

# That All May Worship

An Interfaith Welcome  
To People With  
Disabilities

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INTERFAITH DISABILITY  
ADVOCACY COALITION

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Faith is a common thread among people of all backgrounds. Eighty-three percent of Americans identify with a religion. Everyone has the right to be welcomed in the House of God of their choice. Disability should never be a barrier to inclusion.

Twenty years ago the first edition of “That All May Worship: An Interfaith Welcome to People with Disabilities” was published by the National Organization on Disability (NOD). The authors, Ann Davie and Ginny Thornburgh, created a guide that would help transform congregations of all faiths into places where children and adults with disabilities are welcomed, honored and enjoyed. Ginny was then working at NOD as Director of the Religion and Disability Program. Since then, 70 thousand of copies of “That All May Worship” have been sold.

“That All May Worship” eases the job of removing barriers to the full participation of people with disabilities in congregations and seminaries. There are the more obvious barriers of architecture and communications as well as barriers of attitude and unexamined thinking.

In 2009, Ginny moved to the American Association of People with Disabilities (AAPD) where she directs the Interfaith Initiative. More and more it has become clear: “That All May Worship” needed to be made available in an online format - free of charge. We are proud to offer an updated electronic edition of this popular guide. We hope it provides ideas for you to ponder, answers to your questions and hope to your concerns.

The Rev. Dr. Harold H. Wilke was a pastor, teacher, writer and advocate for people with physical, sensory and mental disabilities throughout the world. By his enthusiasm, self-acceptance, grit and twinkle, he provided an unforgettable role model. He challenged all, with and without disabilities, to heal the divisions among God's children. He called for religious communities to proclaim that people with disabilities are welcomed and needed in the House of God.



Dr. Wilke had a distinguished career in four areas of service: the Church, rehabilitation medicine, teaching and government. Ordained as a minister of the United Church of Christ, Dr. Wilke served on the faculty at Union Theological Seminary in New York and lectured at many other seminaries. He directed the Healing Community, which promoted awareness about access to a life of faith. He published numerous books and articles, including "Creating the Caring Congregation," a widely read book for congregations moving to integrate people with disabilities into the faith community.

Harold Wilke was a founding director of the National Organization on Disability (NOD). He inspired the authors of this handbook and countless others to identify and remove the barriers that prevent people with disabilities from achieving their full potential. Dr. Wilke lived in Claremont, California until his death in February 2003. He and his wife Peg, also deceased, were the parents of five adult sons.

**The Rev. Harold Wilke receives ADA signing pen in the toes of his foot from President George H.W. Bush on July 26, 1990.**



# That All May Worship

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## Introduction

The purpose of this handbook, "That All May Worship," is to assist congregations, national faith groups, student groups, chaplains, and seminaries in welcoming people with disabilities. The handbook is interfaith in scope and concerns people with all types of disabilities. The foundation of the House of God is weakened for all if barriers of attitude, communication or architecture prevent people with disabilities from participating fully in the worship, study, service, and leadership of their congregation. "That All May Worship" is a step-by-step "coaching manual" that enables congregations to identify and remove these barriers.

### Among Those Who Will Find the Handbook Helpful

- People with any type or combination of disabilities: long-term or temporary, physical, sensory, psychiatric or intellectual; apparent or not apparent
- Local Congregations
- Seminaries, religious colleges and universities, national faith groups
- Christians, Jews, Muslims, Hindus, Buddhists, and all who respond to God's love through inclusive worship and service to others

### Why Religious Congregations Need Coaching

Many Americans with disabilities have spiritual needs that are not being met. They cannot even enter the church, synagogue, meetinghouse, mosque or temple of their choice. Or when they do enter, they may be unable to negotiate stairs or narrow doorways. Some find print too small to read, sound systems that are inadequate, bathrooms they cannot use or an atmosphere that is hostile.

Historically, people with disabilities have been "cared for" at home or in institutions, in a paternalistic way. When architectural or program planning has been undertaken, they have generally not been invited to contribute.

Times have changed for the better! There are, in fact, lay and religious leaders, with and without disabilities, who are creating inclusive religious communities across America. Some take forthright measures and thoughtfully improve their buildings and programs. In so doing, many people come to recognize the gifts that people with disabilities bring to the congregation.

## An Interfaith Approach



Many people of faith, from every religious persuasion, are finding the need to examine disability based on their understanding of God as Creator and Sustainer of life. The writers, editors and supporters of "That All May Worship" believe that God does not send disability. Rather, God is with us in the adversities of life, just as God is with us in the joys and triumphs of life. God loves us with an everlasting love and is aware of our needs, fears, anxieties and hopes.

### God's Spirit Motivates

It is God's spirit that moves us to pray, especially in times of pain, sorrow and loneliness. God's spirit removes the attitudes that isolate people. And, God's spirit motivates a congregation to be affirming, inclusive and welcoming.

This handbook is a resource for all. Because words so often add to the barriers among people, considerable thought has been given to selecting helpful terms. For example, "congregation" refers to the people of any worshiping community. In the same way, "religious leader" refers to a pastor, priest, rabbi, imam, reader, minister or lay leader who serves on a vestry, session, board of readers, committee or council.

For those congregations that have already begun to welcome people with disabilities, our hope is that this guide will affirm progress and add new ideas. For those who, in the past, have felt overwhelmed by the task, may the handbook build the confidence needed to transform their congregations into communities where all may praise God, all may grow, all may serve, all may be served, and all may worship.

## Affirmation

As God's creations, we are fashioned uniquely,  
Each endowed with individuality of body, mind and spirit  
To worship freely the One who has given us life.  
Each of us has abilities; each seeks fulfillment and wholeness.  
Each of us has disabilities; each knows isolation and incompleteness.  
Seeking shelter from the vulnerability we all share,  
Claiming our promised place in God's Household of Faith,  
We are transformed by invitation, affirmation and love.  
In grateful response, we...

Worship and serve God, the source of hope and joy;  
Celebrate and serve one another, rejoicing in our diversity;  
Transform and serve the world, until we become a Community  
which reflects God's Oneness and Peace.

Let the House of God be open to all who would enter and worship



*"For my house shall be a house of prayer for all people." Isaiah 56:7*



## Attitudes About Disability in the Religious Community

### This We Believe!

If there are barriers of attitude, communication or architecture for anyone, the foundation of the House of God is weakened for all.

Every person is created by God, each is loved by God, and none should be diminished by another, even by unintentional actions or words.

God may see "wholeness of spirit" where our imperfect vision may see only "brokenness of body or mind."

Rather than being a burden, shared need and vulnerability should be recognized as the "glue" of a supportive community.

Under distracting surface traits, there is the essential person created by God.

Fortunately, God does not use intelligence or "rate of growth" to measure faith. God knows our abilities and our potential. God longs for us to respond lovingly with all that we are, and to be all that we can be.

God frequently works through the unexpected! We need to listen, persevere in spite of inconvenience and remain open to creative solutions and opportunities.

### This We Know!

Accidents, diseases and birth conditions occur that demand dramatic and taxing changes. The individuals and families may experience intense disappointment, loss, financial burdens and anger. Fortunately, for some families the resulting responsibilities bring out new talent, compassion and vision. Never forget: A disability may be one automobile ride, one unsteady stepladder, one overheated stove, one high fever or one stroke away. If we don't have a disability now, we surely may have one before we die.

### Let's Face It!

Many people are uncomfortable with people who look and act "different." As a result, people with disabilities are often ignored, isolated or rejected. When the response grows out of pity, the person with the disability feels patronized and diminished and does not necessarily react with gratitude. How much better to regard someone primarily as a person with abilities, and only secondarily as someone who may need assistance to use those abilities.

## ATTITUDES ABOUT DISABILITY IN THE RELIGIOUS COMMUNITY

### Keep Thinking!

"Think before you speak," the old adage goes. But what if our thinking is unexamined or stereotypical? Everyone, at some time in life, has attitudinal disabilities which affect relationships, including:

- apprehension
- insensitivity
- awkwardness
- self-centeredness
- embarrassment
- paternalism

Fortunately, many have learned by effort, luck and experience that people with disabilities are more like us than unlike us. We all have similar needs, wants and fears. We share our humanity. Sometimes we can compensate for problems by ourselves; other times we need family and community support to be ourselves.

### We Have Naysayers Among Us!

**Some say:** "Of course, we'd be glad to have 'the disabled' come to worship, but we don't seem to have any of 'them.' If they are not coming, they must not want to come."

**Others say:** "Wait a minute! I tried being nice to those folks. They have an attitude! They don't want my help. They're downright rude sometimes, and some are aggressively unpleasant to be around. Why invite trouble?"

To confront the naysayers, draw upon faith, knowledge of people and common sense.

**Reply by saying:** "Think about what may have happened in the past to the person with a disability who is trying to worship. Perhaps he or she was treated thoughtlessly by a religious leader or by someone with good intentions but little sensitivity. Bitter feelings may last a long time. Guilt and confusion, anger and disappointment are often covered by pretending not to care. We all do it!"

### Finally, remind the naysayers that:

"It's no more accurate to generalize about the attitudes of people with disabilities from having met one or two, than it is to generalize about people without disabilities, having met one or two."

*"Allah does not judge according to your bodies and appearances, but He scans your hearts and looks into your deeds."*

*Prophet Muhammad*

# Getting Underway

## How Shall We Begin?

Many of us have disabilities that are visible. Others have disabilities that are not apparent. Some disabilities are physical or sensory, and others are intellectual or psychological. Some disabilities are temporary, although severely limiting while present. Others are permanent, but need not be fully limiting.

Just as every family has at least one person who requires extra support and understanding, so too, in every congregation there are already people who have been accommodated. Adjustments have been made for Mrs. Green, who has cataracts; for Mr. Rosenfeld, who has a heart condition; or for the Smiths, whose son was in a serious diving accident.



## This Is a Great Start!

Next look around for other members who may have been overlooked. They may be attempting to hide their problems by infrequent attendance or by quietly enduring discomfort. Be assured that they are paying a great price, psychologically, and perhaps spiritually.

## Affirming Language

People throughout the country are becoming aware that to live with a disability should mean to live in a supportive community, not hidden away in painful isolation. Because of this, they are also changing their language to show respect for persons with disabilities rather than labeling them like objects. Appropriate language and terminology is in evolution.

"People-first Language" refers to the principle that the person is primary, the disability secondary.

Language should affirm rather than diminish. Listen to the affirmation in this announcement:

"Worshippers with disabilities may request assistive devices," rather than, "Disabled worshipers may request assistive devices." Note, too, that a person "uses a wheelchair" just as another person "uses" legs. The person is not "wheelchair bound" nor "confined to a wheelchair."

### The following defined words are frequently misused:

- **Disability:** A permanent physical, sensory or intellectual impairment that substantially limits one or more of a person's major life activities, including reading, writing and other aspects of education; holding a job; and managing various essential functions of life such as dressing, bathing and eating.
- **Handicap:** A barrier society places on the person with a disability.

### People-first Language:

Thus, one could say, "The stairs in that building will be a handicap for John, who uses a wheelchair," but not, "John is handicapped and can't use the stairs." Certain words and phrases are no longer acceptable. Among these are "crippled," "crazy," "retard," "deaf and dumb," "wheelchair bound," "homebound," "shut-ins," "victim," "invalid" and any categorization beginning with the word "the," such as "the disabled," "the blind," "the deaf" or "the mentally retarded."

NOTE: People with disabilities should acknowledge sincere efforts to change old

language habits. "Politically correct" disability language is often presented in an overly oppressive way. As a result, people without disabilities, but with good intentions, may decide that trying to affirm and include people with disabilities isn't worth the effort.

### Consider these comments...

A college senior using a wheelchair is out for dinner with his girlfriend. The waitress looks at her and asks: "And what will HE have?"

"I'd much rather have someone deal with me directly, maybe even say the wrong thing, than to say nothing at all. Words I can handle. Being ignored is tough!"

"Listen to the straight questions of children about my chair. They're great! They want to know what happened to me, how fast I can go in the chair, how it works, what I can do with it, and whether I hurt. They're into real questions! Adults at the church coffee hour clam up, look the other way, act embarrassed and try to shoo the children away."

"It's ten times easier for me to buy a pizza or beer than to get into my synagogue."

## Create a Disability Awareness Committee

For any congregation, national religious organization, or seminary to make long lasting changes, a planning structure will be needed. Enlist a group of committed people, with and without disabilities, and create a Disability Awareness Committee or an Inclusion Committee.

### Select Participants Carefully

- Give the Committee status by asking the religious leader to sign a letter inviting members to serve.
- Get the backing of the congregational governing board.
- Invite, as Committee members, people who have:
  - various types of disabilities
  - a family member with a disability
  - responsibility to plan and lead worship
  - influence in making policy
  - professional skills such as therapists, psychologists, and physicians
  - responsibility for managing the building
  - skills in carpentry, contracting or architecture
  - responsibility for educational curricula, especially special education skills
  - experience in fundraising
  - responsibility for community outreach
  - skills in writing and communicating.

### Overview of Committee Responsibilities

Each meeting and activity planned by the Committee will broaden the understanding of the participants who influence others in the congregation. Committee members will become bolder about taking action. After a time, additional people with disabilities will join the Committee and it will become known as a safe place where hurtful stories may be told.



### **Possible Agenda Items for the First Committee Meeting**

- Divide into small subgroups so individuals have ample opportunity to exchange ideas.
- Discuss experiences within the congregation that may be creating barriers for people with disabilities and for their families.
- Take time to examine the moral dilemma present when a congregation excludes or does not seek out those with disabilities. Reflect on such questions as "What is it to be human?" "What is God's role in suffering?" "What binds people together in community?"
- Make lists of access problems encountered by someone with physical or sensory disabilities who is trying to enter or use the building.

### **Additional Agenda Items for the Committee**

- Consider policies and practices which could be viewed as discouraging to someone with a disability. What about worship, social and educational activities, and outreach? What about camping opportunities for children and youth?
- Divide the list of barriers and problems by type.
- Refer recommendations to the appropriate congregational authority such as the session, council, vestry, deacons, trustees or building committee.
- Strategize about fundraising. Ideas should range from urging the high school youth group to sponsor a needed program, to inviting families to contribute money for a ramp or enhanced sound system in honor or in memory of a family member.

### **Long-range Considerations for the Committee**

The Committee will need both short-term and long-range strategies. Making changes at one point in time does not necessarily answer the need forever. Devices get broken, well-intended adjustments may prove to be inadequate, and new requests are made that are valid. The Disability Awareness Committee can be an informed and pro-active support group, known in the congregation for its ability to make changes on behalf of children and adults with disabilities. Its very presence will serve to assure members and visitors who seek an accepting atmosphere for worship, education and service.

## Pivotal Role of the Religious Leader

Religious leaders have a unique opportunity to be role models when they demonstrate a vibrant interest in the lives of children and adults with disabilities. Even if they have not yet been personally touched by disability, they can lead their congregations into new ways of thinking and acting. Consider these possibilities:

- Learn more about the various disabilities and chronic illnesses present among members. Consider what special pastoral care may be needed and train members of the congregation to assist in offering spiritual, moral and physical support.
- Use affirming language when referring to persons with disabilities.
- Urge the hiring of qualified people with disabilities to be religious leaders, music directors, staff, and custodians.
- Reveal, in appropriate settings, personal experiences with illness or disability-related crises which have affected faith development.
- Encourage religious educators to seek out curricula for all ages, with thoughtful content and multi-sensory teaching strategies.
- Provide a training session for ushers since they are usually the first people to greet and welcome a newcomer. Ask people with disabilities to assist in the training!
- Be attentive, in difficult fiscal periods, to the tendency of committees to let access problems slip down on committee agendas. Encourage creative fundraising and become known as an advocate for individuals with disabilities in the congregation.
- Remind those who nominate and appoint congregational leaders to include members who happen to have disabilities.
- If lay readers usually participate in worship services, ensure that members with disabilities are also invited. Arrange participation in ways that de-emphasize differences from other worship leaders. See that microphones are adjusted, and that the place of reading is appropriate.
- As a counselor, be available to people with disabilities and their family members. Listen for their strengths and their valuable perspectives on congregational life. Help them find their place of belonging.
- Plan liturgies, sermons and stories for children which affirm that each person is created by God, loved by God and accepted, as is, by God.
- Turn to Interfaith Litany on Wholeness on page 12 which has been well received by many congregations.



## Interfaith Litany For Wholeness

Leader: Let us pray for all God's people.

For people who are blind and cannot see, and for those who can see but are blind to people around them,

**Response: God, in your mercy help us touch each other.**

Leader: For people who move slowly because of accident, illness or disability, and for those who move too fast to be aware of the world in which they live,

**Response: God, in your mercy help us work together.**

Leader: For people who are deaf and cannot hear, and for those who can hear but who ignore the cries of others,

**Response: God, in your mercy help us respond to each other.**

Leader: For people who learn slowly, for people who learn in different ways, and for people who learn quickly and easily but often choose ignorance,

**Response: God, in your mercy help us grow in your wisdom.**

Leader: For people who have chronic illnesses for which there is no known cure or relief, and for people who live in unholy fear of developing a chronic illness,

**Response: God, in your mercy help us and heal us.**

Leader: For families, friends and caregivers who serve people with disabilities, and for those who feel awkward in their presence,

**Response: God, in your mercy help us see each other with your eyes.**

Leader: For people who think they are worthless and beyond your love, and for people who think they don't need your love,

**Response: God, in your mercy help us accept your love.**

Leader: For people who feel isolated by their disabilities, and for people who contribute to that sense of isolation,

**Response: God, in your mercy change our lives.**

Leader: For all the people in your creation, that we may learn to respect each other and learn how to live together in your peace,

**Response: God, in your mercy bind us together.**

**All: AMEN**

Written by: The Rev. Kate Chipps

Adapted by: Ginny Thornburgh

# Congregational Hospitality

Everyone, with or without disability, should be welcomed into the House of God with courtesy and thoughtfulness. By anticipating the particular needs of those with disabilities, the atmosphere and conveniences are frequently improved for all. Even subtle changes make a positive difference.

## Hospitable Weekly Services



- Print regular announcements of the following type, describing the accommodations that are available:
  - The congregation has a variety of resources available. These include large print hymnals and prayer books, large-print Bibles, large-print and brailled bulletins, and audio loops. Please speak to an usher if you need some assistance.
  - Everyone is welcome to attend all congregational activities and to participate in our religious education programs. Audio tapes of previous services are also available. If anyone has questions or needs assistance, please call the office.
- Choose bulletin language with sensitivity. For example, remember the feelings of those with limited mobility and allow options. Use "Stand or Remain Seated" or "Kneel or Remain Seated" instead of phrases like "Congregation Stands" or "Congregation Kneels."
- Consider planning a special Sabbath/Sunday service with disability as the focal theme of worship. Ask members with a range of disabilities to take leadership roles, appropriately demonstrating their various abilities.
- Such a service celebrates differences, encourages openness and reduces misunderstanding. However, this once-a-year event should not substitute for year-long mainstreaming. People with disabilities should be fully involved in every aspect of congregational life.

## Training for Ushers

Ushers are usually the first sign of hospitality in the congregation. Because they are so visible, their gracious welcome to people with disabilities puts everyone at ease. Usher training should be carefully planned, in consultation with people with disabilities. A motivating part of this training is to ask them and their companions to share relevant, personal stories of what causes people to feel welcome, or not welcome, as they enter the House of God for worship and study.

### **Ushers Extend Congregational Hospitality:**

- Ask about preferred location for seating.
- Seat a new person, especially one with a disability who arrives without a companion, with members who have so agreed ahead of time.
- Offer audio loops, large-print or brailled bulletins, and large print prayer books and hymnals.
- Keep mechanical devices in good repair by asking users to report on their effectiveness.
- Station someone near heavy swinging doors to assist those with limited mobility.

What do you say when you meet a person with a disability?

How about: "Hello"?



## Transportation: Getting to the House of God

Transportation can be a major barrier for someone with limited mobility or low vision. By identifying transportation as an essential service, a concerned congregation can seek out and assist members and visitors who have:

- Life-long or temporary disabilities
- Hidden illnesses or age-related disabilities
- Budget limitations and, thus, no car

To provide personal choice and control, when possible, give the person with a disability a list of willing drivers. She or he may then make the transportation arrangements. Depending on the number of volunteers and financial resources, the transportation program can:

- Provide a van with a wheelchair lift and a pool of dedicated drivers.
- Arrange neighborhood carpools serving the congregation, and nearby congregations if worship times coincide.
- Prearrange assistance for the person with disability who calls ahead and asks to be met at the car.
- Reserve parking places with extra room for easy and safe boarding near the ramped entrances.
- Budget for accessible taxi pickup.
- Station someone near the door to assist persons in and out of cars.
- Recognize and thank, publicly, those who regularly drive others to the church or synagogue.

*"A ramp is not enough." -Rev. Harold Wilke*

## Religious Education

### A Teaching Reminder

**To:**

Religion Teachers in Churches, Synagogues, Temples, and Mosques

**From:**

A Child with a Disability

- Please don't worry about me. I'm a lot tougher than you think.
- Most of my needs are just like those of other children even though my physical or mental development is different.
- Give me what you naturally give to all the children: your love, your praise, your acceptance and, especially, your faith.
- Help me to have a successful experience in your class. If you thoughtfully plan a variety of activities, I will always find at least one thing I can do well.
- Encourage me to do things for myself, even if it takes me a long time.
- Try to maintain a regular routine so I will know what to expect.
- Like other children, I remember instructions best if they are short and clear.
- Let me work out my own relationships with the boys and girls in the class.
- Give me opportunities to help others.

**Written by:** Carole Carlson

**Adapted by:** Ginny Thornburgh

## Religious Education

Religious education is the way a faith tradition is passed down from generation to generation. It should be taught by people who are trained and committed, using appropriate materials and curricula. Integrating children and adults with disabilities into the congregation's regular education program is usually preferable. In some instances, however, special education teachers may be found to lead a self-contained class or to assist a student with disability within a mainstream class.

Remember that community is built through shared experiences, not isolated ones. Thus, it is vitally important to have worship, education and social activities that include everyone, young and old, those with and without disabilities.

During class and in large congregational gatherings, it is important to respect any food allergies which children and adults have, offering a choice of food and beverages.



## Members at Home

Be sure that members considered to be "shut-ins" have not, in fact, been "shut-out." Many who cannot easily attend services long to participate in meaningful activities. If it is clear that someone is forced to be at home, a special outreach, beyond an occasional pastoral visit, can be extended by lay members:

- Offer a communion service with several people in attendance, at the home on a regular basis.
- Offer the opportunity to say Kaddish at home following the death of a loved one.
- Deliver audio or video tapes of services.
- Think of ways a person at home might assist in the work of the congregation. Examples include:
  - Using computer skills
  - Making telephone calls
  - Writing for the newsletter
- Invite a person who must stay home to be on a committee, in a study group or in a prayer group. Hold the meeting at that person's house.
- Investigate conference call and speakerphone devices as ways of including someone in meetings or worship services, while remaining at home.
- If the congregation provides sponsors for new members, offer the responsibility to persons who have been longtime members but now spend most of their time at home.

*"The eternal God is your dwelling place, and underneath are the everlasting arms."*

*-Deuteronomy 33:2*

# Welcoming People with Disabilities

## Introduction

There are 54 million children and adults with disabilities in America. They differ in strengths and weaknesses, abilities and needs, as much as individuals in any group differ. The House of God should welcome every one of them! Review, with welcome in mind, the personal and congregational actions offered below.

### Improving Personal Interactions

- Talk directly to the person with a disability, not to the nearby family member, companion or interpreter.
- Offer assistance but do not impose. Allow a person to retain as much control as possible, doing things for himself or herself, even if it takes longer.
- Ask the person with the disability about the best way to be of assistance. Personal experience makes him or her the expert.
- Do not pretend to understand if the speech or ideas of the person are unclear. Request, politely of course, that the person clarify. Continue speaking to the person rather than asking a companion to answer for him or her.
- Work to control reactions of personal discomfort when someone behaves in an unexpected way or looks somewhat different. Try to see the wholeness of spirit underneath and overcome the tendency to turn away or ignore the person with the disability.

### Widening Congregational Hospitality

- Use multi-sensory approaches to involve all listeners when preaching, teaching or making presentations. Everyone will benefit.
- Encourage people with disabilities to participate in the full range of congregational experiences.
- Follow announcements of general invitation with personal invitations and arrangements for transportation. Persons with disabilities may not really believe the invitation is "for them" if they have had disappointing or isolating experiences in the past.
- Nominate people with needed skills to be contributors and leaders in positions of responsibility. Never decide for someone with a disability that getting to meetings or doing the work is "too hard." Invite first, then leave it up to them.
- Be sure that people with disabilities are asked to plan and review progress on both programmatic and architectural changes.
- Provide note-takers for meetings.
- Develop transportation to religious and social activities for people with a wide variety of disabilities.



## WELCOMING PEOPLE WITH DISABILITIES

- Develop a job placement program and support group for those in the congregation who are out of work. Two-thirds of people with disabilities, who are of working age and want to work, are unemployed, and many who work are underemployed. When the congregation provides affirming support, it empowers the person's job search.
- Be aware that accommodations for one group can cause difficulty for another. For example, discuss the proposed placement of ramps and curb cuts with members who have poor vision and could trip on edges and grading.
- Support the families of those with disabilities for they experience stress and isolation. (Please see the section, Care for Caregivers, pages 34 to 37).
- Locate and support local chapters of organizations which offer services to people with disabilities and their families. Such services may include recreation, transportation, respite care, advocacy, financial assistance and health care.

### *Many have learned that...*

*A person who hears less may see more*

*One who sees less may perceive more*

*One who speaks slowly may have more to say*

*A person who moves with difficulty may have a clearer sense of direction*

## Mobility

Mobility limitations are the most visible of all disabilities. Of the 54 million Americans estimated to have disabilities, 3 million use wheelchairs. There are also millions of others who use walkers, canes, braces, crutches, or scooters. Causes of physical disability range from accidents to genetic conditions or diseases. Aging increases the chance of broken bones and deteriorating strength.

Fortunately, most congregations are already thinking about ramps, curb cuts and designated parking arrangements. These adaptations are also useful to movers of heavy equipment, shoppers with bundles and pushers of baby strollers.

Attitudes can keep people out as easily as architectural barriers. Surprisingly, there are people who think someone in a wheelchair cannot hear, or that someone with cerebral palsy is not intelligent because speech is slow and labored. Often, when people who use wheelchairs participate in classes and social settings, they may find that people talk over their heads or behind their backs. One explanation, not an excuse, for such rudeness is that people may feel somewhat "guilty" that they are able to get around easily when the other person can't.

### Improving Personal Interactions

- Sit, in order to be at eye level when talking with a person using a wheelchair or scooter.
- Do not move a wheelchair, crutches or walker out of reach. Ask if assistance is needed.
- Do not lean on the wheelchair or otherwise "invade" the person's space.
- When buffet or cafeteria lines cause inconveniences, get suggestions and offer to carry the person's plate or tray.



**Founder of Joni and Friends Ministries, Joni Eareckson Tada, in electric wheelchair**

### Widening Congregational Hospitality

- Provide outside barrier-free access including curb cuts, street level or ramped entrances, and 32" doorways with adequate and level entry space. Please see *An Audit of Barriers*, pages 40-43.
- Designate 12'6" wide parking spaces near the accessible entrances.
- Lower elevator control panels.
- Provide an accessible source of water. If a drinking fountain or cooler cannot be lowered, provide a cup dispenser beside it.
- Adapt a bathroom (which may be unisex) and install grab bars, raised toilet seats, sinks at appropriate levels, lever type faucets, towel dispensers and appropriately positioned mirrors.
- Extend hand rails beyond the top and bottom steps, a feature helpful to those with braces, crutches, canes and walkers.
- Install firm carpeting and reduce floor slickness.
- Shorten several pews so one or more wheelchair users can fit into the main body of the congregation and not be conspicuous in the aisles. Scatter these pew cuts throughout the sanctuary to allow a choice of seating near companions.
- Build a ramp to the place of religious leadership and to all areas in the congregation.
- Move the location of any classroom that is inaccessible to a student.
- Contact the national faith group headquarters to check if there is a low-interest loan fund to assist local congregations in remodeling buildings for accessibility.
- Think about room arrangements for all meetings, coffee hour gatherings or receptions. Is there clearance in halls? Is the meeting or eating table a convenient height? Are there loose or curling rugs that will impede travel? Are there enough chairs for people who tire easily?
- Set microphones at the appropriate height and location to be easily accessible.
- Have someone available to open heavy doors.
- Offer to provide a note-taker, if manual dexterity is limited.
- Have a supply of straws available for people who have difficulty holding a cup, glass or can.

**Note:** The metal stall dividers in most bathrooms represent a major barrier for people in wheelchairs. If it is not possible to remodel immediately to include an accessible stall, remove the metal walls entirely, and surround the toilet area with a hospital curtain. This temporary measure allows privacy and is easily accomplished.

## Welcoming a Person Who is Blind or Has Low Vision



All congregations include people with varying amounts of vision. Fortunately, there are ways that a person with low vision or no vision can be active in the worship, study, service, and leadership of the congregation.

### Improving Personal Interactions

- To get a person's attention, speak the person's name. In a conversation group, identify people by name as each is speaking.
- Do not pat a guide dog in harness. It is not a pet when on the job.
- Feel free to use words such as "see" and "look."
- When guiding, give verbal clues to what is ahead, such as steps, curbs, escalators or doors.
- Inform the person when you are leaving.

### Widening Congregational Hospitality

- Describe materials being distributed to a group that includes a blind person. Summarize information displayed on a screen.
- Accept a guide dog in the sanctuary as you would any guide.
- Produce bulletins and the words to hymns, litanies and prayers in large print. Provide brailled versions if requested.
- Have available large-print hymnals, missals, Bibles and prayer books.
- Make audio tapes of entire services, sermons, speeches or seasonal spiritual study guides.
- Offer a volunteer reader service.
- Improve sanctuary and hallway lighting, especially around staircases and other areas of potential difficulty for people with low vision.
- Place brailled information plaques on elevator panels.

## Welcoming a Person Who is Deaf or Hard of Hearing

Each congregation includes people, young and old, who are hard of hearing or deaf. They may read lips so well that they appear less deaf than they truly are. Indeed, they may understand only 80 percent of what is spoken, chanted or sung, but may be reluctant to complain. Knowing this, a congregation will want to replace poorly functioning sound systems and consider additional measures.

Many people who are hard of hearing communicate through enhanced sound and lipreading. A person with partial hearing may also benefit from assistive listening devices (ALDs), such as an FM system. In FM systems, the speaker wears a small microphone which transmits sound to a receiver that is worn by the person who is listening.

Places of worship should also consider installing Loop Systems, in which a loop of insulated wire carries sound to an amplifier or an individual's hearing aid or device. This affordable and available technology provides hearing and compatible assistive listening, and should be installed in sanctuaries, classrooms, and meeting rooms to ensure full involvement in worship and study.

Many people who are deaf prefer interpreted conversation using American Sign Language (ASL), Signed English or Cued Speech. Since ASL is a language with its own syntax allowing for the exchange of ideas on many levels, it forms the basis for what is known as the Deaf Culture. People who are deafened later in life rarely learn to sign fluently. They are best helped by assistive listening devices (ALDs) or by real-time captioning that is a professional verbatim instant speech-to-text translation service.

Many deaf people prefer to worship in congregations which specifically serve people who are deaf. Others seek a mainstream religious community which is able to arrange for sign language, oral interpretation and real-time captioning of worship services and activities. This is particularly important for deaf parents who have hearing children and wish to worship as a family.





### Improving Personal Interactions

- To get a person's attention before speaking, tap on elbow and speak face to face.
- Look at and speak to the person rather than the interpreter. The interpreter may be greeted privately but, when the interpreter is working, he or she is a transmitter for the person who is deaf, not a participant.
- Speak at a moderate pace, clearly but without exaggeration.
- Avoid covering the mouth while speaking. Beards and moustaches also make it harder to lipread.
- Do not stand in front of a window or bright light, since it puts the face in shadow and makes lipreading more difficult.
- Do not pretend to understand if the speech of a person is unclear. Request that the person rephrase until the point is clear.
- Communicate by telephone with deaf members at home by using [relay services](#), available in all states. Consult the telephone book for the local number or dial 711. Or you can ask people what communication tool they prefer, whether it be text message, email, or relay service.

### Widening Congregational Hospitality

- Provide seating near speakers and interpreter. Usher the person to an appropriate seat.
- On important holy days, provide an interpreter and reserved seating in the main sanctuary. If there is televised broadcasting of the service to overflow crowds, provide an interpreter in that room as well.
- Be sure that important announcements are also provided in print form. Remember to inform someone bringing an interpreter of cancellations or any change of time or place.
- Use pencil and paper to communicate when necessary.
- Reduce background noise from radios, television sets and loud fans.
- Purchase assistive listening devices (ALDs) for large assembly areas and small meeting areas. ALDs are systems which combine with a person's hearing aid to augment and clarify sound in a group setting. Examples are personal and group FM systems (using radio waves), infrared systems (using light waves) and hard wire systems (directly connecting the speaker and listener). The key to the success of ALDs is in the speaker's use of a lapel microphone which reduces background noise as it transmits the voice to the person wearing the hearing aid.
- Install Loop Systems in sanctuaries and public spaces. There is a growing use of this assistive technology in congregations large and small.
- Do a weekly check of batteries in listening devices.
- Encourage those who use equipment to inform someone if ALDs are not working properly.
- Purchase a telecommunications device (TDD) for the church or synagogue office so that a deaf or hard of hearing person can call the staff and religious leaders. Advertise its availability. TDDs allow deaf and hearing people to talk to one another over the telephone lines using a small terminal with a screen and an abbreviated keyboard, something like a typewriter. A TDD may be purchased for under \$300.
- Encourage some members of the congregation and staff to learn American Sign Language, Signed English, and/or finger spelling as a way to increase the number of times the deaf person feels "at home" within the congregation.

## Mental Health

A mental health condition can disrupt the way a person thinks, feels and relates to other people. Because of this, the person may find it difficult to cope with the ordinary demands of daily life. Such conditions affect individuals of all ages, and they occur in many American families, across all boundaries of income, education, race and ethnicity.

The exact causes of the many mental health conditions, including for example depression, schizophrenia, and bipolar disorder, are not known. These are brain-based conditions that are not caused by poor parenting or other social causes. They are treatable. With appropriate medical care, a person with a mental health condition can lead a life of quality.

People with mental health issues agree that the hardest part of living with their situation is the stigma and lack of understanding they encounter from others. Since their disabilities are not apparent, it is hard for others to adjust to unexpected and "different" behaviors. Sadly, most people have limited knowledge about mental health conditions and may believe some of the myths about them. Because of this, they may not know what to do or say, and may turn away in their uncertainty.

There are also people in all congregations who experience episodes of poor mental health. Their poor mental health is often due to environmental stresses and traumatic life experiences. Professional counseling and a caring congregation will help them experience a better quality of life.

In some faith communities, unfortunately, there are misinformed people who think that God punishes persons for spiritual flaws by giving them mental health conditions. Relying on passages taken from sacred texts, some religious leaders and congregation members consider mental health conditions as evidence of the presence of "evil." This adds further pain and isolation to the person and his or her family members. In welcoming a person with mental health issues:

- Try to remain noncritical when encountering unusual behavior, giving responses that are supportive of the person.
- Cultivate the ability to listen.
- Ask the person how the congregation might be supportive.
- Offer either community or private intercessory prayer.
- Make referrals to professionals, when appropriate.
- Do not deny that the person has serious difficulties that may continue a long time.
- Offer choices of opportunities and tasks appropriate to the person's ability.
- Be sensitive to the fact that physical touch, such as a friendly pat, a hug or squeeze of the hand, affects people differently. Some appreciate the caring, but others find touch threatening.
- Be prepared for anger that has no obvious basis. Try not to take it personally. Avoid lecturing, arguments, blame and acts that increase tension.
- Remember that the person or family may be in need but may be reluctant to ask for assistance.

### Widening Congregational Hospitality

- Understand that a large portion of people who are homeless have mental health conditions. Adapt social outreach programs to their needs.
- Advocate on behalf of those with mental health conditions as they seek housing, employment, and social activities.
- Provide opportunities to learn about mental health issues which are frequently misunderstood. As members of the congregation begin to understand these conditions, ways to offer compassionate hospitality will be discovered and put into practice.

### Improving Personal Interaction

#### **When a person...**

*has trouble with reality; is fearful;  
is insecure;  
has trouble concentrating; is overstimulated;  
becomes easily agitated;  
sounds unclear, has poor judgment;  
is preoccupied;  
is withdrawn; keeps changing plans;  
believes delusions;  
has little empathy;  
has low self-esteem;*

#### **Then...**

*be simple, truthful.  
stay calm.  
be accepting.  
be brief, repeat.  
limit input.  
allow person to change subject or location.  
do not expect rational discussion.  
get attention first.  
initiate relevant conversation.  
keep to one plan.  
ignore, don't argue. recognize as a symptom.  
stay positive.*

Adapted from "Bridgebuilder," Alliance for the Mentally Ill, Orange County, CA.

## Developmental Disability

A developmental disability is intellectual and occurs at or before birth, in childhood or before the age of twenty-two. These lifelong disabilities include intellectual disability, spinal cord injury, epilepsy, sensory disabilities, cerebral palsy, autism, and traumatic brain injury, as well as other conditions resulting in limitations. This legal definition of developmental disability dictates who may or may not be served by certain government programs.

The term "developmental disability" is complicated by the fact that some people with cerebral palsy, autism or traumatic brain injury may have advanced intellectual skills but limited speech or physical function, while people with intellectual disabilities have slower rates of learning and limited capacity for abstract thinking.

Seventy percent of people with developmental disabilities have an intellectual disability. Children and adults with intellectual disabilities mature at a below-average rate and experience difficulty in learning, social adjustment and economic productivity. Intellectual disability is neither a disease, nor is it mental health condition. Many self-advocates with this particular disability feel that the previous labels "retarded" and "retardation" are hurtful and should no longer be used. People who become mentally disabled through accident or illness as teens or young adults are often reluctant to seek needed services because of the label. In consideration of these feelings, the Association for Retarded Citizens of the United States changed its name in 1991 to "The Arc."

There are multiple causes of developmental disabilities, including genetic disorder, birth trauma and accident after birth. Among societal ills which can result in intellectual disabilities are parental alcohol and drug abuse, poor prenatal care, malnutrition, child abuse and lead poisoning. Each person with developmental disabilities should be offered early and lifelong training and encouragement to be as independent as possible. Most children and adults with these disabilities can learn to live, work and socialize with a small amount of caring supervision. Others require more assistance.

In the past, people with developmental disabilities, especially intellectual disabilities, have often been treated as less than fully human. Today, religious and lay leaders understand that people with developmental disabilities who have been lovingly included in family and community are able to experience a meaningful relationship with God and have much to offer any congregation.

It is not wise to assume that a person will "get nothing" from attending services. Faith is not measured by how fast it develops, nor are we fully aware of the depth and breadth of what anyone of us gains from worship. When we restrain someone with developmental disability from participating, we may be more worried about our own potential "embarrassment" than we are concerned about his or her religious experience.

### Improving Personal Interactions

- Treat adults with developmental disabilities as adults, not as children.
- Talk to the person directly, not through a companion or family member.
- Be patient. Give instructions slowly, in short sentences, one step at a time.
- Allow the person to try tasks on his or her own, to make mistakes, take a longer time and to persevere. Do not impatiently take over doing things for the person which she or he can do alone.

### Widening Congregational Hospitality

- Provide opportunities for participation in all congregational activities.
- Find concrete ways for the child or adult with intellectual disability to assist before, during and after the worship service. Some possibilities include: passing out programs and bulletins; filling the water glass for the religious leader; collecting materials left in pews after services.
- Find appropriate ways to increase knowledge and understanding among the members of a congregation, especially among peer groups of children.
- Provide "hands on" experiences in social and teaching settings.
- Offer an older child with developmental disability the opportunity to help the teacher of younger children with cutting, pasting, reading and straightening the classroom.
- Assist people with developmental disability who decide to participate in group activities such as retreats, camping programs, conferences and assemblies.
- Sponsor a self-advocacy program such as "People First" or "Speaking for Ourselves."
- Integrate students with developmental disabilities into regular classes, whenever possible.
- Develop a relationship with a group home in the neighborhood. Activities can take place in the congregation's building or out in the community. Possibilities include everything from worship to hockey games! Don't overlook home improvement projects at the group home such as painting a room, weeding the garden or sewing new curtains.

## Learning Disability



A person who has one or more learning disabilities has constant interruption in the basic, brain-centered processes that affect listening, thinking, speaking, reading, writing, spelling and sometimes calculating. The person has average to above-average intelligence, although learning is slower or different in the affected areas. This not apparent disability is often not diagnosed. The frustrations experienced can result in low self-esteem and uneven performance, and frequently in behavioral difficulties.

A person with a learning disability does not have a developmental disability, mental health condition, or communicable disease. Some symptoms of learning disability include:

- short attention span
- poor memory
- difficulty following directions
- inability to discriminate between and among numbers, letters, and sounds
- poor reading ability
- problems with eye-hand coordination

### *A Mother's Prayer*

*O God, help me now. My soul is weighed down with this burden. My heart aches for my child. Sometimes I wish I could wrap him in my arms and flee away from the taunts and accusing jeers of thoughtless classmates, away from the pressures of evaluations and examinations. Envelop us both in your healing arms, dear God, and bind our wounds. Carry us by faith beyond the pain of these days. Be our refuge. Amen.*

*- Anne Sheppard*



Contrary to popular myth, it is not possible to "grow out of" a learning disability. It is lifelong. Some people with these learning differences miss social cues, do not learn easily from experience, and are physically and socially immature. Indeed, it is often said that the young person is "eighteen going on thirteen," or about five years less mature than his or her peers. In addition, there may be an uneven ability to retain information resulting in failure in school and in the workplace.

The child or young adult with learning disabilities frequently experiences repeated failure in schooling and in the workplace, painful encounters in daily social life and continuing tension at home. Feeling impatient and somewhat inadequate themselves, teachers, supervisors, peers, parents and siblings may have difficulty understanding "why he won't try harder!" It is not hard to see that the accumulated frustrations experienced by someone with a learning disability may lead to emotional problems.

The religious congregation can be a welcoming haven of acceptance and affirmation for children and adults with learning disabilities, free from the rejection and extreme stress they experience in most other places.

### **Improving Personal Interactions**

- Build confidence and skill by helping to develop interests and the opportunity to share them.
- Be direct and specific in conversation and in teaching. Give instructions simply.
- Use teaching techniques appealing to different senses.
- Be patient and flexible.
- Have realistic expectations.
- Help the person understand how the disability is connected to social interaction with peers, families, teachers and employers.

### **Widening Congregational Hospitality**

- Help teachers and parents to examine expectations within the faith tradition which relate to educational achievement.
- Provide a personal teacher and advocate for the child or young teenager who is being baptized or confirmed, or is joining the church or synagogue.
- Find creative ways to adapt the teaching of Hebrew, Latin, Greek or other languages important to religious expression. This is, of course, essential in preparing a young boy to have a Bar Mitzvah or a girl, a Bat Mitzvah.
- Adapt seminary curricula for those with learning disabilities studying to be priests, ministers, rabbis, and imams.

## Chronic Illness

Every congregation has members who have one of the many chronic illnesses, which persist for months or years and generally interfere with an individual's everyday ability to function. The effects of the particular illness may not be apparent, camouflaged until the most acute stages begin. Thus, few people in the congregation may know that the person is ill. For others, periodic "flare ups" may require hospitalization and result in some of the disabilities described elsewhere in this handbook.

Among the many types of chronic illness are HIV/AIDS, seizure disorders, environmental illnesses, diabetes, sickle cell anemia, cardiac conditions, gastrointestinal disorders, chronic fatigue, the many forms of cancer, arthritis, chronic back pain, lupus, osteoporosis, glaucoma, retinitis, cataracts and numerous other visual conditions.

### **Question:**

Why would someone hide the fact of such an illness from members of the church or synagogue? Is it fear of rejection? The dread of pity?

### **Answer:**

Yes. Previous negative experiences, even subtle or inadvertent thoughtlessness, result in fear of further rejection.

From the point of view of the congregation, if people do not really know how a disease is spread, they may think they can "catch" HIV/AIDS or epilepsy in casual social situations. Feeling apprehensive and not understanding the illness, they may avoid those whose behavior or appearance make them uncomfortable.

As lay and religious leaders become more skilled in their interactions with members who have disabilities, they then become role models to others in the congregation.

### Improving Personal Interactions

- Be sensitive to the possibility of hidden chronic illness, if a person repeatedly declines to participate in activities.
- Persist in efforts to find suitable avenues of involvement.
- Accept their fears about the future. Sometimes apprehension about increasing dependency affects motivation and willingness to join activities in the present.
- Invite the person to be part of the Disability Awareness Committee or Inclusion Committee. Planning for others with disabilities may provide an atmosphere where self-acceptance grows.

### Widening Congregational Hospitality

- Include in congregational prayer and private intercessory prayer "those with chronic illnesses." In other words, offer an atmosphere of support.
- Make the congregation aware, clearly but tactfully, that some people with allergies or environmental illnesses are very sensitive to perfume, smoke and cleaning products. Severe respiratory distress can be triggered if the air is not clear.

#### *Living*

*If we believe that we have no future, then it will surely be so. If we speak of our infirmities as a sentence of death, then our words will become reality. But so too, if we believe in our own value, plan for our own future and accomplish some of those things which are important to us, then our lives will be full, and happy and rewarding. Living with AIDS is no different from living without AIDS — unless we make it so. It doesn't matter how much time any of us have. It only matters what we do with it. There are no guarantees for anyone — for we are all part of the human condition.*

*-Craig W. McHenry*

# Care for Caregivers

For each person with a severe disability, there is a circle of support made up of the primary caregiver and a group of family and friends. They share problems and challenges, as well as joys and successes. To be a caregiver, however, many must give up their own independence. They usually find, in return, little status in the eyes of society, and meager financial support is generally offered for their efforts.

It is essential that the caregiver confer dignity, comfort and hope upon the person with disability, day by day, and not feel like a martyr. To do so, she or he needs multiple sources of personal affirmation. The congregation can be one of the places where the caregiver finds practical and spiritual support that can make all the difference.

## Who are the Caregivers?

- Mother of a new baby with a severe, life-threatening condition, such as immature lungs
- Grandmother raising the toddler of her drug-addicted daughter
- Parent of a three-year-old with juvenile arthritis
- Newly divorced parents of a child with learning disabilities
- Siblings embarrassed by their brother with attention deficit disorder and hyperactivity
- Mother of a junior-high-aged son who is hard of hearing
- Father of a special education graduate not sufficiently trained to be employed
- Parents of a teenager who is experimenting with alternate lifestyles and drugs
- Sister of a twenty-five-year-old man with traumatic brain injury
- Mother of a recent college graduate with paraplegia and angry about dependence on family
- Husband of a young mother with a new diagnosis of multiple sclerosis
- Wife of a thirty-year-old man with depression who threatens suicide
- Female friend of man with cancer
- Fiancé of a young woman progressively losing sight
- Wife of an alcohol-dependent executive, in denial
- Parents of a middle-aged son with AIDS
- Companion of a forty-six-year-old woman with mild intellectual disability
- Son whose aging mother is deaf and financially needy
- Wife of a retired football coach, suddenly quadriplegic
- Middle-aged daughter of a man with Alzheimer's disease living at home
- Elderly parents of an adult son with developmental disability

In all these situations, and innumerable others, the parents, spouse, siblings, children and other caregivers are under enormous emotional and physical strain. Friends in a religious community can offer assistance at many levels by: affirming; shopping; sitting; laughing; lifting; driving; chatting; cooking; praying; listening.

In biblical terms, all caregivers need a Sabbath, a time apart from the tasks of caregiving in order to renew energy and spirit, body and soul. This is an opportunity for congregations to embody a faith that sustains others over the long haul.

### Relieving the Routine of Long-term Care

- Plan an occasional outing together, such as shopping, a walk or a trip to the museum. Have another friend from the congregation provide the necessary care or companionship to make it possible.



- Allow time away to accomplish personal and family business.
- Develop three or four congregational friends or families to provide care on an alternating, regular basis so that the caregiver can be assured of evenings out and weekends away.
- Train young people in the congregation to be sitters for children with disabilities.
- Send occasional notes, cards or flowers.
- Make a quick phone call, especially to share an amusing anecdote. A sense of humor is an invaluable source of perspective and it needs to be nourished.
- Be a friend. Have a non-judgmental attitude. Be available to listen. Be a source of interesting stories to "change the subject."
- Call and say, "I'm bringing a casserole tomorrow night. Is there anything you need at the market since it's on my way?" Don't call to ask, "What can I do to help?" Having to make suggestions is an added pressure.
- Offer opportunities for caregivers to use their creative talents, such as decorating, gardening or arranging flowers.

- Get the caregiver or the person with disability to make a list of specific tasks that would give pleasure or be helpful. Genuinely interested friends who do ask, "What I can do to help?" may then select from the list.
- Offer to be the driver one day a week for trips to the doctor, hospital or rehabilitation center.
- Keep caregivers on the list for intercessory prayer. Pray that caregivers focus on the positive in each day; parents not be overwhelmed by difficult decisions and daily management dilemmas; siblings develop resilience and insight rather than bitterness and resentment.
- Enable caregivers to nurture their spiritual lives by offering them rides to worship services and relief from caregiving tasks at home.
- Encourage creative long-term planning regarding care for the person with disability who is aging. Help mobilize family resources, if such assistance is welcome, and suggest names of lawyers, physicians, insurance agents and religious leaders with problem-solving skills.
- Support the family who must place a member in a residential care facility. Be aware that several family members may experience guilt, shame and loneliness. Provide counseling opportunities during the decision-making period, during the initial weeks after the placement and when appropriate thereafter.
- Keep congregational ties with the person living in a residential care facility through visits, newsletters and other activities.

### *"If your faith had been stronger" ... and other things not to say*

*How often people repeat time-worn phrases, with not a thought for the painful impact the words may have. Please, think before you speak.*

#### **NOT to Say:**

*"If your faith had been stronger, you would have been healed long ago."*

#### **SAY:**

*"I don't know why this happened in your life. I really hurt for you."*

#### **NOT to Say:**

*"If there is anything I can do, just let me know."*

#### **SAY:**

*"I'm taking my son to the zoo. Would any of your children like to come with us?"*

#### **NOT to Say:**

*"There's always somebody who's worse off. Just think about that man in this morning's newspaper!"*

#### **SAY:**

*"You have experienced an incredible loss. I am so sorry."*

#### **NOT to Say:**

*"God must have had a reason for this tragedy happening to you and your family. But, God never gives us more than we can bear."*

#### **SAY:**

*"It's hard to understand what God is doing in this. I will pray that you will feel God's sustaining love and comfort."*

*-Kathy Sheetz*



### Responding in the Crisis

Some actions are most appropriate during the initial stages of a crisis caused by an accident, sudden illness or death.

- Organize a group to prepare well-balanced meals. Freeze some meals and deliver others for the immediate family spending long hours at the hospital.
- Offer to be present during some of the long hospital waiting periods.
- Suggest, and offer to arrange for, an answering service so messages can give updated news and people may leave expressions of concern.
- Offer to be the person at home or at the office who is the information link with others who are concerned.

### After the Crisis

A month after the accident, sudden illness or death, the primary caregiver settles into the "rest of my life." Fatigue, discouragement and depression begin to overcome the energetic response to the first stage of crisis. This is the time that some people appreciate a second wave of meals, errand runners and friendly callers. Others may welcome an occasional social invitation. Still others may prefer opportunities for gradual reinvolved in the life of the community. For some, it is meaningful for the pastor, priest, rabbi, imam, or close friends to acknowledge the anniversary of an accident or death with a call, note or visit.

### *Beatitudes for Friends and Family*

**Blessed are you who take time to listen to difficult speech, for you help us persevere until we are understood.**

**Blessed are you who walk with us in public places and ignore the stares of strangers, for we find havens of relaxation in your companionship.**

**Blessed are you who never bid us to "hurry up," and more blessed are you who do not snatch our tasks from our hands to do them for us, for often we need time—rather than help.**

**Blessed are you who stand beside us as we enter new and untried ventures, for the delight we feel when we surprise you outweighs all the frustrating failures.**

**Blessed are you who ask for our help, for our greatest need is to be needed.**

*-Author Unknown*

# Proclaim Progress!

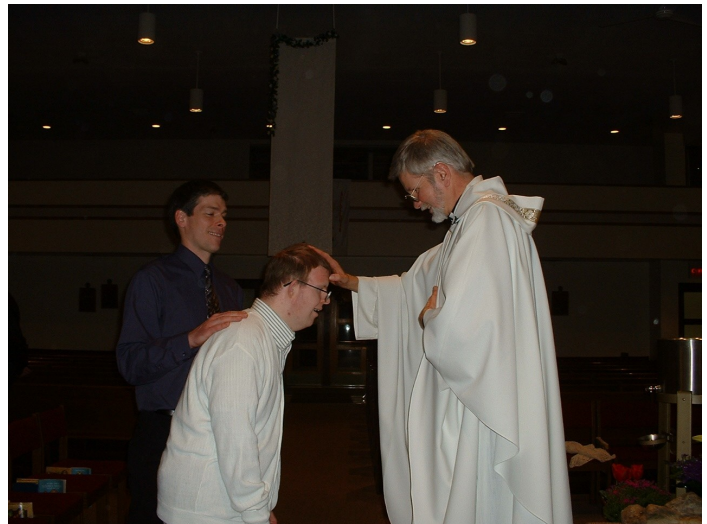
At some point, lay and religious leaders should publicly declare that people with disabilities are welcome in the congregation. Such a declaration is a celebration of progress toward the goal of becoming a fully inclusive congregation. This welcome should not be delayed until every desirable change has been made, every program is in place or every attitude has been examined.

## **In local newspaper advertisements**

- Use the accessibility logo.
- Indicate accessible public transportation.
- Advertise ASL interpreted services.

## **On outside signs and publicity posters**

- Use the accessibility logo.
- Include the words "ALL ARE WELCOME."  
The phrase now has new meaning.
- Provide directions to accessible entrances on doorways that are inaccessible.



## **On inside bulletin boards or signs**

- Remind members about all special accommodations, classes and opportunities.
- Indicate locations of accessible restrooms.

## **In congregation newsletters and bulletins**

- Print a list of accommodations available to people with disabilities.
- Run a story or celebratory announcement about new classes, accommodations or opportunities.
- Issue periodic open invitations to join the Disability Awareness Committee. Publicize meetings.

# It’s You I Like

It's you I like,  
It's not the things you wear,  
It's not the way you do your  
Hair— But it's you I like  
The way you are right now,  
The way down deep inside you—  
Not the things that hide you,  
Not your toys—  
They're just beside you.

But it's you I like,  
Every part of you,  
Your skin, your eyes, your feelings  
Whether old or new.  
I hope that you'll remember  
Even when you're feeling blue  
That it's you I like,  
It's you yourself,  
It's you, it's you I like.

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Fred Rogers was a composer, writer, television producer, Presbyterian minister, president of Family Communications, Inc. and, above all, a friend of children. He cared deeply about children and the healthy emotional growth of families. Fred Rogers was known by children as the host of "Mister Rogers' Neighborhood," a public television program which reached millions of families each week. One of the many songs Mr. Rogers sang on his show is "It's You I Like." This simple tune summarizes the affirmation we all seek. For despite our weaknesses and disabilities, we long to be accepted and loved, as we are. This is the unconditional love which God offers us, young and old, with and without disabilities.

# Appendix

## An Audit of Barriers

Many people with disabilities have had negative worship experiences in the House of God. They have met subtle thoughtlessness and outright rejection. Many have lost the will to worship and they question the relevance of faith.

When buildings are structurally inaccessible, people with limited mobility cannot enter. When the word is only spoken, people who are hard of hearing are denied some or all of the message. When announcements are in print form only, people with poor vision miss opportunities. When general invitations are issued and members with mental health conditions or another chronic illness are not personally invited, they may assume they are excluded. When leadership appointments are made and each person selected appears to be physically or mentally "perfect," the person with a disability may doubt his or her own usefulness.

As the people of God open their minds to such dilemmas, they will begin a process of opening doors, eyes, ears and hearts to the wonders of a shared life of faith. They will care enough to remove the barriers of attitude, communication and architecture.

*"What barrier is there that love cannot break?" Mahatma Gandhi*

### Attitudinal Barriers

The toughest barriers for people with disabilities to overcome are the attitudes of those who have inadequate information about disability. For members of the faith community to become knowledgeable, they must befriend people with physical, sensory, mental health, and intellectual disabilities. Thereafter, including them in the life of the congregation will be a great deal easier.

Reflect about attitudes evident in the congregation toward people with disabilities, and use this list as a springboard for discussion.

- Are persons with disabilities welcome to worship with us?
- If not, what are we doing wrong?
- Are there members with not apparent disabilities?
- Do we recognize the gifts and talents of people with disabilities and are they fully involved in the life of the congregation?
- Are people with disabilities given opportunities to serve others within the congregation and in the outreach programs?
- Are positions of leadership offered to individuals who happen to have a disability?
- How does the congregation respond to religious or lay leaders who acquire a serious disability?

## Communication Barriers

Communication is the interchange of thoughts, ideas, feelings and facts. There is a barrier to communication when the content of a message is not understood. Various devices and sensitive actions can help compensate for visual, auditory, or intellectual disabilities so that every person can absorb the message of God's love.

Use this list to review communication possibilities within the congregation. Check the following:

- Services and messages presented verbally and visually, dramatically and musically
- Large-print prayer books, hymnals, missals and Bibles
- Brailled materials
- Sermons or entire services on tape
- Amplifying sound system, in good order
- Sign language interpreted services
- Adequate lighting
- Real-time captioning
- Audio loops and other assistive listening devices (ALDs)
- Printed sermons
- A TDD in the office of religious leader's study
- A religious education program which intentionally plans experiences for children, young adults and older adults with disabilities
- Educational resources in the library about various disabilities
- A comfortable way for people with disabilities within the congregation to offer suggestions for removing barriers without being made to feel like "complainers"

## Architectural Barriers

When beginning to make the architectural and structural changes necessary to welcome people with disabilities, start with things that can be accomplished relatively easily. Get underway! What is needed are visible signs of change, not just lengthy committee meetings and hand-wringing.

It is true that aesthetic and historic preservation considerations must be taken into account as welcoming congregations make plans to adapt their buildings. And some of these adaptations will be expensive. It is not an acceptable argument, however, to delay because of "how few of 'them' we have." In God's realm, the number of users is not relevant!

Plan a fundraising strategy that involves everyone, young and old, rich and not-so-rich. Think about everything from bake sales and benefit dramas to expensive physical changes made in loving memory of a deceased relative. In addition, remember that some religious groups grant low-interest loans for renovations.

Begin by consulting members of the congregation and their relatives who are architects, contractors, carpenters and plumbers. Their skills are needed and this is their day to shine! Don't forget to consult, in every phase of evaluation and planning, persons who are users of wheelchairs, walkers, crutches and canes. By not doing so, many churches and synagogues have made well-intended but inadequate, even wasteful, changes. It goes without saying that all new construction or remodeling should meet current, local access codes.

### Parking and Paths

- Curb cuts to sidewalks and ramps to entrances
- Pathways at least 48 inches wide, with a slope of no more than 5 percent
- Level resting space around doors, 5 x 5 feet
- Marked accessible parking spaces close to accessible entrances

### Ramps and Stairs

- Ramps 36 inches wide, minimum, extending one foot in length for every inch of rise, a 1:12 ratio. Thus, a ramp replacing an 8 inch step must extend 8 feet.
- Handrails on at least one side of the ramp, 32 inches above the surface
- Protection over ramps from rain and snow, and non-skid surfaces
- Stairs with handrails on both sides, 32 inches above the step, and extending a foot beyond the top and bottom of the stairs
- Stairs with rubber treads
- Slightly raised abrasive strips on top steps to warn people with limited sight where stairs begin

### Doors and Doorways

- Door openings 32 inches wide or more
- Doors which can be opened by exerting 5 pounds of pressure
- Doors which can be opened electrically by the push of a button
- Lever handles or push bars

### Worship Space

- Seating spaces with extra leg room for people using crutches, walkers, braces or casts
- Scattered spaces or "pew cuts" for the users of wheelchairs who prefer to be seated in the main body of the congregation, not in the front or back of the sanctuary and not in the aisles. These pew cuts can easily be made by shortening several pews by 36 inches.
- Area with lectern and microphones accessible to those with mobility limitations
- Choir area allowing wheelchair users to participate
- Adequate lighting directed on the face of the speaker for those who read lips, as well as adequate general lighting in the sanctuary
- Bookstands or lapboards available for those unable to hold prayer books, hymnals or Bibles



## Bathrooms

- At least one accessible bathroom, ideally one on each floor. These may be unisex, as in an airplane or a home.
- One toilet stall 36 inches wide, with 48 inches clear depth from door closing to front of commode and a 32-inch door that swings out
- Ideally, a 5 x 5 toilet stall with a 32-inch door that swings out and two grab bars, one adjacent to the commode and one behind the commode, to facilitate side transfer from a wheelchair
- A hospital or shower curtain providing privacy for wheelchair users, if metal dividers are removed and other renovations are not possible at the moment
- A sink with 29 inches of clearance from floor to bottom of the sink

- Towel dispensers no higher than 40 inches from the floor
- Lever-type faucet controls and hardware on doors

## Water fountains

- Water fountain mounted with basin no more than 36 inches from the floor, easily operated from wheelchairs
- As an interim measure, a supply of paper cups mounted next to the water fountain, or a water cooler

## Elevators and lifts

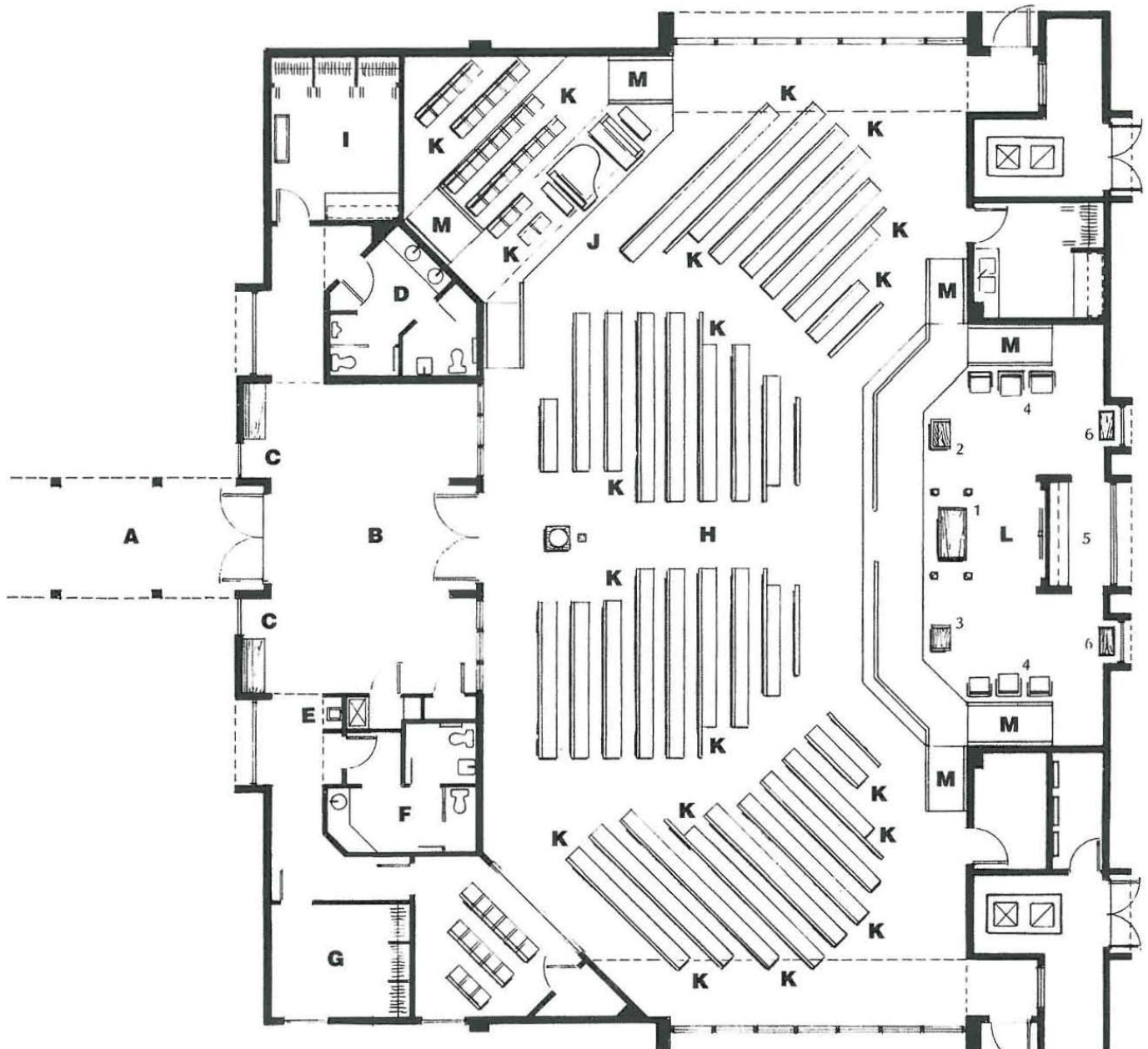
- Elevators or chair lifts to ensure access to the sanctuary and all major program areas
- Controls placed at 54 inches or less from the elevator floor, reachable from a wheelchair
- Brailled plaques on elevator control panels
- A handrail on at least one side, 32 inches from the floor



*Don't hide your ramp under a bushel!*

*-The Rev. Paul Feuerstein*

## Architectural Design for an Accessible Sanctuary



See legend on next page.

## Legend

- A:** Covered pathways leading to portico and other buildings
- B:** Entry area with glass walls and space for overflow seating or for assembling participants in processional
- C:** Wheelchair accessible cabinets and pamphlet racks
- D:** Men's restroom with wheelchair accessible facilities
- E:** Wheelchair accessible water cooler or water fountain
- F:** Women's restroom with wheelchair accessible facilities
- G:** Choir robing room
- H:** Main seating area for approximately 350 people
- I:** Bride's preparation room
- J:** Choir area with ramps to all levels
- K:** Wheelchair locations within the main seating area and choir area
- L:** Sanctuary with ramp access to each level, including areas for individual readings
- M:** Access ramps with a slope of 1 inch height : 12 inch length

## General Notes

1. The floor plan shown is for a Lutheran church. It can be adapted to serve other faith communities.
2. All exterior entrances into the building and interior room entrances have doors that are 36 inches minimum in width.
3. All exterior pathways are level with the door sill of each entrance.
4. All access ramps within the sanctuary are designed to blend into their respective areas.
5. The main seating area offers more than 15 shortened pews, scattered, so that users of wheelchairs can be seated within the main body of the congregation, not in the aisles.
6. Aisles are designed for ease of wheelchair maneuverability.
7. Scattered pews are set with amplification devices.

## Americans with Disabilities Act

### The Language of the Law

The Americans with Disabilities Act (ADA), signed into law by President George H.W. Bush on July 26, 1990, raises to new heights the American commitment to equal opportunity for all citizens. By this legislation, individuals with disabilities are guaranteed that employment or promotion will not be denied because of their disabilities, if they are otherwise qualified. The law also promises accessibility to transportation services and public accommodations such as restaurants, museums, libraries, daycare centers, doctors' offices, hotels, private schools, retail stores and parks.

Churches, synagogues and other religious organizations or entities controlled by religious organizations are exempt from the ADA, except for the employment provisions. However, if a church or synagogue rents space to programs funded in part or in whole by state or federal dollars, the funded program will be required to conform to other nondiscrimination laws. In addition, if a congregation rents space to an independent daycare center, the daycare center is required to comply with the ADA.

### The Spirit of the Law

The spirit of the ADA is very much in keeping with the standards by which most congregations worship and govern. Indeed, the ADA is an enactment in our time of Biblical precepts concerning love of neighbor and respect for all of God's children. The Americans with Disabilities Act reflects the principles of love and justice which are the underpinnings of a life of faith.

In addition, congregations need to be aware of the ADA because they often serve as community centers offering meal delivery programs, book groups, Alcoholics Anonymous meetings and daycare for young and old. Furthermore, it is within congregational purposes and to their advantage to welcome people in many stages of physical ability and disability. Changes in access ramps, doorways, bathrooms and water fountains will benefit all users of the buildings, not just people with disabilities.

### For Specific Assistance

For further assistance on the precise legal requirements of the ADA, readers may call the United States Department of Justice:

(800) 514-0301 (Voice)

(800) 514-0383 (TDD).

Please visit the website at [www.ada.gov](http://www.ada.gov)

## Acknowledgements

We wish to thank the W.K. Kellogg Foundation of Battle Creek, Michigan which funded the updated seventh edition of "That All May Worship" upon which this online version is based.

Among hundreds of written documents, the following publications were especially helpful and were used with permission: *Becoming God's Accessible Community* (Mennonite Central Committee, Akron, Pennsylvania, 1990); *Called to Care* (Office for Church life and Leadership, United Church of Christ, Cleveland, Ohio, 1991); *Creating the Caring Congregation* by Harold H. Wilke (Abingdon Press, Nashville, Tennessee, 1980); *Helping People with Serious Psychiatric Disorders: Suggestions for Caring Congregations* by Diane Engster (Silver Spring Presbyterian Church, Silver Spring, Maryland, 1990); *Opening Doors: Ministry With Persons With Disabilities* (National Catholic Partnership on Disability, Washington, DC, 1987); *Pathways to Partnership: An Awareness & Resource Guide on Mental Illness* by Jennifer Shifrin (*Pathways to Promise: Interfaith Ministries and Prolonged Mental illnesses*, St. Louis, Missouri, 1990); *Students Who Are Deaf or Hard of Hearing in Postsecondary Education* by Ann Davie (HEATH Resource Center, American Council on Education, Washington, DC, 1990); and ... *Who Makes People Different* by Carl Astor (United Synagogue of America, New York, New York, 1985).

The Architectural Plan for an Accessible Sanctuary was designed by John M. Scott, AIA, and Richard M. Takach, ASID, of Largo, Florida. They are members of the Interfaith Forum on Religion, Art and Architecture (IFRAA) of Washington, DC.

We are grateful for the hospitality and staff support of the New York Avenue Presbyterian Church, Washington, DC.



*"And a little child shall lead them."*

*-Isaiah 11:6*



The Lord is  
My Shepherd.

I shall not want

He maketh me to lie

DOWN IN green pastures.

He leadeth me beside

The still waters.

He restoreth

my soul.

Peter 23 Psalm