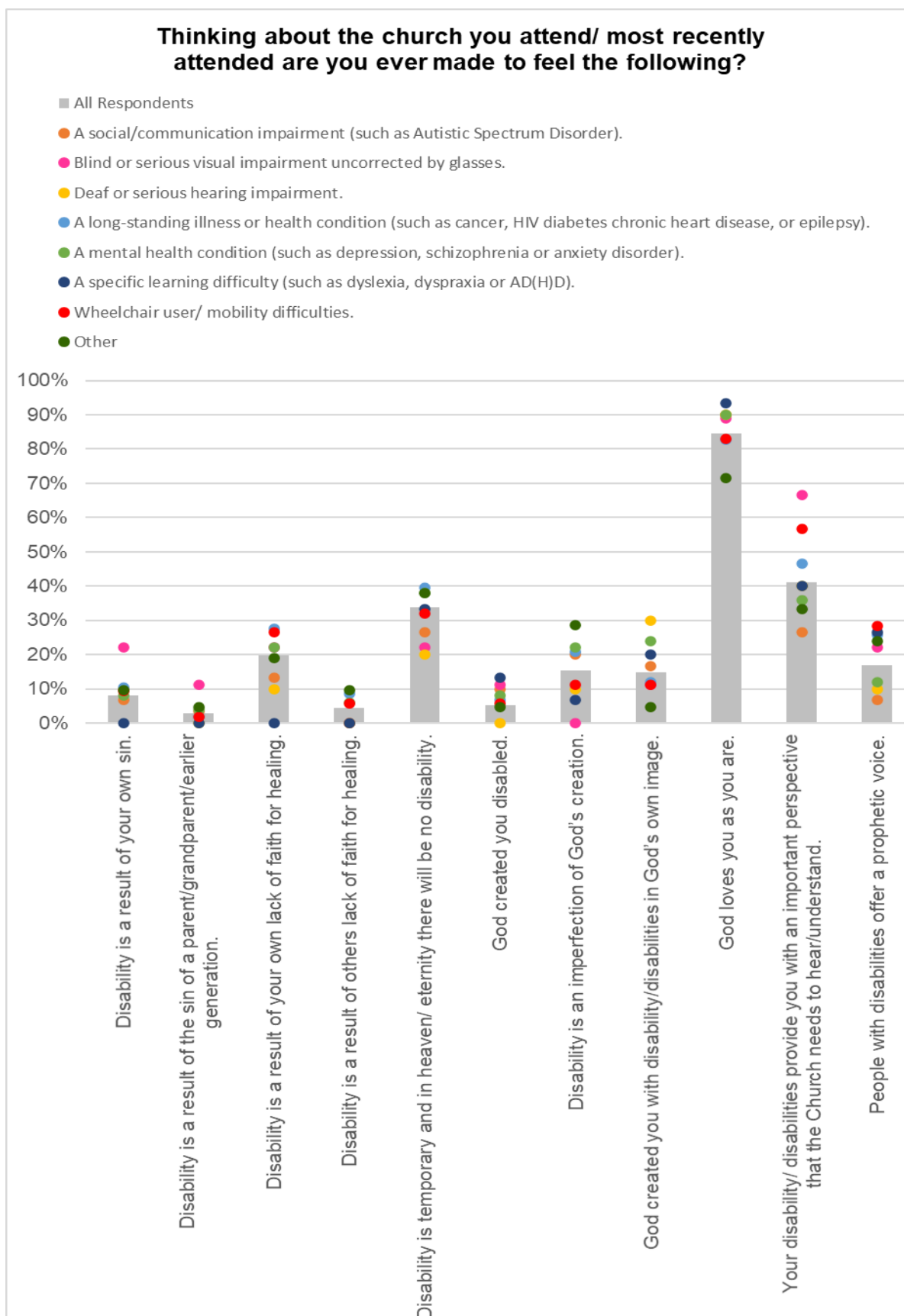


Figure 31: Access and Inclusion (Theological Messages) Disability Comparison

2.5. Results: Inclusion and Participation

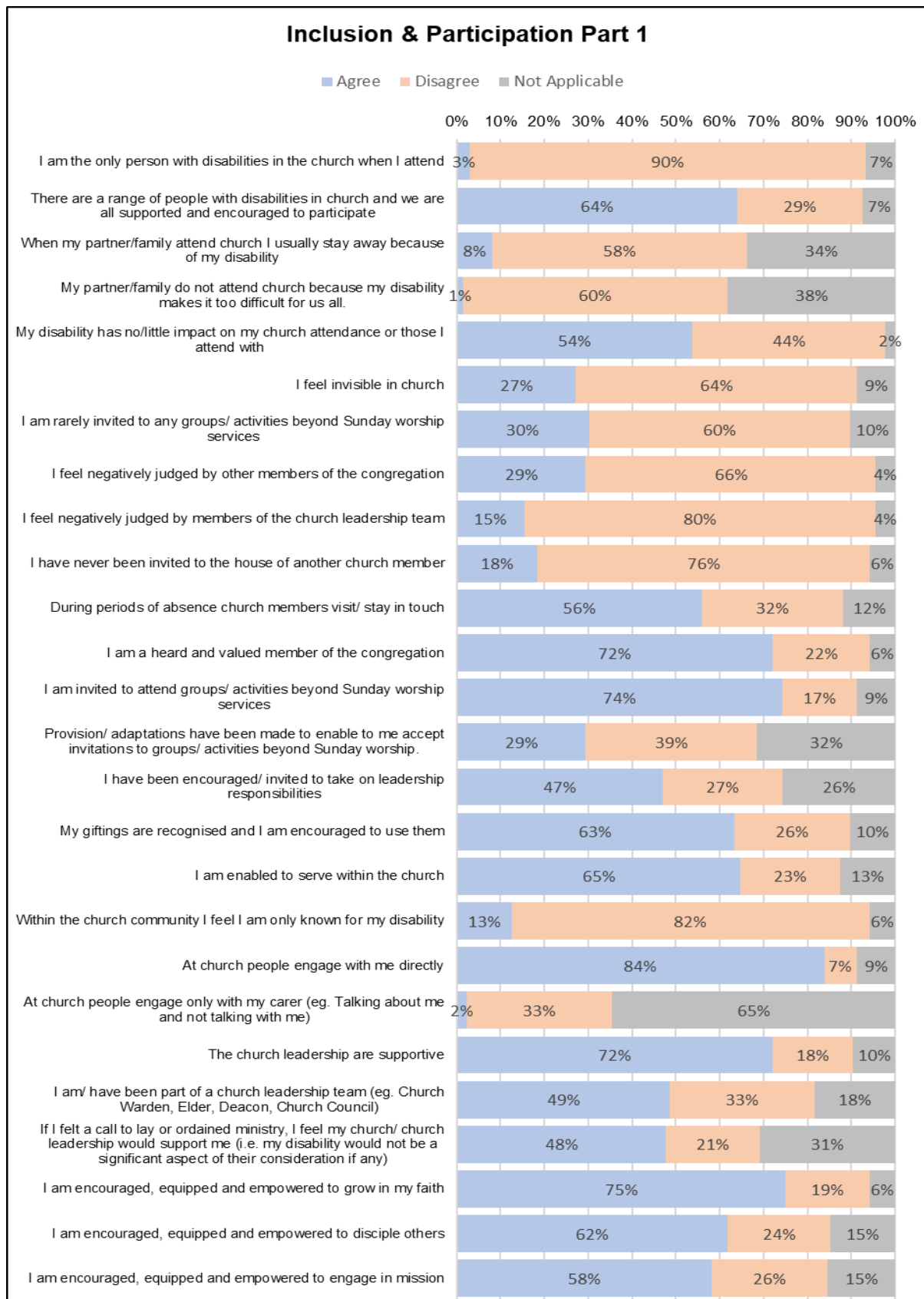


Figure 32: Inclusion and Participation (Part 1)

Inclusion & Participation Part 2

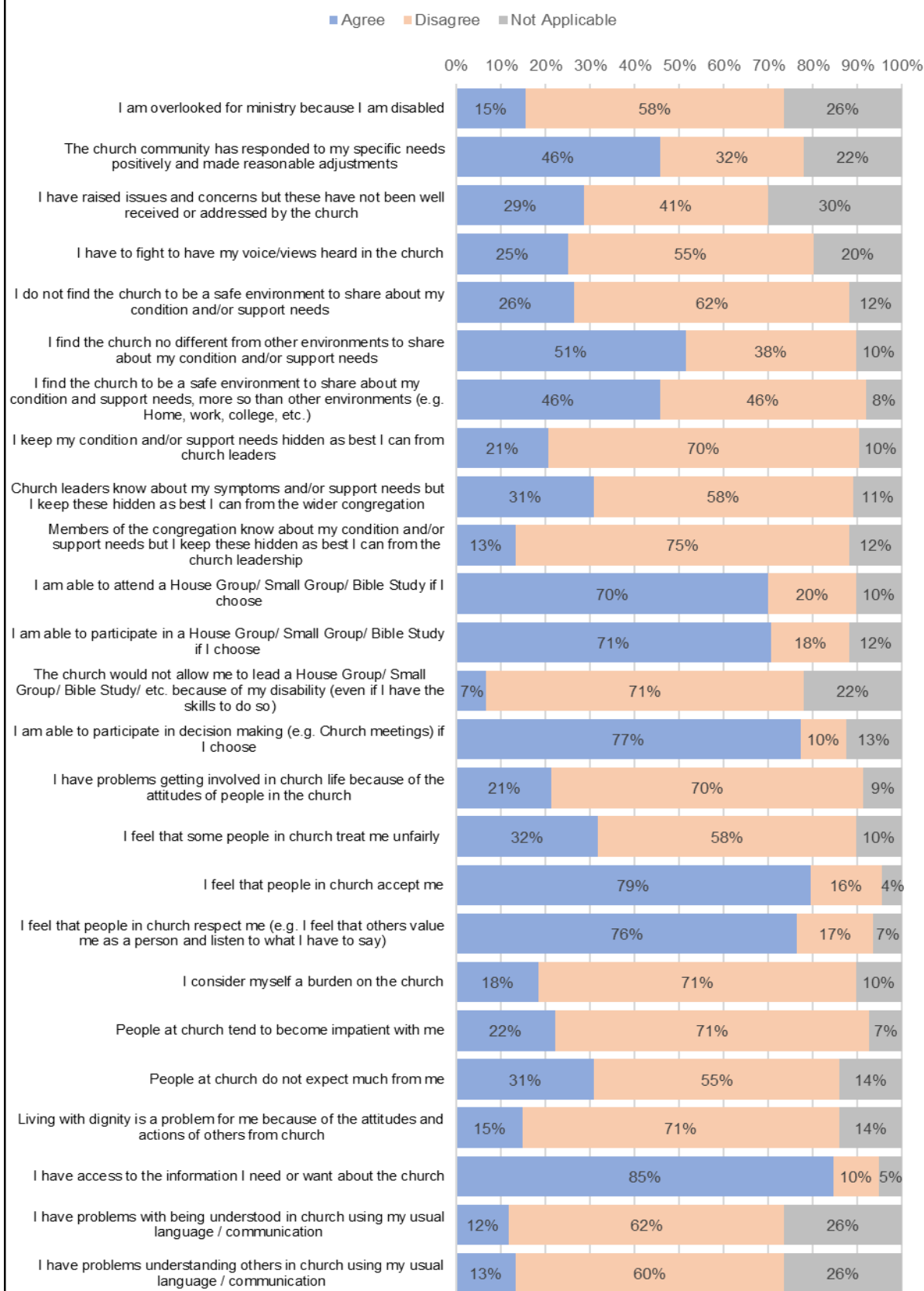


Figure 33: Inclusion and Participation (Part 2)

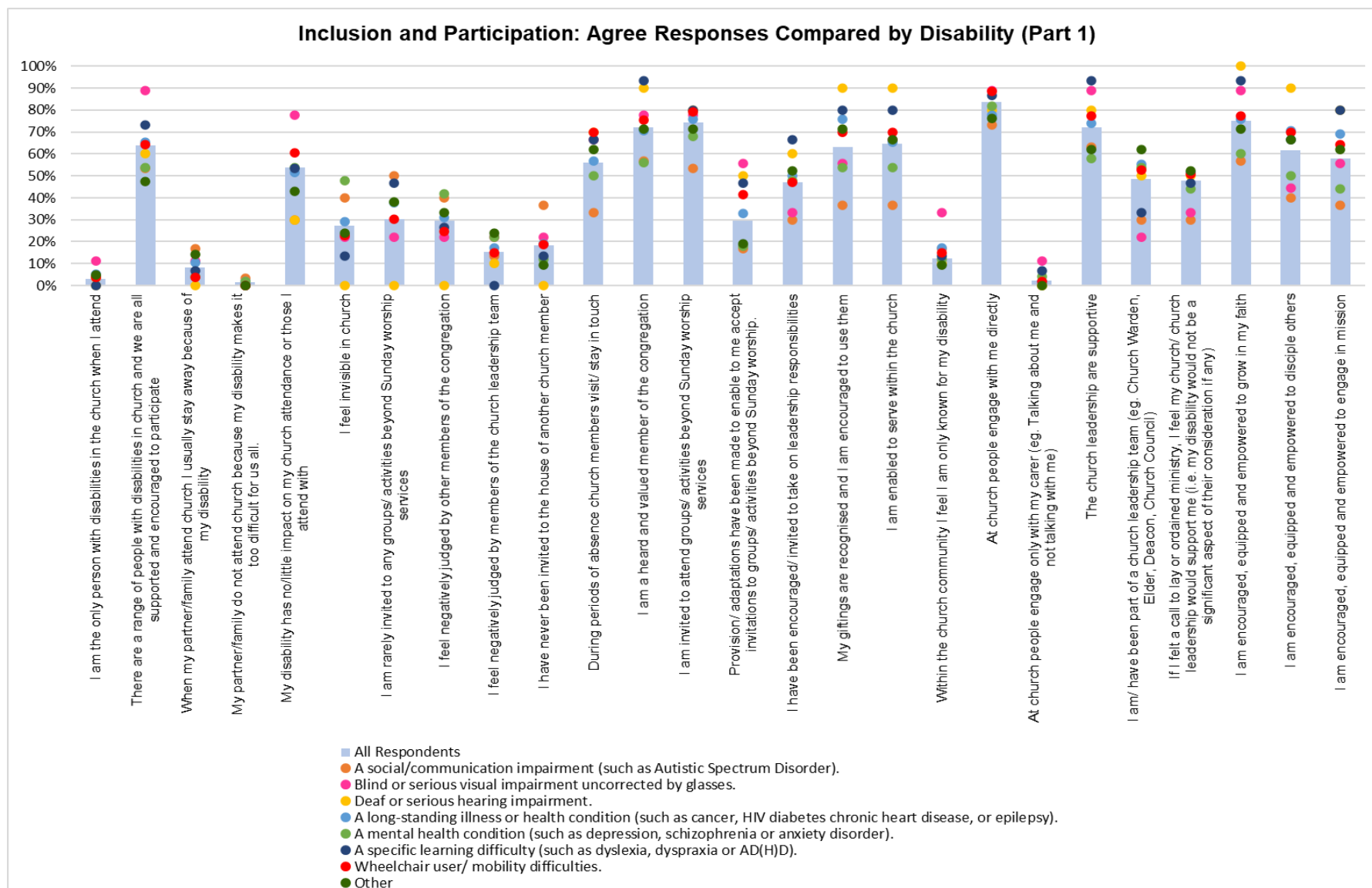


Figure 34: Inclusion and Participation (Disabilities, Agree Part 1)

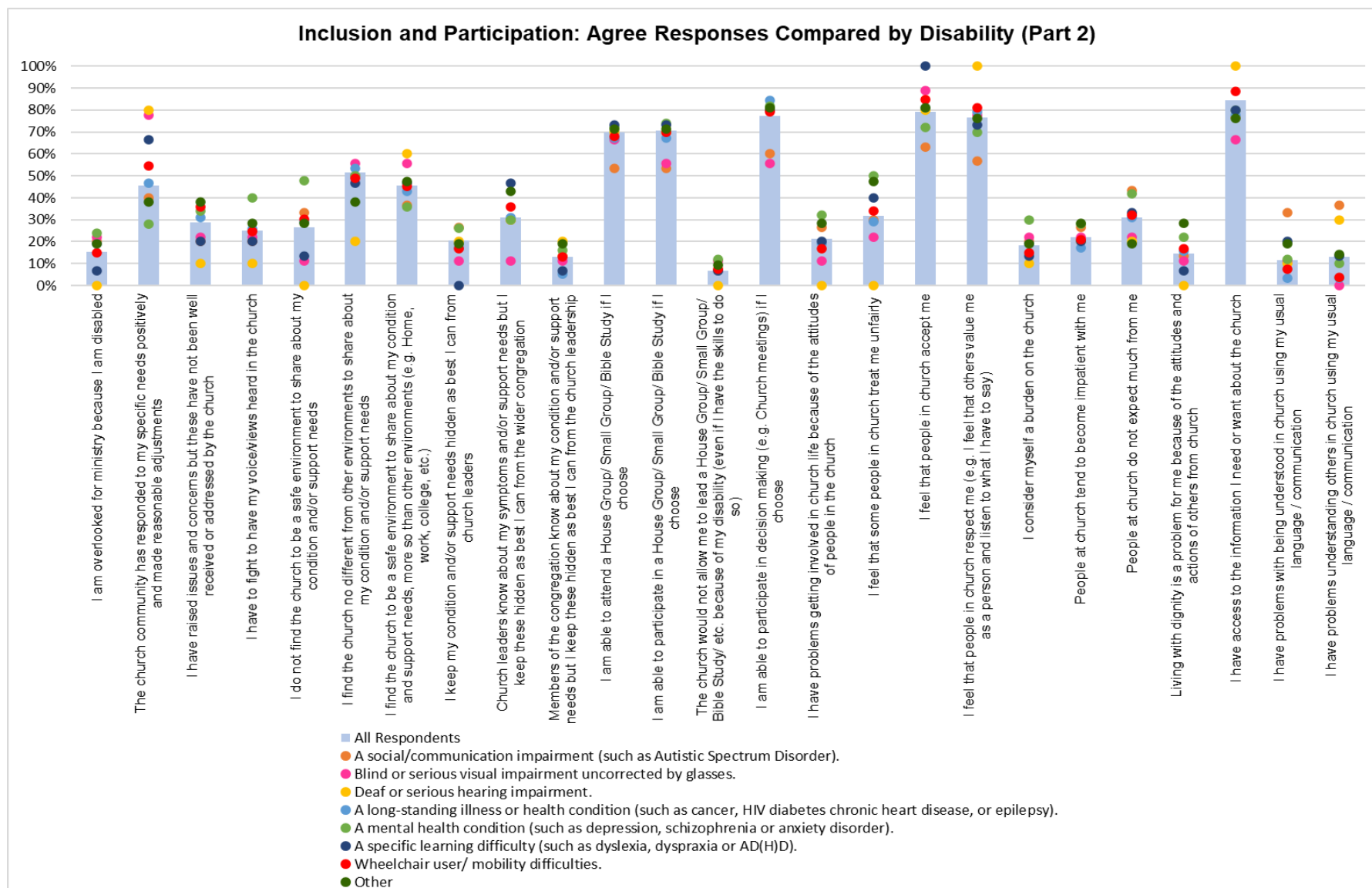


Figure 35: Inclusion and Participation (Disabilities, Agree Part 2)

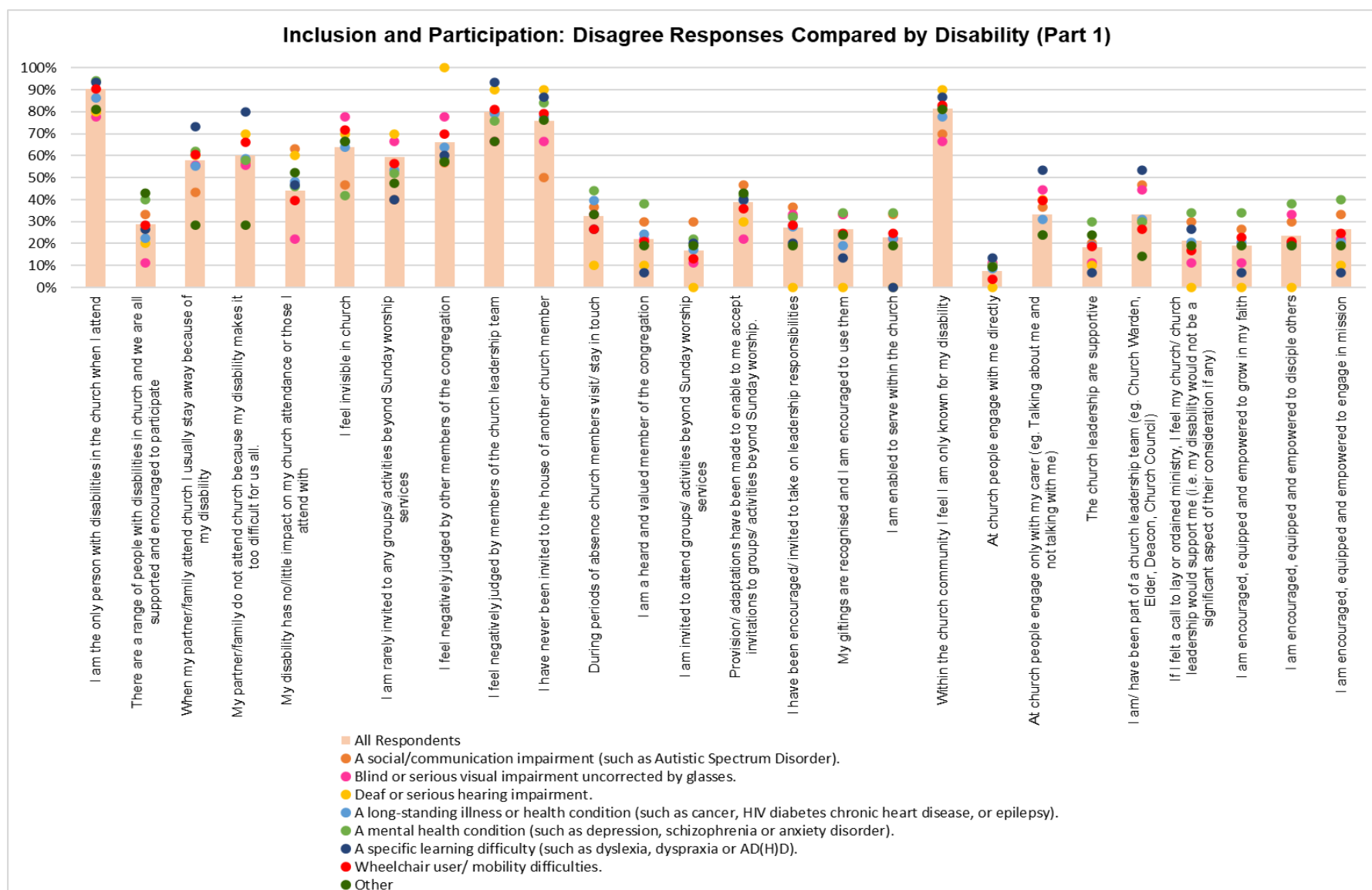


Figure 36: Inclusion and Participation (Disabilities, Disagree Part 1)

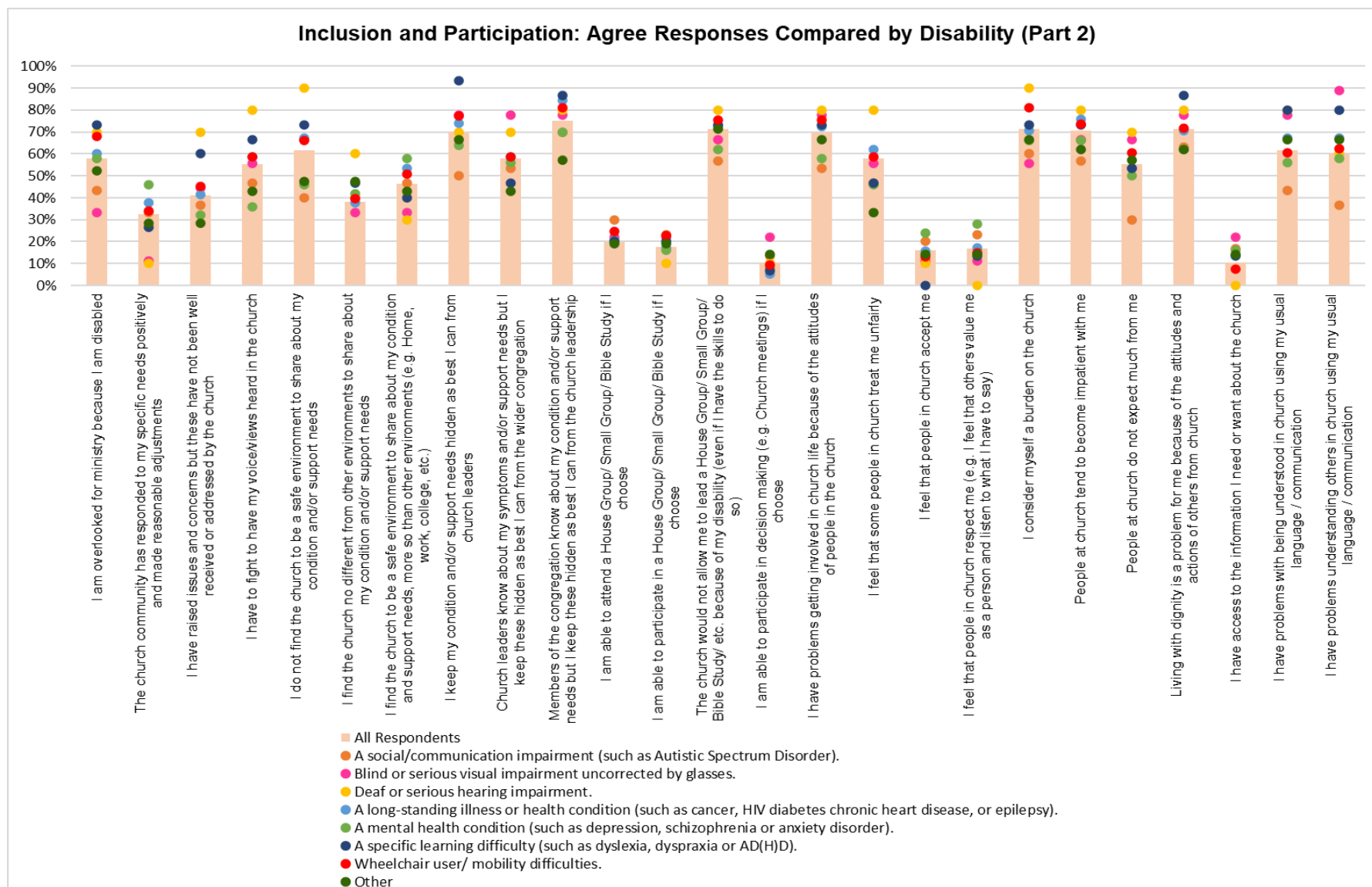


Figure 37: Inclusion and Participation (Disabilities, Disagree Part 2)

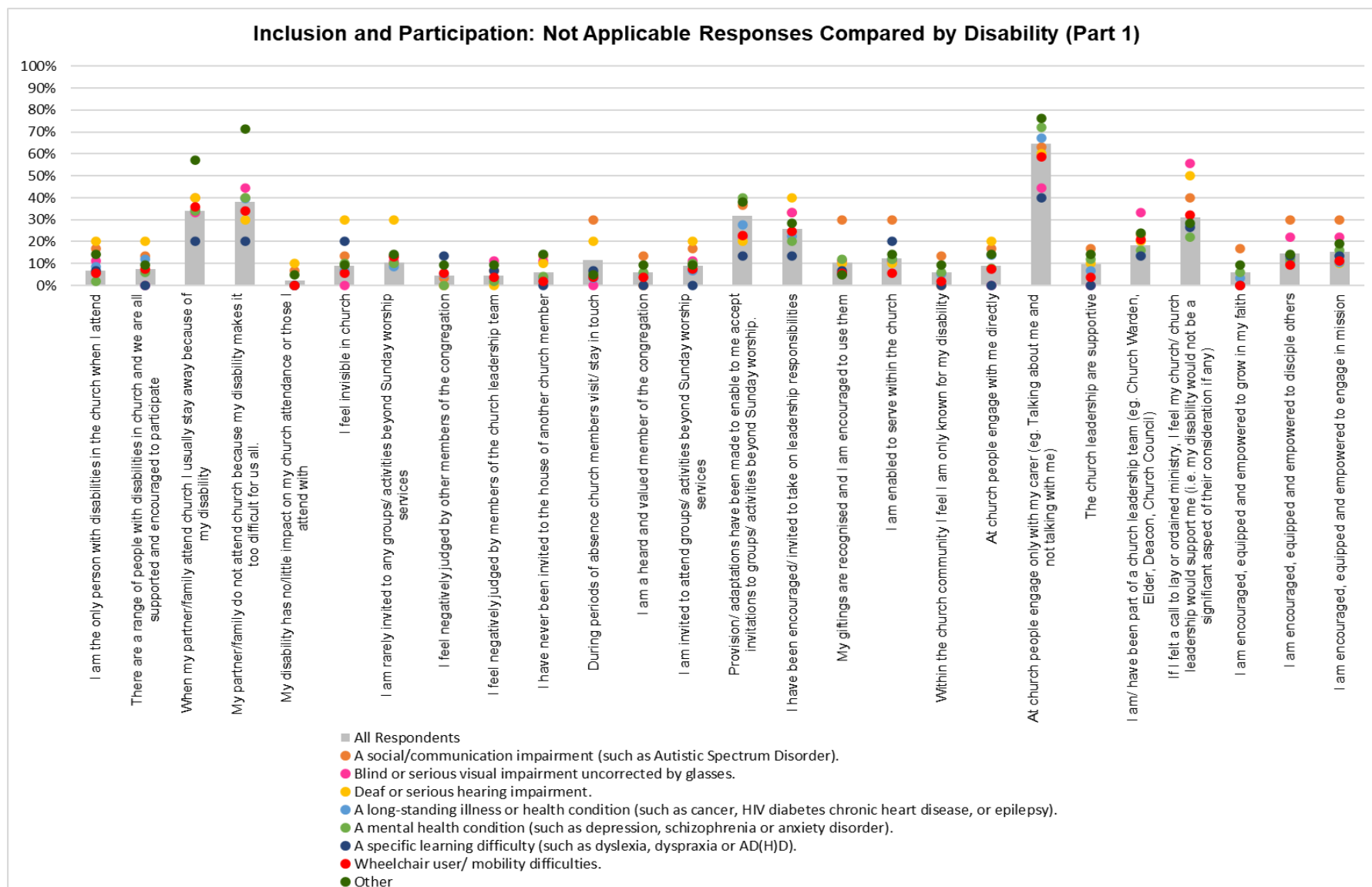


Figure 38: Inclusion and Participation (Disabilities, Not Applicable Part 1)

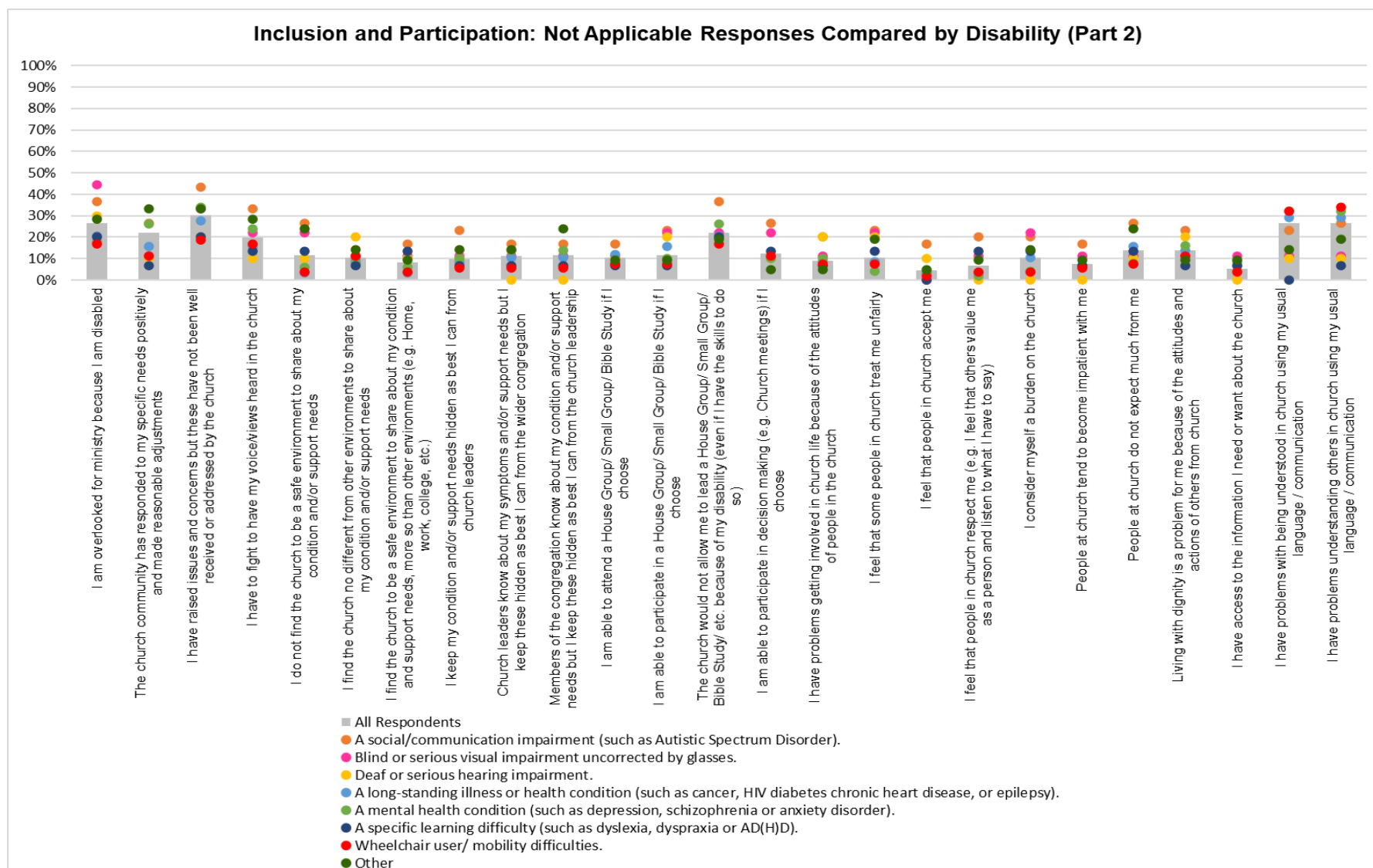


Figure 39: Inclusion and Participation (Disabilities, Not Applicable Part 2)

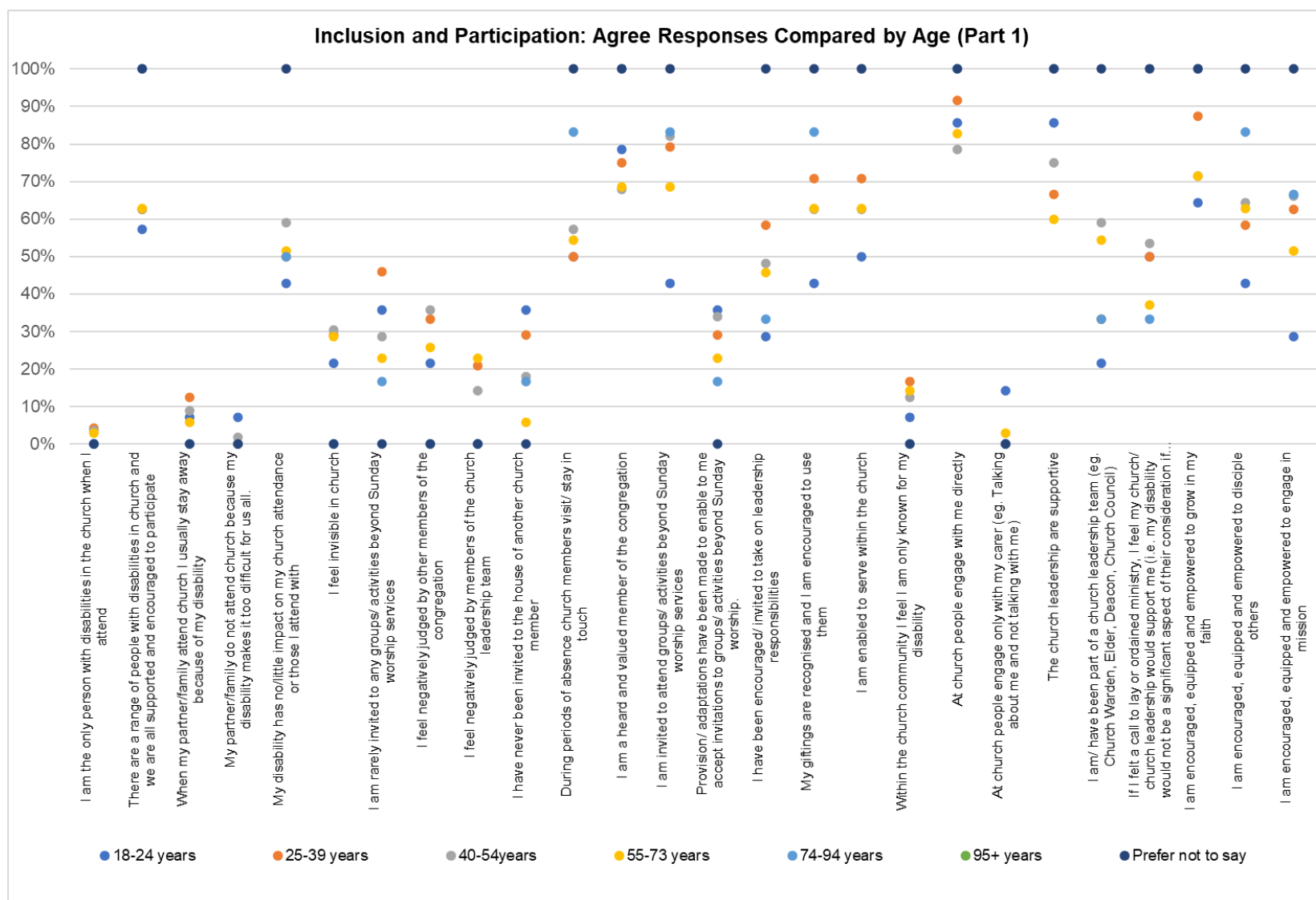


Figure 40: Inclusion and Participation Age Comparison (Agree Part 1)

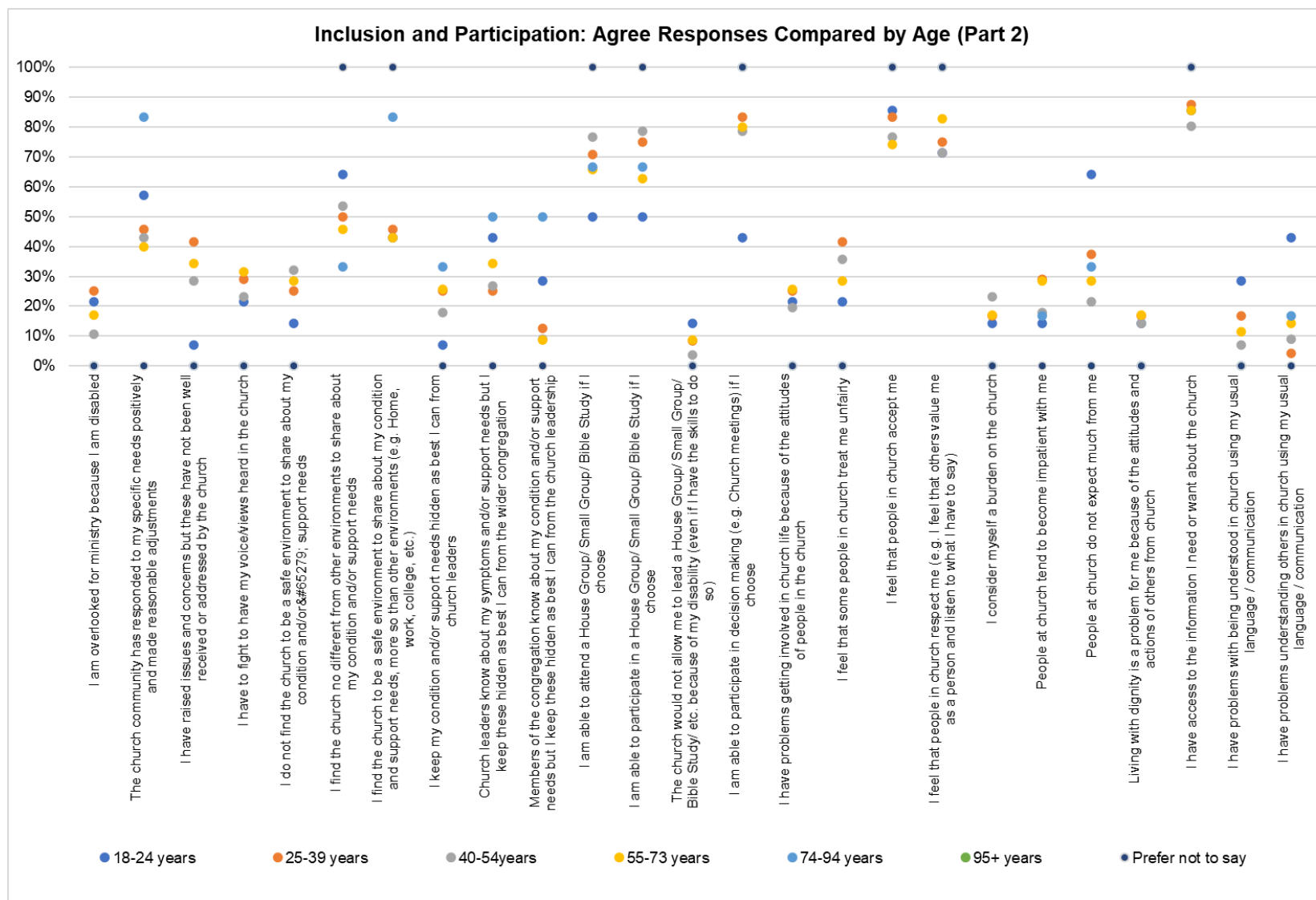


Figure 41: Inclusion and Participation Age Comparison (Agree Part 2)

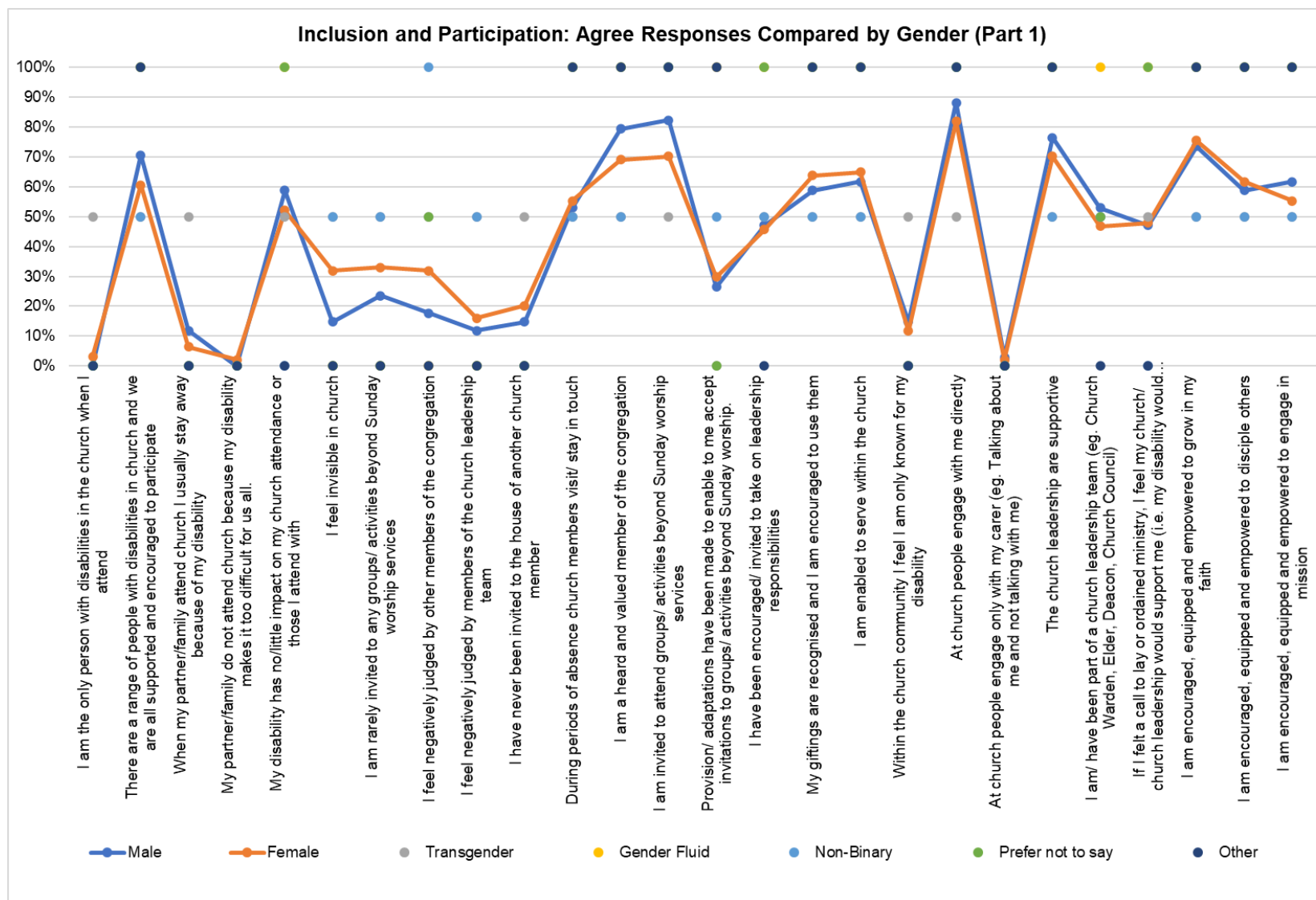


Figure 42: Inclusion and Participation Gender Comparison (Agree Part 1)

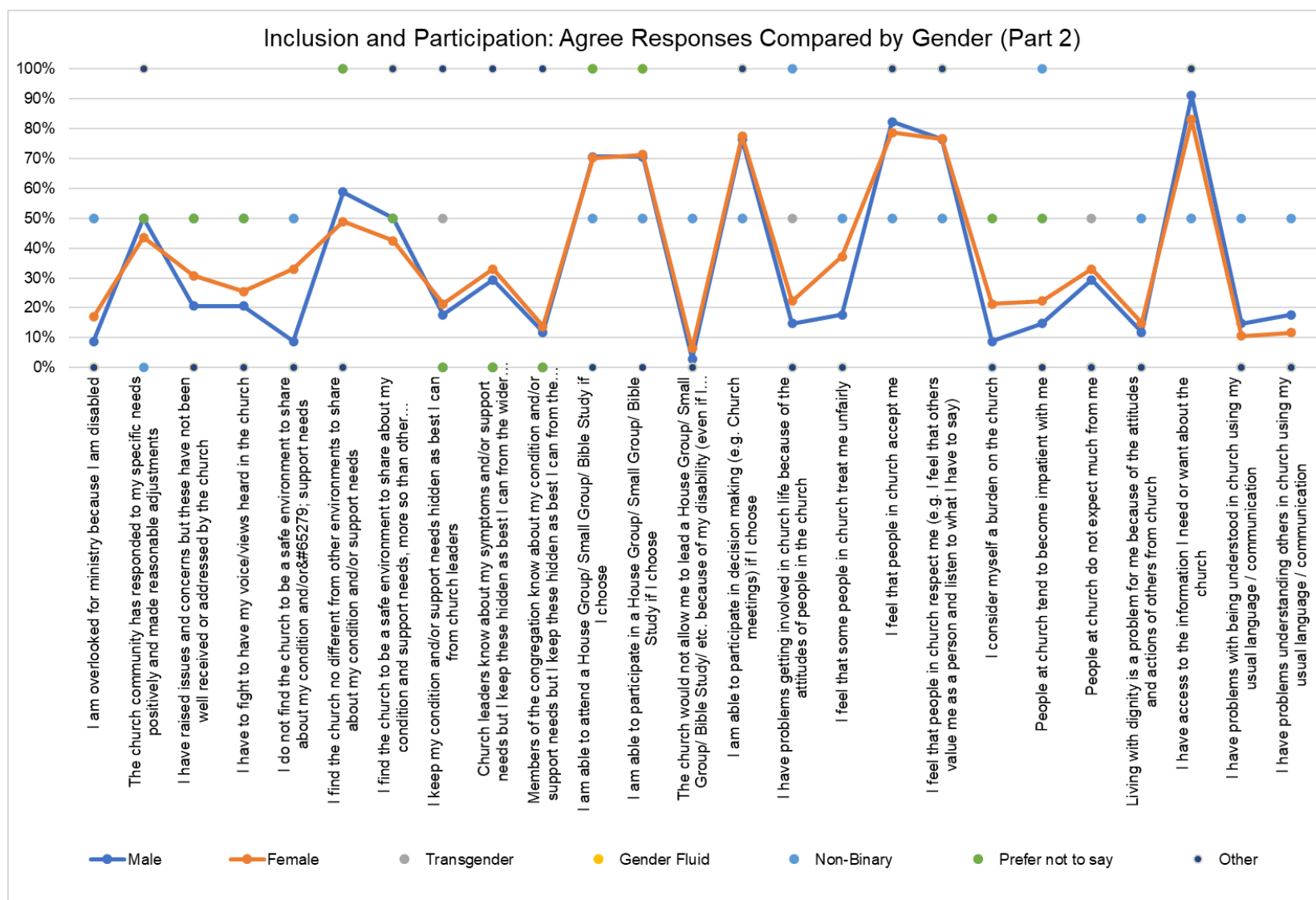


Figure 43: Inclusion and Participation Gender Comparison (Agree Part 2)

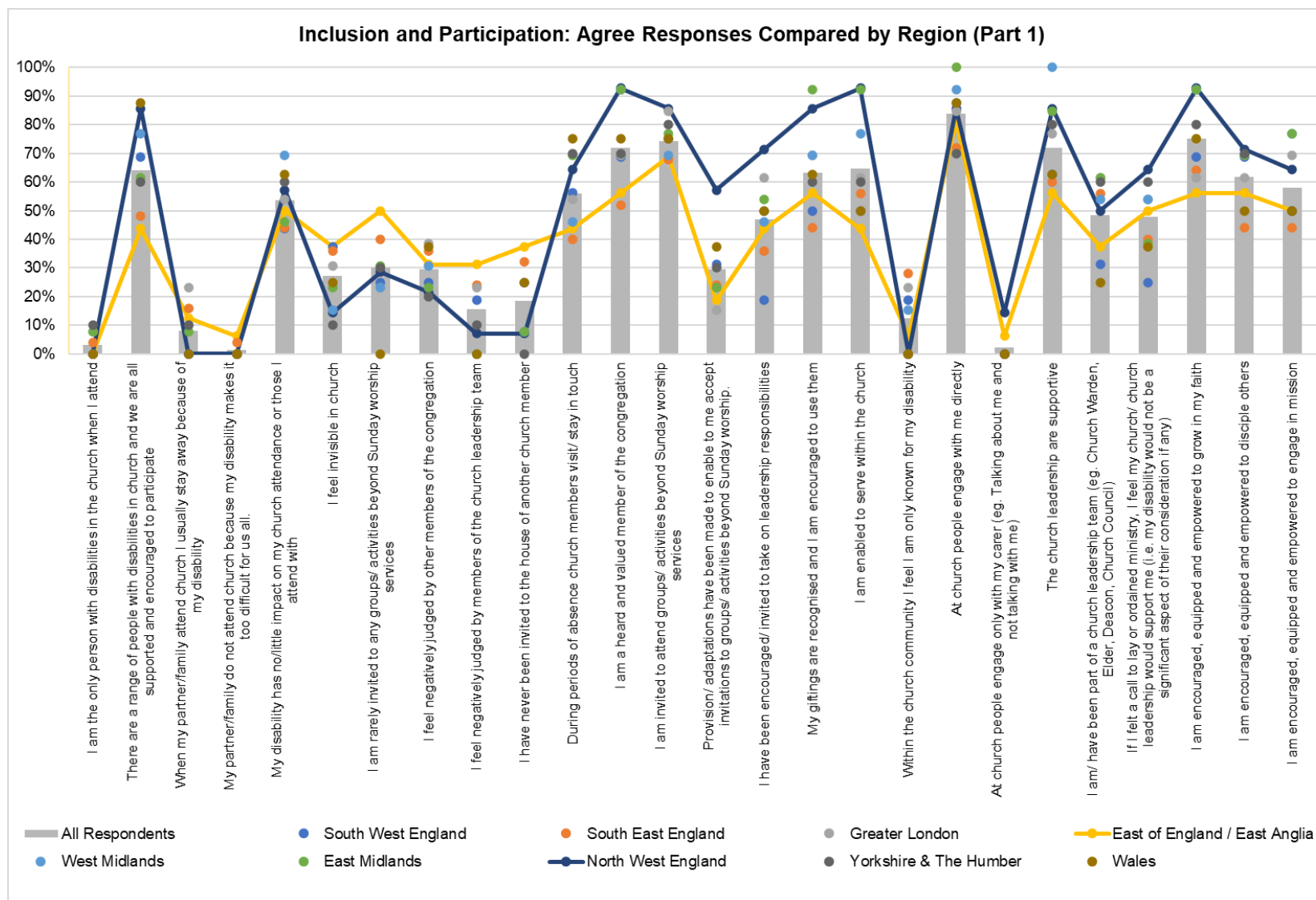


Figure 44: Inclusion and Participation Regional Comparison (Agree Part 1)

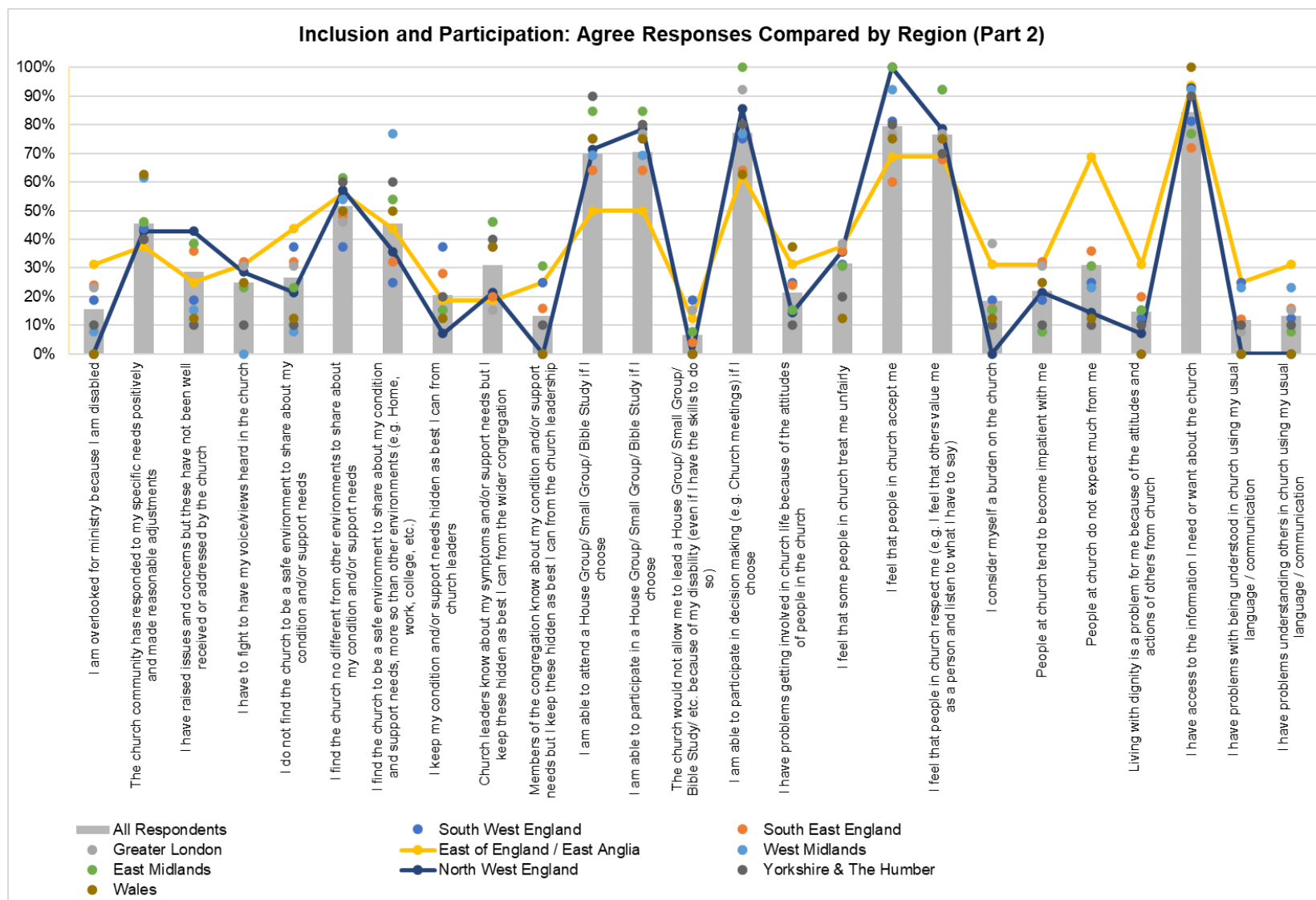


Figure 45: Inclusion and Participation Regional Comparison (Agree Part 2)

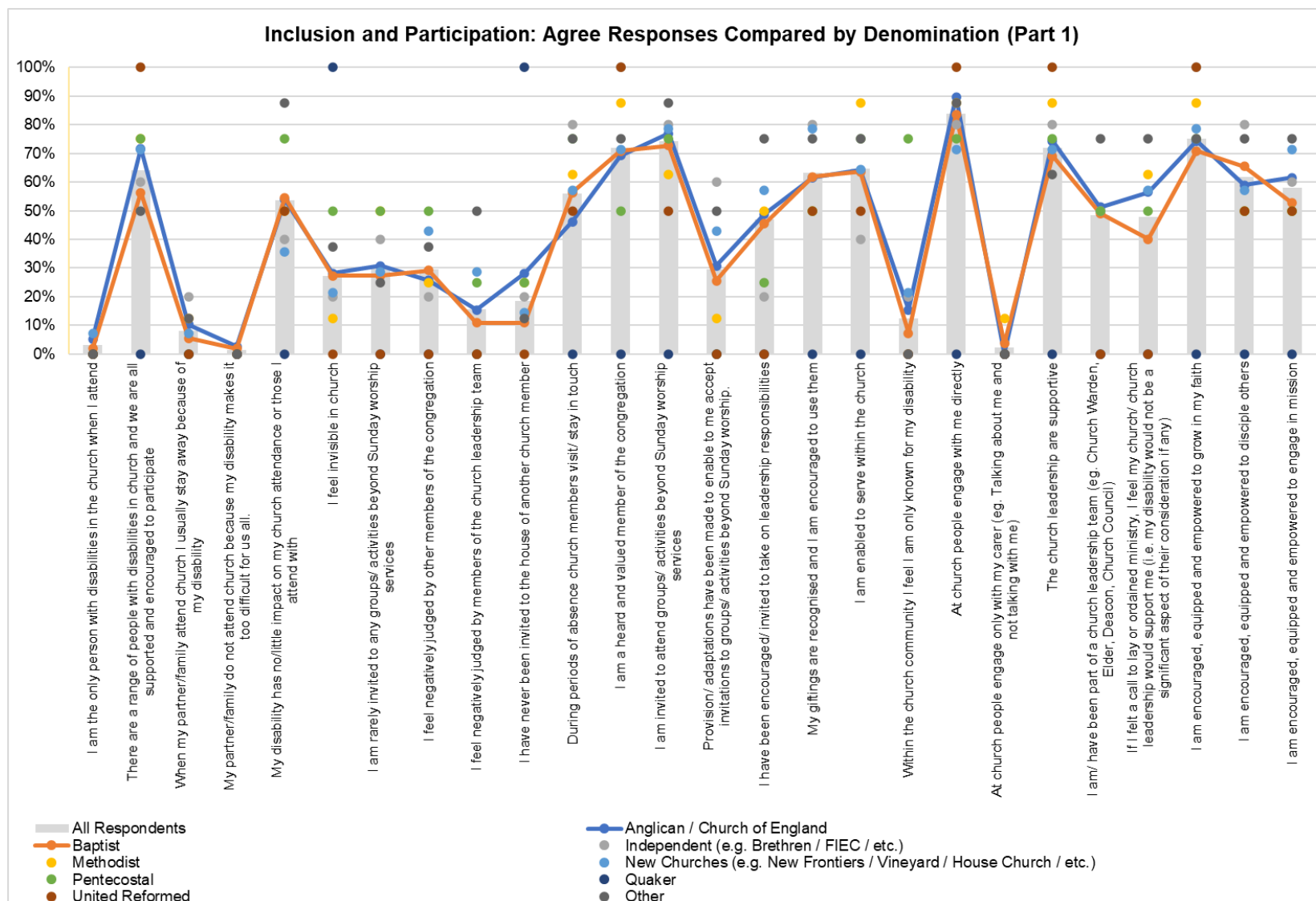


Figure 46: Inclusion and Participation Denominational Comparison (Agree Part 1)

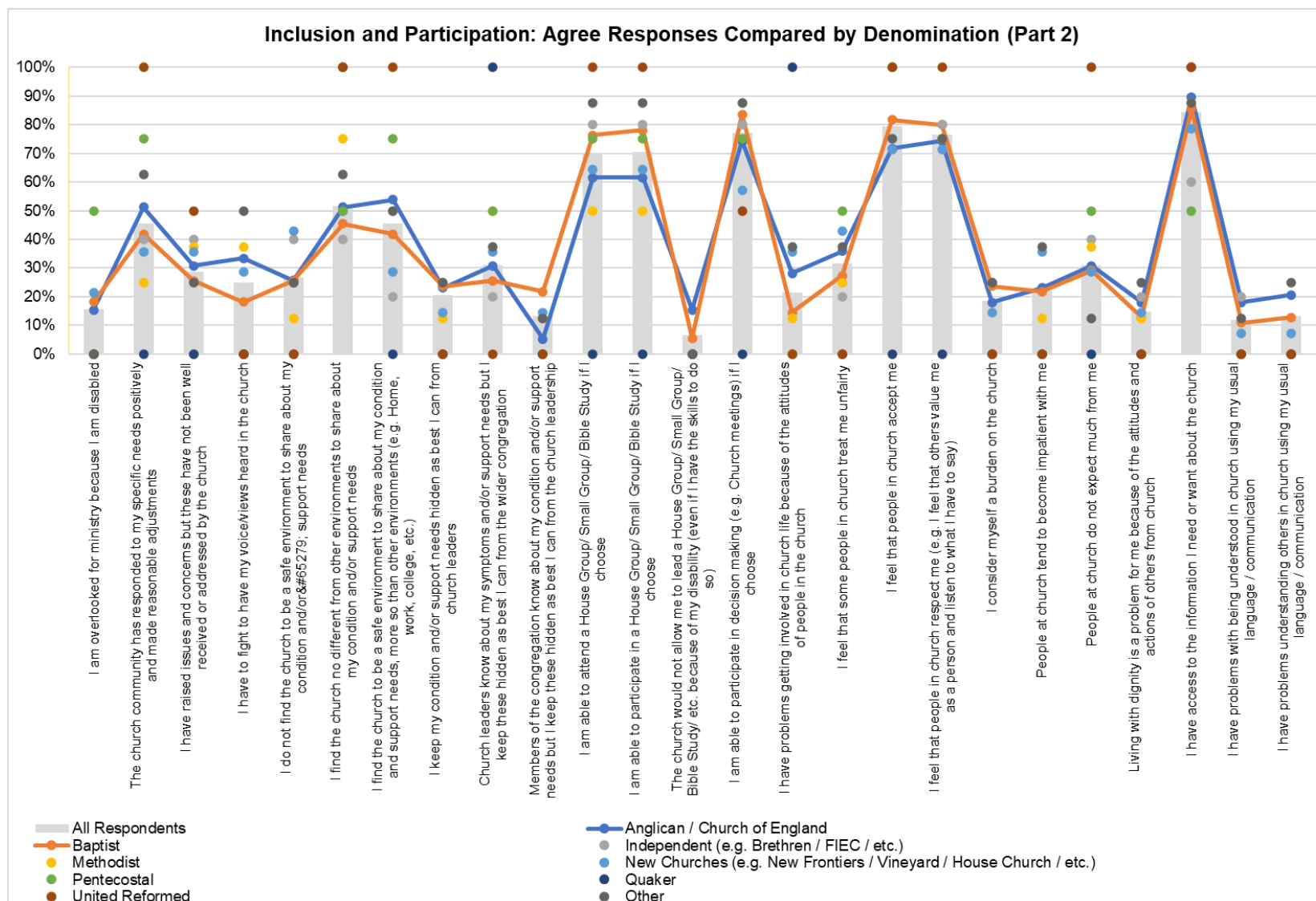


Figure 47: Inclusion and Participation Denominational Comparison (Agree Part 2)

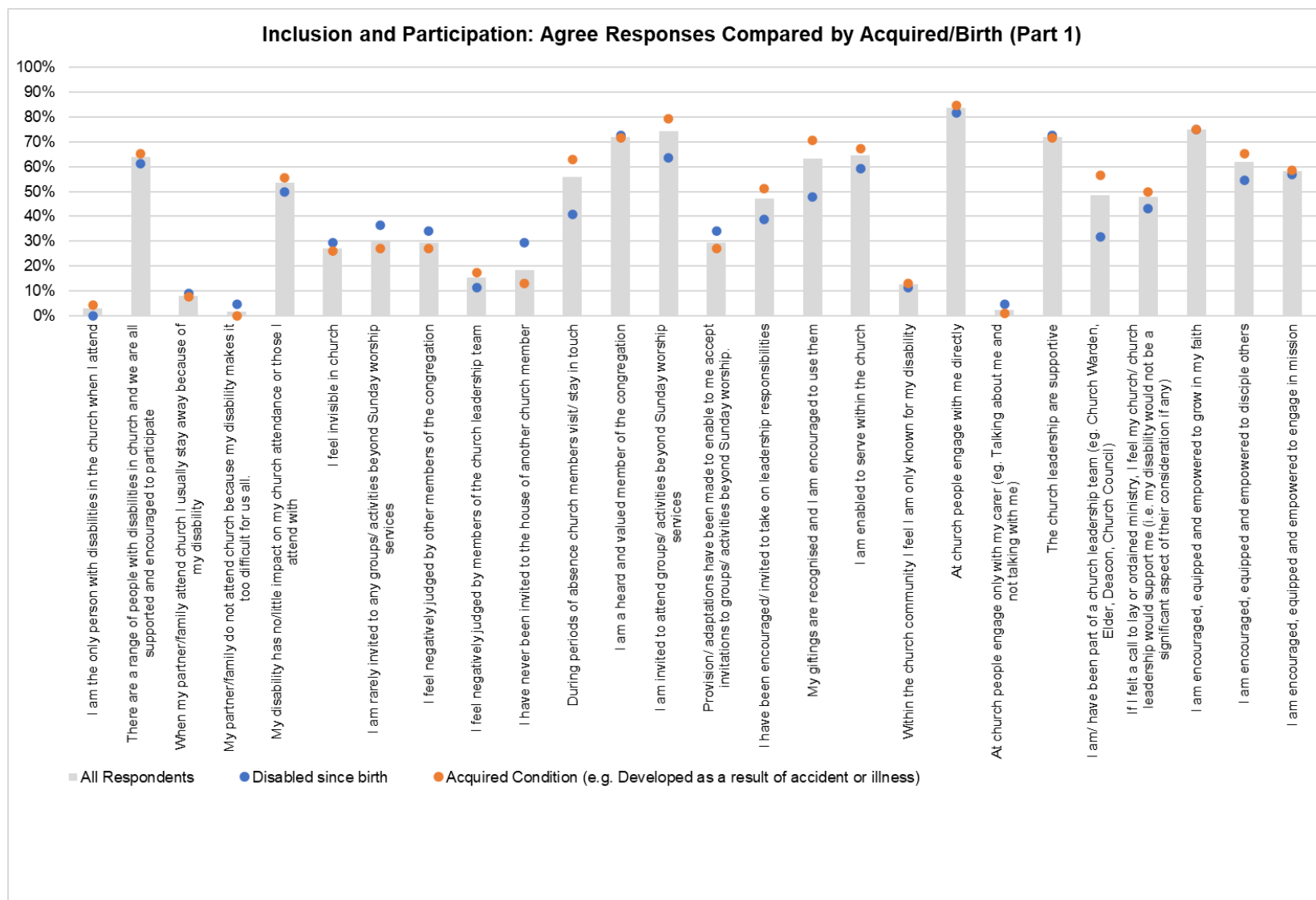


Figure 48: Inclusion and Participation Acquired/Birth Comparison (Agree Part 1)

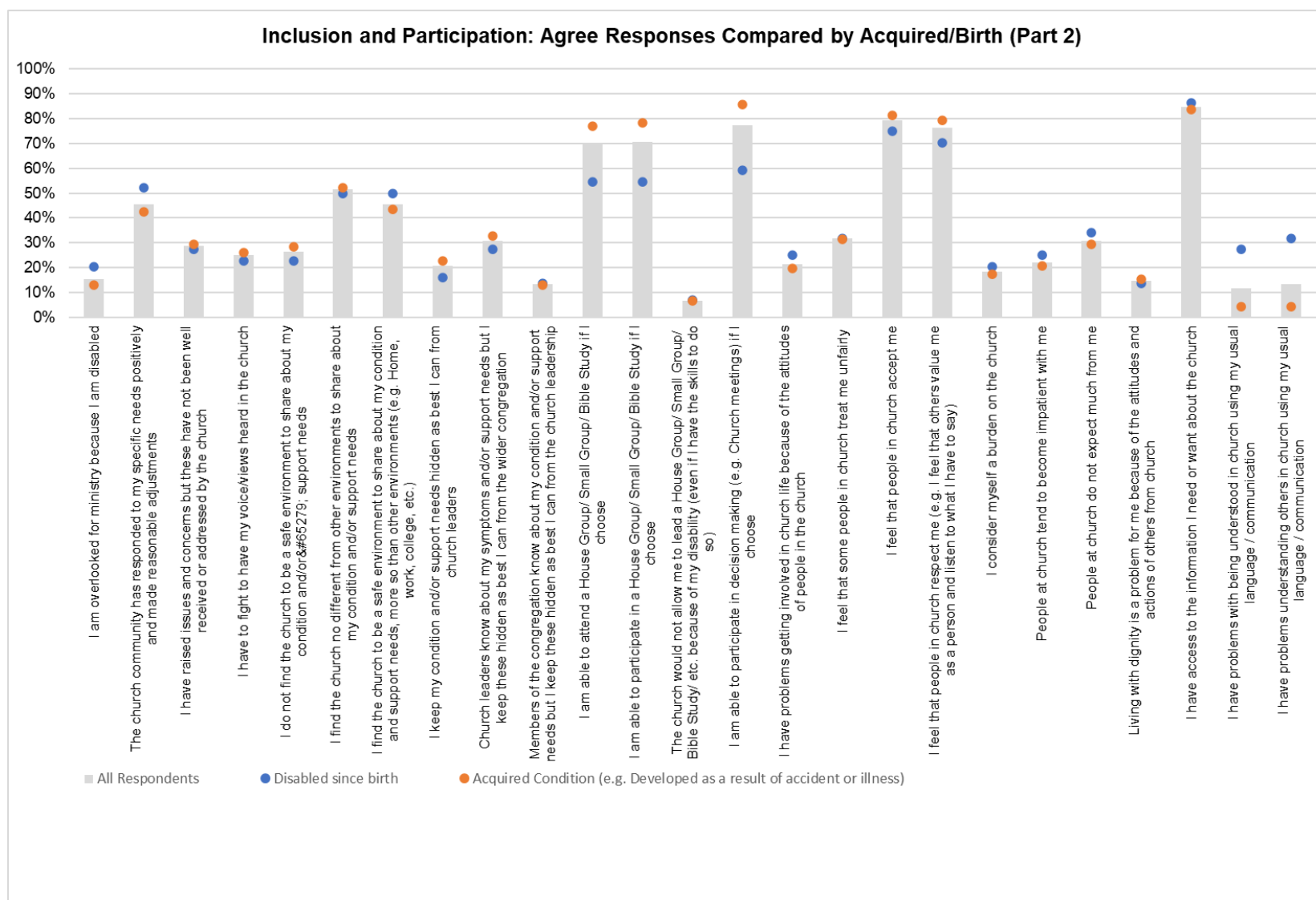


Figure 49: Inclusion and Participation Acquired/Birth Comparison (Agree Part 2)

Appendix 3: Glossary

3.1. Categories of Disabilities Used in the Research

Deaf: The word ‘deaf’ is used to describe people with all degrees of deafness, however, Deaf is used to distinguish members of the Deaf community who have severe or complete deafness.¹⁸⁹ Those who are Deaf typically speak using British Sign Language (BSL), though this may not be the case for all in this research as the term has been adopted to refer identify as Deaf through the survey.

Long-Standing Illness (LSI): A long-standing illness (long-term health condition, or chronic condition) is one which cannot currently be cured and requires ongoing management with medication and/or other therapies. Examples of LSIs include angina, arthritis, cancer, chronic fatigue, diabetes, and human immunodeficiency virus (HIV).

Mental Health Condition (MHC): Mental health is how we think, feel and behave; mental health conditions take different forms making the ways of thinking, feeling and reacting difficult or impossible. Examples of MHCs include anxiety, depression, eating disorders, schizophrenia, and obsessive-compulsive disorder (OCD).

Mobility Impairment (MI): A mobility impairment is a reduced range or capacity for physical exertion. This may result in pain or fatigue due and can include issues with balance or breathlessness. Of the 5.8 million people with MIs in the UK, up to just 726,000 use a wheelchair. Examples of MIs include muscular dystrophy, cerebral palsy, multiple sclerosis and paralysis.¹⁹⁰

Social Communication Impairment (SCI): Social Communication Impairments affect the use and understanding of verbal and non-verbal language for social purposes. Examples of SCI’s include Asperger’s Syndrome and Autism.

Severely Sight Impaired (SSI) (Blind): to be certified as severely sight impaired means a low visual acuity and/or severe reduction of field of vision.¹⁹¹

3.2. Disabilities and Conditions Referred to by Participants

Aphasia: difficulty with language or speech, typically resulting from damage to the left-side of the brain.

¹⁸⁹ RAD, *What is Deafness?* (Colchester: RAD, N.D.) <<https://www.royaldeaf.org.uk/about-us/what-is-deafness/>> [Accessed 2 December 2019].

¹⁹⁰ Sport England, *Mapping Disability: The Facts* (London: Sport England, 2016), p.28, <<https://sportengland-production-files.s3.eu-west-2.amazonaws.com/s3fs-public/mapping-disability-the-facts.pdf>> [Accessed 10 April 2020].

¹⁹¹ RNIB, *The Criteria for Certification* (London: RNIB, N.D.), <<https://www.rnib.org.uk/eye-health/registering-your-sight-loss/criteria-certification>> [Accessed 10 April 2020].

Arthritis (including Osteo Arthritis): causes pain and inflammation in a joint. Osteoarthritis is the most common type of arthritis, affecting the smooth cartilage lining of the joint.

Asthma: a lung condition causing occasional breathing difficulties.

Chronic Fatigue Syndrome / Myalgic Encephalomyelitis (CFS/ME): a long-standing illness of which the most common symptom is extreme tiredness.

Chronic Pain: pain that is prolonged or recurrent for more than 12 weeks despite medication or treatment.

Dementia: a syndrome associated with ongoing decline of the brain and its functions.

Fibromyalgia: a long-standing illness that cause pain all over the body.

Gastro-Oesophageal Reflux Disease (GORD): acid from the stomach leaks up into the oesophagus and causes heartburn and an unpleasant taste.

Irritable Bowel Syndrome (IBS): a long-standing condition of the digestive system.

Multiple Chemical Sensitivity (MCI) / Idiopathic Environmental Intolerance (IEI): is said to be a reaction to low levels of chemicals in the environment. The evidence for MCI is disputed and is explained typically as either allergy, toxicity or neurobiological sensitisation.

Noise Sensitivity (Hyperacusis): everyday sounds seem much louder than they should, the opposite of deafness.

Old Age: nearing or surpassing average or expected life expectancy.

Percutaneous Endoscopic Gastrostomy (PEG) Fed: a feeding tube direct to the stomach to provide nutrients and fluids.

Peripheral Neuropathy: Damaged nerves in the body's extremities (hands, feet and arms).

Physical deformity not requiring a wheelchair: a significant abnormality in the shape of a body part or organ.

Prosopagnosia (Face Blindness): unable to recognise people's faces.

Scoliosis: the twisting of the spine which curves to the side.

Sleep Apnoea: breathing stops and starts during sleeping.

Spondylitis: a long-standing condition in which the spine and other areas become inflamed.