

Denison University

Denison Digital Commons

Student Scholarship

2023

Religion and Conceptualizing Disability: An Investigation of Christian Approaches to Disability

Annie Whitley
Denison University

Follow this and additional works at: <https://digitalcommons.denison.edu/studentscholarship>

Recommended Citation

Whitley, Annie, "Religion and Conceptualizing Disability: An Investigation of Christian Approaches to Disability" (2023). *Student Scholarship*. 199.
<https://digitalcommons.denison.edu/studentscholarship/199>

This Thesis is brought to you for free and open access by Denison Digital Commons. It has been accepted for inclusion in Student Scholarship by an authorized administrator of Denison Digital Commons.

**Religion and Conceptualizing Disability: An Investigation of Christian Approaches
to Disability**

Annie Whitley

Project Advisor: Dr. Trad Nogueira-Godsey

Religion Department

Denison University Summer Scholars 2023

Acknowledgement

I would like to express my deepest gratitude for the Schact Family for providing me the opportunity to explore this topic through the Woodyard Scholarship. I would also like to thank my professor Dr. Noguera-Godsey for guiding and advising me throughout this program. I could not have accomplished this without his expertise and mentorship and am very thankful for his support.

Abstract

My paper examines the notion of a definition of disability and explores the relationship between disability and Christianity. I started by analyzing three prominent secular interpretations, the medical, legal and scholarly definitions. My aim was to examine their accuracy and diagnose their effects on common interpretation of disability. I investigated their commonalities and variations, the societal effects, and any possible links to Christianity. I determined the definitions often contradicted those of the other fields and have links to societal misconceptions. The medical definition particularly had direct links to harmful interpretations, stemming from incorrect historical medical diagnoses or procedures.

I then moved onto analyzing the theological relationship to disability. I began by providing context of Christian historical positions on disability, firstly looking at the National Council of Churches actions and moving on through Christian denominations such as of the United Methodist Church and Roman Catholicism. There were notable commonalities between each group, however some took greater steps towards equality than others. I then touched on the definition of hermeneutics and their different approaches. After evaluating the historical and hermeneutical views, I concurred that the three prominent Christian interpretations were: that disability was a result of sin, it was a method of displaying God's strength, and that disability was bestowed for a divine purpose. These views all have scriptural evidence to support these interpretations, but it is also common that the same scriptures will be used to justify differing views such as John 9:1-38. A result of some Christian interpretations is the marginalization of persons with disabilities, but disability ministry has the aim of correcting that. While disability ministry may have positive intentions and occasionally effects, it frequently gets tangled with healing and curing concepts that tend to enforce problematic views. There are many scriptural

references to healing practices, such as Matthew 20: 29-34 and Matthew 12: 9-14, and they often vary by denomination. However, in modern times disability advocacy has increased in an effort to correct wrongdoings by the church and set up positive religious environments for persons with disabilities. My conclusion on the position of Christianity and disability is that there is a strong forward-thinking push for equality and fair treatment of persons with disabilities in the church, but there are still sects that hang onto negative and harmful interpretations of disability.

Table of Contents

I. Acknowledgements	1
II. Abstract	2
III. Introduction	6
IV. Part One: Medical	6
1 Disability, Impairment, and Handicap	6 - 7
2 Concept of ‘Normal’	7
3 Medical/Biological Model	7
4 Able Bodiedness	7 - 8
5 The Biomedical Model	8
6 Grouping of Diagnosis	8
V. Part Two: Legal	9
1 Variation between legislation	9
2 The Rehabilitation Act	9 - 10
3 The Americans with Disabilities Act	10
4 International Legislation	10 - 11
VI. Part Three: Scholarly	11
1 The Unified Concept View of Disability	12
2 Need for definitional flexibility	12
3 Anti-realist, Natural Graded Scale, and Social Constructivist	12 - 13
4 “The Disabled Body”	13- 14
5 Capabilities Account	14

6 Medical or Functional-Limitation model, Social or Minority model, and the Limits model	14 - 15
7 Ableism	15 - 16
VII. Part Four: Theology	16
1 Historical position of The National Council of Churches of Christ	16 - 17
2 Historical position of The United Church of Christ	17
3 Historical position of The Presbyterian Church	18
4 Historical position of The Epsiscopal Church	18 - 19
5 Historical position of The United Methodist Church	19 - 20
6 Historical position of The Baptist Church	20
7 Historical position of Conservative Protestantism	20 - 21
8 Historical position of Roman Catholicism	21
9 Hermeneutics	21 - 22
10 View of disability as a result of sin	22
11 View of disability as method to display God's power	22 - 23
12 View of disability as of divine purpose	23 - 24
13 Marginalization	24 - 25
14 Disability Ministry	25 - 27
15 Healing	27 - 30
16 Healing vs. Curing	30
17 Disability Advocacy	30 - 32
VIII. Conclusion	32
IX. Bibliography	33 - 34

When examining the components of disability in our society, whether it is access to welfare resources, physical accessibility, marginalization, inequality in access to opportunity, and so on, the running theme is a collective, two-dimensional definition of disability. Upon further investigation, the common notion of disability tends to discount many key factors of the perspective. In this work, I will be analyzing the roots of these definitions and whether or not our common interpretation is accurate. I will assess the impact of the medical, legal, and scholarly definitions as well as investigate the theological roots and the lasting effects from Christian interpretations. The complex and ever-evolving relationship between disability and Christianity has many prominent features. I will be discussing some of them, including: institutional/historical stances, scriptural evidence, hermeneutical definitions, disability ministry, healing services, disability advocacy, and where the church stands today. Throughout I will also be implementing contemporary examples from various denominations to present the wide range of experiences between Christianity and disability.

Medical

The influence of medical studies on interpretations of disability is vast. While there are prominent widespread definitions, medical definitions of disability often have many nuances that lead to varying interpretations of disability. In this work, I will be examining two authors' definitions that stem from medicine.

Firstly, there are three common terms associated with disability: impairment, disability, and handicap. In our common vernacular these terms are often used interchangeably, but that is an oversimplification. First, impairment is defined as, “usually signifies an abnormality or loss of physiological form or function.”¹ This focuses on the medical condition of the person rather than

¹ Creamer, Deborah Beth, Chapter 1 “Understanding Disability”, *Disability and Christian Theology: Embodied Limits and Constructive Possibilities*, An American Academy of Religion Book (New York, 2008; online edn, Oxford Academic, 1 Jan. 2009), pg. 14.

the resulting social conditions and translates to a lesser-than view compared to able-bodied people. Next, handicap is defined as: “literally means “to hinder” or “to place at a disadvantage”.² Handicap relates to the physical difficulties that occur due to impairment. This definition solely frames disability as a disadvantage and burden on one’s functional abilities. Finally, disability is defined as: “the consequences of the impairment, which may be an inability to perform some task or activity.”³ This definition relates more to the hindrance of daily activities that the impairment causes, which can be functional or social. It is derived from the notion of ‘normal’ and that disability is inherently less-than.

A commonality between these definitions is that they differ from the idea of ‘normal and that it equates to able’. Many prominent medical models center around disability as lesser than the concept of ‘normal’. This is seen in Deborah Creamer’s analysis of medical influence on defining disability which resulted in: The Medical or Functional-Limitation Model.

This model primarily views disability as a medical/biological condition and labels a person as disabled if they present a number of traits of a condition. It mostly pays attention to inability both physically and functionally, with terms such as “handicap” and slurs such as “cripple” stemming from this idea. Creamer describes the connection to normality as: “key to the medical model is the presumption that disability is a problem that is experienced by an individual” as deviation from an assumed state of normality.”⁴ It is solely acknowledging the individual medical condition and the disadvantages that divulge from that, rather than the social consequences from stigmas and marginalization.

Due to the framing of able-bodiedness as superior and correct, it is presumed that “medical professionals have the duty of correcting or curing the deficit so as to achieve a state of

²Ibid.

³Ibid.

⁴Ibid, 23.

normality for the individual.”⁵ This shows the main theory of the medical model, which is the fact that people with disabilities state’s are undesirable and need fixing to the societal concept of ‘normal’. Creamer summarizes this well saying, “the medical model has this principle of normalization at its core, attempting to modify, repair, or relocate individuals with disabilities until they are congruent with societal expectations of normalcy and acceptability.”⁶

The medical model is not exclusive to Creamer’s analysis, Addison Tenorio presents a similar medical definition called the “Biomedical Model.” The Biomedical Model is defined as “disability is explained using biological functional deficits, or the degree to which the person with the disability demonstrates a “deviation from the mean” in physical or cognitive abilities.”⁷ This interpretation focuses solely on the medical or biological aspects of disability, while not considering the social component that comes with disability. The lack of acknowledgement of disadvantages placed by social norms is an incomplete picture of the reality of disability.

An important but problematic aspect of these models is the grouping of all medical conditions into one definition. There are no specifications on cognitive vs. physical or one specific condition vs. another, which simplifies and discounts the variety of experiences of disability. It groups dissimilar conditions and obscures the subjectivity of experience, furthering societal alienation and misconceptions about people with disabilities. This overly broad definition also lacks the acknowledgement that persons with disabilities are not treated same, as Creamer says “it is important to recognize that people with disabilities are not all treated the same by the nondisabled, especially since some disabilities are more socially accepted than others, and individuals may have very dissimilar attitudes towards their own conditions.”⁸

⁵ Ibid.

⁶ Ibid, 24.

⁷ Espinoza, D Marissa, Tenorio, S Addison, “Defining Disability: Creating a Monster?”, *The Journal of Medicine and Philosophy: A Forum for Bioethics and Philosophy of Medicine*, Volume 47, Issue 5, October 2022, Pages 574.

⁸ Creamer, *Understanding Disability*, 15.

Legal

In liberal democracies that seek to protect rights of its citizens from discrimination and targeted persecution, laws must be crafted that define clearly the circumstances and conditions that constitute discrimination. A legal definition is crucial in protecting the rights of individuals labeled as disabled and to ensure qualification for access to welfare status and benefits if needed. Therefore, a definition is necessary in the lawmaking process, but the legal definition also needs to be flexible enough to properly allow for a variety of conditions or experiences to be included.

Firstly, the legal definition often varies between legislations. This is apparent in the definitions outlined in the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. The Rehabilitation Act was the “first comprehensive federal law prohibiting disability-based discrimination in employment and other daily life factors”.⁹ The Americans with Disabilities Act is a law that “prohibits disability-based discrimination against a subset of individuals with disabilities who have “a physical or mental impairment that substantially limits” the individual in one more major life activity.”¹⁰ Both of the laws were revolutionary for persons with disabilities due to their progress towards equal rights.

In the Rehabilitation Act, disability is defined as: “persons with a physical or mental impairment which substantially limits one or more major life activities.”¹¹ This is a complex definition for the legal system because of the nuances that must be explained. The prominent nuance in that definition was “major life activities”¹², which is defined as “functions such as caring for one’s self, performing manual tasks, walking, seeing, hearing, speaking, breathing,

⁹ Rothstein, Mark A, Martinez, Serge A, McKinney, Paul W, “Using Established Medical Criteria to Define Disability: A Proposal to Amend the Americans with Disabilities Act”, *Washington Law Quarterly*, Volume 80, 2002, Page 245.

¹⁰ Ibid, 243.

¹¹ “Your Rights under the Americans with Disabilities Act,” U.S. Department of Health and Human Services, Accessed June 21, 2023.

¹² Rothstein, Martinez, Mckinney, “Using Established Medical Criteria to Define Disability: A Proposal to Amend the Americans with Disabilities Act”, pg. 243.

learning, and working.”¹³ While it is beneficial that this definition allows for flexibility in interpretation, the flexibility and lack of medical context often makes it complicated and slow in determining who the definition applies to.

On the other hand, the Americans with Disabilities Act disability is defined as: “as a person who has a physical or mental impairment that substantially limits one or more major life activities, a person who has a history or record of such an impairment, or a person who is perceived by others as having such an impairment.”¹⁴ While these are similar, the slight variations in details causes great problems for the court systems. The absence of clear definitions in the law often leads to legal conflict where the courts end up being the decider of the definition. In terms of disability, this leads to definitions through the legal lens which determines the extent of its enforceability. The complexities were evident in the 1999 Supreme Court case *Sutton v. United Airlines*. In that case, Karen Sutton and Kimberly Hinton sued United Airlines on the grounds of violating the ADA because they were rejected from pilot positions due to incorrect vision.¹⁵ The Supreme Court sided with United Airlines saying the woman did not fall under the ADA’s definition of ‘disabled’.¹⁶ This case shows that interpreting disability, even in a legal setting, still relies heavily on social conventions.

Legal conflicts with defining disability are also prevalent on an international scale. The United Nations defines disability, impairment, and handicap in its own terms that are often in conflict with domestic interpretations. The UN defines disability as: “any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range

¹³ Ibid, 246.

¹⁴ “Your Rights under the Americans with Disabilities Act,” U.S. Department of Health and Human Services.

¹⁵ Rothstein, Martinez, Mckinney, “Using Established Medical Criteria to Define Disability: A Proposal to Amend the Americans with Disabilities Act”, pg. 252.

¹⁶ Ibid, 255.

considered normal for a human being.”¹⁷ It defines impairment as: “any loss or abnormality of psychological, or anatomical structure or function”.¹⁸ Finally handicap is defined as: “a disadvantage for a given individual, resulting from an impairment or disability, that limits or prevents the fulfillment of a role that is normal, depending on age, sex, social and cultural factors, for that individual.”¹⁹ This comes in conflict with the domestic definition of the United States Census Bureau. The US Census Bureau defines it as: “a person is considered to have a disability if he or she has difficulty performing certain functions, or has difficulty performing activities of daily living, or has difficulty with certain social roles.”²⁰ The multiple conflicting interpretations results in complex legal battles and unequal treatment and standards around the world.

Unlike the medical models of disability, some elements of legal definitions do evolve with scholarly and social progress. This is seen in the terminology used in the Rehabilitation Act, which went through several amendments after the fact. This occurred in 1986 when the term “handicapped individual” was changed to “individual with handicaps”²¹ and in 1992 when the formal terminology was altered to “individual with disabilities”.²² This ability for alteration and evolution with new research or social norms is a positive element of the legal system because it allows for further steps to rid marginalization and inequality of people with disabilities.

Scholarly

In the scholarly field of disability there is a large variety of definitions and evaluations of disability. This allows for flexibility in interpretations, but can also lead to difficulties in

¹⁷ Kaplan, Deborah, “The Definition of Disability: Perspective of the Disabled Community”, *Journal of Health Care Law and Policy*, Volume 3, Iss. 2, Art. 5, (2000) 356.

¹⁸ Ibid.

¹⁹ Ibid.

²⁰ Creamer, Deborah Beth, *Understanding Disability*, pg. 2.

²¹ Rothstein, Martinez, Mckinney, “Using Established Medical Criteria to Define Disability: A Proposal to Amend the Americans with Disabilities Act”, pg. 246.

²² Ibid.

clarification. I will be examining the work by Kevin Timpe, Elizabeth Barnes, and Deborah Creamer. These three authors present arguments on definitions or models in a holistic approach, factoring in components such as the social constructs rather than exclusively through a medical or legal lens.

Kevin Timpe presents a counterargument to the “Unified Concept View of Disability”. The Unified Concept View of Disability is defined as: “disability admits of a strict logical analysis or definition such that there is a set of necessary and jointly sufficient conditions which are met for all disabilities, and which must be met for a thing to properly fall under the concept of disability.”²³ Timpe has many alterations to this interpretation, but the most prominent is the need for flexibility depending on the context.

The need for flexibility stems from the desire for freedom of identity, since definitions of disability primarily categorize all conditions into one definition. These stark legal and medical definitions often come into conflict with an individual's identity and the societal stigmas or barriers that come with the status of ‘disabled’. Deborah Creamer summarizes the difficulty of having the social label of ‘disabled’ by saying, “People with disabilities are individuals- individuals with different attitudes towards their disabilities, individuals with different sociological influences and characteristics, individuals with different political positions, individuals with different tastes and interests. It is important that we remember that there is no one perspective that can be called “the disabled person’s perspective.”²⁴ The hardship, oppression, and stigmas that are unfortunately placed on people with disabilities often makes it difficult to grapple with socially; and that can often conflict with one’s personal identity.

²³ Timpe, Kevin, "Denying a Unified Concept of Disability," *Journal of Medicine and Philosophy* 47, no. 5 (2022): 584.

²⁴ Creamer, *Understanding Disability*, pg. 18.

In contrast to the Unified Concept of View of Disability, he offers three other definitions: anti-realist, natural graded scale, and social constructivist²⁵. Firstly, Shelley Tremain's anti-realist theory is the idea of "denying that disability is something to be found in the world independent of our concepts."²⁶ This interpretation operates strongly in the social realm and denies the idea that a biological condition is involved or responsible for the definition, but rather it is a social construct.

Secondly, the natural gradual scale theory is the "natural gradation from purely medical disabilities on the one end of the spectrum through disabilities that are a mixture of biological and social factors to disabilities on the other end that are simply due to social structures."²⁷ This theory takes a more expansive approach, arguing that the interpretation of disability is a range from a purely biological state to a combination of both social and biological to purely social construct.

Finally, the social constructivist theory is more layered. It is the view of rejecting the unified concept of disability due to its failures in ability to adapt to context and external factors²⁸. It is a rejection of the unified concept, not due its contents, as much as the lack of consideration of surrounding external elements and ability to evolve with them.

Contrary to the anti-realist theory, Elizabeth Barnes gives a detailed evaluation of disability in her work "The Disabled Body". Firstly, she defines disability as "particular bodily features or conditions."²⁹ This definition differs from others in its simplicity and biological focus rather than social construction. Barnes later furthers this perspective in discussing the idea of "normal functioning", where 'normal' is the best for survival and reproduction. She frames

²⁵ Timpe, Kevin, "Denying a Unified Concept of Disability," 589.

²⁶ Tremain, S.L. 2001, "On the government of disability". *Social Theory and Practice* 27(4): 2001, 620.

²⁷ Timpe, Kevin, "Denying a Unified Concept of Disability," 589.

²⁸ Ibid.

²⁹ Barnes, Elizabeth, *The Minority Body: A Theory of Disability*, Studies in Feminist Philosophy Series, Oxford, (2016) 6.

disability as the “idea that there is a standard of normal functioning for humans, and that deviations from that norm are disabilities.”³⁰ This idea of disability being a deviation from normal frames it as a detriment, due to the notion of disability as less than ‘normal’ and therefore a lack of proper functioning or ability for survival.

Going off of the notion of disability limiting ability, Barnes explains the concept of Capabilities Account. She defines it as, “multifaceted phenomenon in which disabled people face limitations partly due to intrinsic features of their bodies and partly due to barriers in their environment.”³¹ Throughout her work, she points to disability as being a negative and disadvantage element to one’s life due to both the physical and social limitation. So while she is consistent about the negativity of disability identity, she differentiates it between bad-difference and mere-difference. Bad-difference is the idea that having a disability is a negative thing, even if society was accommodating³². Mere-difference is the idea that having a disability makes one physically different, but not necessarily worse off.³³ These differ in the fact that bad-difference dismisses the effect of societal perception and limits disability to being solely negative, whereas mere-difference acknowledges the alternative physical state but does not believe it is inherently negative.

Deborah Creamer presents three models of disability: medical or functional-limitation model, social or minority model, and the limits model. The medical or functional-limitation model, which I previously explained, focuses solely on the aspects of the biological or medical condition.³⁴ The social or minority model is a “sociopolitical category” since it focuses on societal treatment rather than functional ability. Creamer describes the model’s central purpose

³⁰ Ibid, 14.

³¹ Ibid, 21.

³² Ibid, 55.

³³ Ibid.

³⁴ Creamer, *Understanding Disability*, pg. 23.

as, “The ‘problem’ is no longer identified as the physical, cognitive, or psychological characteristics of the individual, but rather is identified as prejudicial, exclusive, and oppressive attitudes and barriers- aspects that are related to social or political concerns rather than individual diagnoses.”³⁵ This model is meant to highlight the hardships and barriers that arise from the social interpretation of disability rather than the hindrances from the physical condition.

Lastly, the limits model is defined as: “attempts to engage in critical reflection on embodied experience and offers us a way to think about the limits of each person and situation and of what such limits may enable or make difficult.”³⁶ This model centers around acknowledgment of the disabled perspective. It encourages recognition of the commonalities in people with disabilities as well as the wide array of differences. Creamer describes its purpose as, “does not universalize, relativize, or minimize individual experiences but instead proposes an area of common ground in the midst of the recognition of exceptional incarnated and environmental differences.”³⁷ It strives to achieve the notion of disability as not in conflict with ‘normality’ but as a factor of it.

A key element in the scholarly model is ableism. Creamer defines ableism as “the set of often contradictory stereotypes about people with disabilities that acts as a barrier to keep them from achieving their full potential as equal citizens of society.”³⁸ Like any other form of discrimination in our society, it is deeply embedded in the fabric of social life and is deployed both consciously and unconsciously. It is the idea of able-bodiedness as being superior to disability due to the interpretation of persons with disabilities being dependent, less-than, and incompetent in ways of morality, intelligence, and social and physical skills. The social model

³⁵ Creamer, *Understanding Disability*, pg. 25.

³⁶ *Ibid*, pg. 31.

³⁷ *Ibid*, pg. 32.

³⁸ *Ibid*, pg. 26.

centers around acknowledging that interpretation, rejecting that notion, and validating the experience of people with disabilities. Due to this view, people with disabilities are often seen as in need of charity, and that notion is directly connected to Christian scriptures. In Luke 14: 13-24, Jesus says “call the poor, the maimed, the lame, the blind: and thou shalt be blessed.”³⁹ This presents people with disabilities as in need of assistance or charity, simply because of their physical states.

Theology

While the medical, legal, and scholarly definitions are influential in defining disability, the theological interpretation has a wider and more dominant scope due to the historical role of the church in the fields of medicine, law and scholarship. In Christianity, the church's perception of disability originated from scripture and was furthered by the leader's narratives and historical stances. Today there are many additional elements to the relationship between Christianity and disability, such as: disability ministry, healing services, hermeneutical approaches, and disability advocacy programs.

After a dark history, the approach to disability began to evolve in the 1900s. The most notable revisions started in the early 1950's when a group of churches and chaplains addressed the National Council of Churches of Christ, “an ecumenical partnership of 38 Christian faith groups in the United States”⁴⁰, for guidance on ministering to people with disabilities.⁴¹ The NCC answered by publishing eight articles in the *International Journal of Religious Education*, which urged congregations to respond to the needs of people with disabilities.⁴² After little collective progress, in 1957 the NCC called a “consultation on the Churches' Responsibility for the

³⁹ *King James Version*, Luke 14:13.

⁴⁰ “About Us,” National Council of Churches – National Council of Churches, Accessed June 21, 2023.

⁴¹ Herzog, Albert A., *The Social Contexts of Disability Ministry: A Primer for Pastors, Seminarians, and Lay Leaders*, United Kingdom: Wipf and Stock Publishers, 2017, 45.

⁴² *Ibid.*

Christian Education of Exceptional Persons”⁴³, in which they subsequently created the Commission on Christian Education of Exceptional Persons with a “Committee on Mental Retardation”.⁴⁴ Between 1969 and 1973, this committee published “*Camping and the Mentally Retarded*”, holding exploratory sessions with the American Bible Society on the Scriptures more useful⁴⁵ for people with disabilities. The NCC’s work in the mid-1900’s strongly influenced the secular view towards a medical avenue of cure or treatment for individuals.⁴⁶ These programs were the church’s attempt at outreach and inclusion towards persons with disabilities and represent the religio-social dominant perspectives of the context, but in reality it was problematic, marginalizing, and discriminatory.

By the 1970’s mainline denominations shifted away from exclusively using Christian education models of outreach to people with disabilities to implementing more of an advocacy role for disability.⁴⁷ The United Church of Christ adopted measures of accommodation in 1971. The UCC’s Metropolitan Association New York Conference enacted a “Task force on Exceptional People” where they educated congregations on the needs of people with disabilities.⁴⁸ After 5 years of work, the Task Force presented a resolution to the New York Conference asking for more resources to meet the needs of members with disabilities and spread awareness across the denomination.⁴⁹ The motion was unanimously adopted and sent to the General Synod, the national decision-making body for the denomination, where it was adopted.⁵⁰ These measures were the first positive steps towards equality and inclusion in the faith community.

⁴³ Ibid.

⁴⁴ Ibid.

⁴⁵ Ibid, 45- 46.

⁴⁶ Ibid, 46.

⁴⁷ Ibid.

⁴⁸ Ibid, 46-47.

⁴⁹ Ibid, 47.

⁵⁰ “About General Synod,” The Church of England, Accessed June 21, 2023.

Similar to the UCC response, in 1977 the General Assembly of the Presbyterian church organized the “Presbyterians for Disability Concerns Caucus” and adopted the “That All May Enter: Responding to the Concerns of the Handicapped” resolution. PDCC’s purpose was “to act as a clearinghouse for information concerning disabilities... to serve as a place for persons with disabilities to join together and express their concerns...to advocate for changing society’s, and the church’s, approach to disability.”⁵¹ This program was a revolutionary position towards disability that took a strong advocacy stance rather than an outdated punishment or treatment approach.

The Episcopal Church likewise moved toward advocacy. In 1982, the Presiding Bishop’s Task Force on Accessibility was established by the General Convention of the Episcopal Church.⁵² The task force’s purpose was to include “persons with disabilities into the full life of the church community and [with] providing resources for those needs”, to which they established a Committee on Disability Concerns in each diocese.⁵³ The choice to install mechanisms to ensure proper attention in each diocese exhibits the dedication towards equality and progress. This dedication is seen today in churches such as Open Door Episcopal Church in Los Angeles, CA. In an interview with the priest, he described how the congregation holds Sunday school with non-disabled children and children with intellectual and emotional disabilities together, an accessible campus, and a member-led group that focuses on ministry for people with disabilities.⁵⁴ When asked about the choice to keep children integrated, she said “We want to be inclusive...that value is coming from our theology. And that theology comes from the

⁵¹ Herzog, Albert A., *The Social Contexts of Disability Ministry: A Primer for Pastors, Seminarians, and Lay Leaders*, 46.

⁵² Ibid, 47.

⁵³ Ibid.

⁵⁴ Fox, Bethany McKinney., “Pastors Discuss Their Churches’ Healing Practices and the Healing Activity of Jesus”, *Disability and the Way of Jesus: Holistic Healing in the Gospels and the Church*, InterVarsity Press, (2019), 114.

Gospels.”⁵⁵ Open Door offers a healing prayer every week and services occasionally. In reference to scriptures, she mentioned how “Jesus did not exclude Nicodemus because he was a member of the Sanhedrin or a widow because she was poor, but instead included everyone and ate with them”⁵⁶ and said “You love God first, and then you love your neighbor as yourself.”⁵⁷ For their congregation the root of their love for other members, including disabled ones, is the love for God and they choose to serve him through offering inclusivity and equality to all members.

In 1976, The United Methodist Church began to alter its internal approach to disability. In that year, the General Conference of the United Methodist Church sent two petitions to the Board of Global Ministries indicating “concern for the “problems of the handicapped”.”⁵⁸ The Board responded by creating the “Task Force on Ministry to the Handicapped and Retarded,” who in 1980 lobbied the General Conference to include a statement on disability in the Social Principles.⁵⁹ Jumping forward 40 years, the Methodist Church has continued to progress. In Los Angeles, CA the Compassionate Welcome Methodist Church has a pastor who is self-identified as disabled and a congregation that has no physical disabilities but has described “emotional disabilities”.⁶⁰ When asked about healing services, the pastor responded that “healing happens through welcome, acceptance, and creating a safe community” and pointed out that Jesus did not heal everyone.⁶¹ Instead, he pointed towards “Lazarus’s death and how Jesus grieved with his family”.⁶² This modern perspective on disability that offers ‘treatment’ of compassion,

⁵⁵ Ibid.

⁵⁶ Ibid.

⁵⁷ Ibid.

⁵⁸ Herzog, Albert A., *The Social Contexts of Disability Ministry: A Primer for Pastors, Seminarians, and Lay Leaders*, 46.

⁵⁹ Ibid.

⁶⁰ Fox, Bethany McKinney., “Pastors Discuss Their Churches’ Healing Practices and the Healing Activity of Jesus”, *Disability and the Way of Jesus: Holistic Healing in the Gospels and the Church*, 119.

⁶¹ Ibid.

⁶² Ibid, 120.

acceptance, and belonging is Christianity should be as a whole; but, as you'll see, its progress is slower than society's.

The Baptist Church also took advocacy steps. In 1978, the General Board of the American Baptist Churches “called upon American Baptists to recognize persons with disabilities as integral members of the Christian fellowship and to take immediate affirmative action to enable their full integration into society, the local congregation, and in church organizations.”⁶³

While these Protestant denominations are parallel to each other, Conservative Protestantism (which includes many denominational affiliations and genealogies) has a different attitude towards disability. Conservative Protestantism tends to be more congregationally-centered, meaning it doesn't have a collective position on disability due to its locally based decision making process. However, in 1998 The Christian Council on Persons with Disabilities was established and wrote out a set of guidelines. The goal of these guidelines was: “to further advance Christ's gospel in the disability community”⁶⁴, “promote the biblical perspective on persons with disabilities and the church, offer the church an evangelical position on issues related to disabilities, establish standards that will advance the ministry gifts of persons with disabilities, and encourage Christian leaders to take initiatives that will enable persons with disabilities to actively and fully participate in the life and ministry of the church.”⁶⁵ While these initiatives may be intended to benefit members with disabilities, their approach centers around biblical interpretations and pressures the adoption of evangelicalism, which appears not to be out

⁶³ Herzog, Albert A., *The Social Contexts of Disability Ministry: A Primer for Pastors, Seminarians, and Lay Leaders*, 47.

⁶⁴ *Ibid*, 50.

⁶⁵ *Ibid*.

of concern for the treatment of persons with disabilities in the church but rather promoting the state of evangelicalism.

In similar regard to Conservative Protestantism, Roman Catholicism takes a theology centered approach rather than advocacy centered. In 1961, Catholics teachers spoke out “about their feeling of inadequacy and isolation in their diocesan programs [or private apostolates] for persons with mental retardation.”⁶⁶ This led to the “NCD Apostolate for the Mentally Retarded”⁶⁷ which was meant to “promote religious instruction for mentally retarded persons.”⁶⁸ This council later evolved into The National Catholic Office for Persons with Disabilities in 1982 and the National Catholic Partnership on Disability in 2002.⁶⁹

A noteworthy connection between the scholarly and the scriptural is hermeneutics. The concept of hermeneutics is present in the discussion of Christianity’s relation to disability. Hermeneutics are defined as “the study of the general principles of biblical interpretation”.⁷⁰ It looks at how scripture is approached and the interpretative priorities of it. Broadly speaking, there are three hermeneutic approaches to dealing with disability in text: redemptionist, rejectionist, historicist. Redemptionist is defined as “seeks to redeem the biblical text, despite any negative stance on disabilities, by recontextualizing for modern application.”⁷¹ Rejectionist is defined as “seeks to do the opposite by arguing that the Bible “has negative approaches to disability that should be rejected by modern society.”⁷² This stance takes the approach of acknowledging and defending disability against detrimental interpretations by Christian narratives in an effort to alter the societal interpretation. Lastly, the historicist approach is

⁶⁶ Ibid, 49.

⁶⁷ Ibid.

⁶⁸ Ibid.

⁶⁹ Ibid, 50.

⁷⁰ Encyclopedia Britannica, The Editors of, “Hermeneutics.” Encyclopædia Britannica, Accessed June 21, 2023.

⁷¹ Herzog, Albert A., *The Social Contexts of Disability Ministry: A Primer for Pastors, Seminarians, and Lay Leaders*, 128.

⁷² Ibid.

defined as “undertake examinations of disability by exploring the dynamic relationship between writers, texts, and the cultures to which they belong.”⁷³ This tends to be a more apologetic approach to defining disability in Christianity.

Deborah Creamer describes historical interpretations of persons with disabilities in Christianity as, “looked at as symbols of sin (to be avoided), images of saintliness (to be admired), signs of God’s limited power of capriciousness (to be pondered), or personifications of suffering (to be pitied) - very rarely are people with disabilities considered first as people.”⁷⁴ The Christian view, both historically and today, has an enormous effect on how disability is defined, perceived, and treated in society, ultimately diminishing their agency as fully human. Through my research, I have come to the conclusion that there are three primary Christian interpretations of disability in the United States. The first interpretation is that disability is a result of the parent or person’s sin and God has given them a disability as a punishment. This view can be supported with scripture and is frequently conveyed through sermons or Christian social narratives. A prominent scriptural example is John 5:14, which says “Afterward Jesus findeth him in the temple, and said unto him, Behold, thou art made whole: sin no more, lest a worse thing come unto thee.”⁷⁵ This scripture clearly shows Jesus’s view of disability as a punishment for sin and disobedience towards the faith. The social component of disability as a symbol of sin is that it becomes an example of what to avoid; it promotes judgemental attitudes that often dehumanize and shame people with disabilities.

Similar to the idea of disability as punishment for sin, is the notion of afflicting with or healing from disability to display God’s power. In Christianity, there is an intense emphasis on

⁷³ Ibid, 127.

⁷⁴ Creamer, Deborah Beth, “Disability and Christianity”, *Disability and Christian Theology: Embodied Limits and Constructive Possibilities*, (New York, 2008), 36.

⁷⁵ *King James Version*, John 5:14.

the strength of the Lord and its superiority compared to human strength. Shane Clifton, an ex-pentecostal minister, explains that Christian soteriology, or the doctrine of salvation, follows a three-part structure: the perfect creator, perfect creation; fall, sin and suffering; and redemption and renewed perfection.⁷⁶ He explains that from the theological perspective disability is a result of the fall of humankind with the sin of Adam, and therefore always seen as a direct or indirect result of sin.⁷⁷ This concept is then used as a method of reenforcing God's strength and excellence. Clifton summarizes the connection between disability as an example of God's superiority when saying, "Because bodies are weak and vulnerable are consequences of the fall, ideal humanity is thought to be disembodied, the image of God as...reason and will."⁷⁸ This theological perspective highlights God's plan and the importance of followers to trust and depend on him for guidance and salvation, as he is seen as the embodiment of "ideal humanity."

Another scripture example of this is the tale of Jacob's limp, found in Genesis 32:23-32. It tells the story of Jacob, grandson of Abraham, wrestling all night when the angel hurt Jacob's hip.⁷⁹ The interpretation is that Jacob had sustained the injury through relying on himself rather than God, which indirectly states that disability is a consequence for lacking faith and dedication in God. This dynamic was described as "The power/control Father image is theologically suspect not only in terms of God's identity but also for what it then necessarily implies about human identity and ability or disability."⁸⁰ Many problematic Christian narratives stem from this notion, such as positions on sexuality and gender orientation.

⁷⁶ Clifton, Shane, "Crippling Christian Theology: Reflections of a Post-Pentecostal Disability Theologian," ABC Religion & Ethics, December 5, 2020.

⁷⁷ Ibid.

⁷⁸ Ibid.

⁷⁹ *King James Version*, Gen. 32: 23-32.

⁸⁰ Creamer, Deborah Beth, "Disability and Christianity", *Disability and Christian Theology: Embodied Limits and Constructive Possibilities*, 51.

While the previous interpretations persist today, they are also recognized by many Christians as outdated, a product of normalized prejudices, or just insensitive and/or cruel. More commonly today, however, Christian interpretations tend toward framing it as part of "God's plan" or carrying "divine purpose." This is seen scripturally in John 9:1-38, where Jesus sees a man was born blind and his disciples ask "who did sin, this man, or his parents, that he was born blind?"⁸¹ Jesus responded with "Neither hath this man sinned, nor his parents: but that the works of God should be made manifest in him."⁸² This displays the notion of disability as a factor of God's plan for the person, rather than punishment. This is more prominent in modern Christianity because it matches the secular attitude and interpretation towards disability, which is more accepting and inclusive. The other two interpretations are still evident in Christian narratives, but they are seen more indirectly stated due to their opposition with secular and scholarly standing.

The interpretation of scriptural passages and theologizing about God's providence shape attitudes towards people with disabilities, and can form the basis for marginalization. Marginalization is defined as "implies a form of oppression that shoves a group to the outer edges of a society or an organization."⁸³ This is extremely prevalent for persons with disabilities in society and in Christian institutions. Within the faith community, the rate of religious participation in worship or activities is significantly lower for people with severe disabilities with able-bodied people even though the expressed importance of faith is almost identical between the two.⁸⁴ Researchers also found that ableism "is the biggest obstacle in ministry with disabled

⁸¹ *King James Version*, John 9:1-2.

⁸² *King James Version*, John 9:3.

⁸³ Herzog, Albert A., *The Social Contexts of Disability Ministry: A Primer for Pastors, Seminarians, and Lay Leaders*, 18.

⁸⁴ *Ibid*, 11.

people in churches today” over physical accessibility or resources.⁸⁵ But marginalization extends beyond faith communities, with incomes for people with disabilities 70% lower than the median income in the United States.”⁸⁶ There are also secular roots for the marginalization of persons with disabilities, such as horrific medical definitions and treatment methods or inaccurate scholarly conclusions, but Christian models have been massively influential. One example of a negatively influential Christian view is the perception of people with disabilities as “an eternal child”.⁸⁷ It ultimately leads to the impression of being “holy, innocent, without sin, incapable of any wrongdoing, saved by virtue of their disability”⁸⁸ and that model parlays assumptions of lacking capability and responsibility, even over their own lives.⁸⁹ This often plays into the idea of people with disabilities inherently needing charity or pity which, even when done with positive intent, dehumanizes and inferiorizes them. But there are attempts within Christianity to correct their mistakes and make institutions a more welcoming, inclusive environment.

The most prominent tactic that congregations are implementing to attempt to create a more welcoming environment is disability ministry. Disability Ministry is a program enacted at the congregational level, mostly in evangelical churches, that is designed to “acknowledge the existence and presence of people with disabilities, and the need for persons with disabilities to be included in the life and work of the local church.”⁹⁰ This is not a common objective in Christian institutions, as this disabled churchgoer in Nashville described, “finding a church that tolerated members with disabilities wasn’t too unusual...but finding one that proactively accepted and

⁸⁵ Raffety, Erin, “From Inclusion to Justice: A Dream for Disability Ministry,” *The Presbyterian Outlook*, June 28, 2022.

⁸⁶ *Ibid.*

⁸⁷ Block, Jennie Weiss, *Copious Hosting: A Theology of Access for People with Disabilities*, Continuum, New York, (2002), 50.

⁸⁸ *Ibid.*

⁸⁹ *Ibid.*

⁹⁰ Herzog, Albert A., *The Social Contexts of Disability Ministry: A Primer for Pastors, Seminarians, and Lay Leaders*, 65.

planned for their limitations proved to be difficult.”⁹¹ While disability ministry may be well-meaning, it functions within multiple complex external factors. These include 1) “how society responds to people with disabilities in a particular time and place”⁹² 2) “how specific disabilities are shaped based on current societal views towards disabled people and the care they receive following advances in education, rehabilitation, and civil rights”⁹³ 3) “how the church responds to societal issues, including disability issues”⁹⁴ 4) “the church’s biblical, historical, theological, and ethical response to issues of disability.”⁹⁵ These factors along with the resulting experience led to two primary interpretations of disability ministry.

Firstly, there is a view that disability ministry is a beneficial experience for disabled members and it is working to solve systemic barriers. It has been described as “represents a new paradigm toward which denominational and interdenominational organizations have shifted in order to better assist local congregations in responding more effectively to people with disabilities.”⁹⁶ This perspective believes that disability ministry works within the institution to mend wounds of past problematic Christian narratives through providing devoted space and resources that target the congregational needs of members with disability. An example of ministries in mainline Christianity is the Roman Catholic Church’s two ministries, the National Apostolate for Inclusion Ministry and the National Catholic Partnership on Disability. However, generally disability ministries are not acknowledging the large-scale societal oppression that people with disabilities face; some even fail to acknowledge the obstacles within Christianity.

⁹¹ Jackson, Audrey, “Making Jesus More Accessible,” *The Christian Chronicle*, May 25, 2023.

⁹² Herzog, Albert A., *The Social Contexts of Disability Ministry: A Primer for Pastors, Seminarians, and Lay Leaders*, 10.

⁹³ *Ibid.*

⁹⁴ *Ibid.*

⁹⁵ *Ibid.*

⁹⁶ *Ibid.*, 12.

This pertains to the second view, which is that disability ministries result in further marginalization and exclusion from the faith community. While many acknowledge the potential progress that can be made from designated programs to aid the disabled, there is a strong belief that disability ministries in their current form are more harmful than beneficial. The harm is believed to be sustained from the physical separation that many congregations implement and the services or narratives that stem from the theological perspective. Minister and theologian Bruce Epperly argues that “we cannot “claim the power of Jesus’ hospitality to transform the lives of persons with disabilities” until we “first admit that many interpretations of Jesus’ healing ministry have been abusive.”⁹⁷ This indicates how the theological perspective often lacks the awareness of the harmful reality of past interpretations and scriptural evidence. But the damage is not exclusive to controversial scripture, it is also sustained from disability ministry’s exclusionary nature. This concept is present in Sarah Shea and Sam Ip’s evangelical megachurch⁹⁸. Shea and Ip have a successful and well-supported disability ministry in their congregation, but operate separately from the main sanctuary.⁹⁹ There have been attempts to integrate the ministry, but so far without success.¹⁰⁰ This shows even a stable and thriving ministry has an exclusionary nature.

A key element of disability ministries and all Christian disability relations is the concept of healing. Healing is a central element in scripture through divine intervention or rehabilitation and curing narratives. The notable scriptures where Jesus performs healing services are Matthew 12: 9-14, Matthew 20: 29-34, Luke 5: 17-26, and Matthew 8: 5-17.

⁹⁷ Fox, Bethany McKinney., “Pastors Discuss Their Churches’ Healing Practices and the Healing Activity of Jesus”, *Disability and the Way of Jesus: Holistic Healing in the Gospels and the Church*, 107.

⁹⁸ Brock, Brian, “Disability Is Not a ‘problem’ to Be Solved,” *Faith and Leadership*, June 23, 2020.

⁹⁹ *Ibid.*

¹⁰⁰ *Ibid.*

In Matthew 12: 9-14, Jesus walks into a synagogue and is approached by a man with a “shriveled hand”¹⁰¹ who asks “is it lawful to heal on the Sabbath”.¹⁰² Jesus responds and proceeds to heal the man's hand.¹⁰³ This is a direct example of Jesus performing physical restoration in scripture, presenting his divine strength and ability as well as reinforcing the notion of disability as incorrect or in need of fixing.

In Matthew 20: 29-34, Jesus is on a voyage and passing by two men sitting on the side of the road.¹⁰⁴ The men ask for Jesus to “Have mercy on us, O Lord,”¹⁰⁵ and when Jesus asks how he can help them they respond with, “Lord, that our eyes may be opened.”¹⁰⁶ Then Jesus touched their eyes and restored their sight.¹⁰⁷ This passage is another example of Jesus solely restoring a physical ailment; the men were blind, poor and desperate for aid and he restored their physical barrier, but not their social barriers.

In Luke 5: 17-26, it is described as “the healing of the blind man fulfills the past of Jesus’s ministry, in which the messiah is “sent to proclaim release to the captives and recovery of sight of the blind, to let the oppressed go free.”¹⁰⁸

Lastly in Matthew 8: 5-17, titled The Centurion’s Faith, Jesus encounters a centurion who’s soldier is disabled.¹⁰⁹ Jesus says “I will come and heal him”¹¹⁰, but the centurion protests on the basis of inadequate morals.¹¹¹ Jesus then disagrees on the basis of the soldier's devotion to

¹⁰¹ *King James Version*, Matt.12: 10.

¹⁰² *Ibid.*

¹⁰³ *King James Version*, Matt.12: 13.

¹⁰⁴ *King James Version*, Matt.20: 30.

¹⁰⁵ *Ibid.*

¹⁰⁶ *King James Version*, Matt. 20: 33.

¹⁰⁷ *King James Version*, Matt. 20: 34.

¹⁰⁸ Herzog, Albert A., *The Social Contexts of Disability Ministry: A Primer for Pastors, Seminarians, and Lay Leaders*, 139.

¹⁰⁹ *King James Version*, Matt. 8:5.

¹¹⁰ *King James Version*, Matt. 8:7.

¹¹¹ *King James Version*, Matt. 8: 9-12.

Christ and heals the man.¹¹² Another example of divine physical restoration and presentation of healing for a reward for high moral standing and devotion to God.

While these scriptures are influencers of the interpretation of disability alone, they are more powerful when used to justify Christian narratives. This was evident in the evangelical space where in an article called “Shepherding People with Disabilities” said “the clear teaching of the Bible is that we must pray as those who submit our wills to God- if it is God’s will, he certainly can heal a person’s disability.”¹¹³ This is problematic because it enforces the false narrative that disability can be cured through devotion to Christianity and furthers the societal association of inability and inferiority.

Healing practices often vary depending on the denomination. For example in Saint Felicitas Catholic Church in Los Angeles, they do not have a disability ministry but “prayer for healing is a regular part of community life, through email prayer chains and through times at the end of the service.”¹¹⁴ These prayers for healing go beyond for members who identify as disabled, they extend to those who have experienced an accident or loss etc. On the other hand, La Fe Iglesia Pentecostal Church in Los Angeles has an accessible campus and makes a strong effort to care for people with disabilities in their community.¹¹⁵ But they also strongly believe in God’s power to physically heal people through prayer and hold healing services each week.¹¹⁶ The pastor described his congregation's method as, “they preach and teach on the healing narratives very often, and “always tell about the type of healings Jesus used to do in the body, in people. We use that as a base for us to believe in that healing.”¹¹⁷ These varying approaches to

¹¹² *King James Version*, Matt. 8:15.

¹¹³ Deuel, David, “Shepherding People with Disabilities,” Training Leaders International, Accessed June 21, 2023.

¹¹⁴ Fox, Bethany McKinney., “Pastors Discuss Their Churches’ Healing Practices and the Healing Activity of Jesus”, *Disability and the Way of Jesus: Holistic Healing in the Gospels and the Church*, 113.

¹¹⁵ *Ibid*, 115.

¹¹⁶ *Ibid*, 116.

¹¹⁷ *Ibid*.

disability in faith communities can offer variety for members to choose from, but also makes a confusing and tedious process.

While this concept of healing is a running theme throughout scripture, there is an advancing interpretation that differentiates between ‘healing’ and ‘curing’. The World Council of Churches defines healing as “the removal of oppressive systems”¹¹⁸ and curing as “has to do with the physiological reconstruction of the physical body.”¹¹⁹ Some theologians believe that when Jesus was performing ‘healing’ episodes, it actually aligned more with the definition of curing. The World Council of Churches summarized it as, “disability is a social construct, and healing is the removal of social barriers. From these perspectives, the healing stories in the gospels are primarily concerned with restoration of the persons to their communities, not the cure of their physiological conditions.”¹²⁰ These redefinitions alter the understanding of disability in scripture entirely, in turn challenging the traditional interpretation in the church.

There has been substantial change in Christianity’s relationship with disability in the last 100 years and, as a whole, in a positive direction. The most impactful has been the rise of disability advocacy. Disability advocacy is defined as “refers to action taken within the church to achieve increased participation by and integration of persons with disabilities into the life of the church.” In Protestant churches it is primarily achieved at the congregational level, whereas in the Roman Catholic Church there tends to be a combination of disability ministry and advocacy.¹²¹ An example of this combination is the National Catholic Partnership on Disability, which works to have parish and diocesan leaders “to promote the full and meaningful

¹¹⁸ “A Church of All and for All - an Interim Statement,” World Council of Churches, September 2, 2003.

¹¹⁹ Ibid.

¹²⁰ Ibid.

¹²¹ Herzog, Albert A., *The Social Contexts of Disability Ministry: A Primer for Pastors, Seminarians, and Lay Leaders*, 43.

participation of persons with disabilities in the life of the Church.”¹²² One study found that these five characteristics set up a more inclusive faith community: “featured faith leaders who were more committed to inclusion, used educational resources to address disability-related issues, portrayed people with disabilities positively in their religious teachings, had stronger ties to disability organizations; and had a stronger orientation towards promoting social justice.”¹²³ All of these elements make for an inclusive, affirming, and safe environment for people with disabilities to worship. An example of this was in Camden First United Methodist Church where Jerry Lamb wasn’t able to get his wheelchair into the pews, therefore shunning him to the back of the congregation.¹²⁴ The preacher saw this and was so distraught that he hired a contractor to remove some pews in the middle to allow for Lamb to worship with the congregation.¹²⁵ This shows first hand the evolution of Christian institutions and the dedication to equality.

However, there has not been complete unity on making forward progress in disability advocacy. After the surge of disability programming in the mid-1900s funding began to decline in the 1980s.¹²⁶ There are still denominations and sects of Christianity that hang on to the traditionally, problematic past, this is seen in an article called “Shepherding People with Disabilities”. The article instructs to “first, evangelize people with disabilities”, citing Matthew 28: 18-20;¹²⁷ “second, discipline and train people with disabilities”, citing Ephesians 4:11-13;¹²⁸ and “third, ensure that people with disabilities worship, fellowship, and serve in the local

¹²² Romanowsky, Zoe, “This Catholic Group Supports Church Leaders, Parents to Catechize Children with Disabilities,” Catholic News Agency, May 20, 2023.

¹²³ G, Dr. “What Are the Stats on Disability and Church?” Church4EveryChild, February 9, 2016.

¹²⁴ Press, Associated, “‘not Just the Ramp.’ Worship Spaces Need More Accessibility,” WBBJ TV, December 29, 2022.

¹²⁵ Ibid.

¹²⁶ Herzog, Albert A., *The Social Contexts of Disability Ministry: A Primer for Pastors, Seminarians, and Lay Leaders*, 55.

¹²⁷ Deuel, David, “Shepherding People with Disabilities,” Training Leaders International, Accessed June 21, 2023.

¹²⁸ Ibid.

church”, citing Philippians 2: 1-3.¹²⁹ This disgusting, dehumanizing, and exploitive viewpoint is the residue of a dark past that is slow to fade. Even in all of the growth, there are still those who choose the past. That would be my conclusion on where Christianity stands with disability today. There are strong waves of progress and dedicated efforts to make congregations a welcoming place for people with disabilities, but there are also sects that are slow and stuck in the past.

Overall, the position of defining disability is an ever-evolving subject that has an array of sources. The medical, legal, scholarly, and theological interpretations are all intertwined and building off of one another. The medical and legal definitions serve their purpose to clarify and designate a person with disabilities, where the scholarly definitions evaluate the perspective and realities of disability. The theological interpretation fuels the other three fields, while simultaneously having a unique view. The historical stances, scriptural evidence, and advocacy all play into the complex relationship with disability and Christianity.

¹²⁹ Ibid.

Bibliography:

- Creamer, Deborah Beth. *Disability and Christian Theology: Embodied Limits and Constructive Possibilities*. Oxford: Oxford University Press, 2009.
- Espinoza, D Marissa, Tenorio, S Addison. *The Journal of Medicine and Philosophy: A Forum for Bioethics and Philosophy of Medicine*, Volume 47, Issue 5. October 2022, Pages 573–582.
- Rothstein, Mark A, Martinez, Serge A, McKinney, Paul W. *Washington Law Quarterly*, Volume 80. 2002, Pages 243-298.
- Kaplan, Deborah, “The Definition of Disability: Perspective of the Disabled Community”, *Journal of Health Care Law and Policy*, Volume 3, Iss. 2, Art. 5, (2000) 352-364.
- Timpe, Kevin. "Denying a Unified Concept of Disability." *Journal of Medicine and Philosophy* 47, no. 5 (2022): 583-596.
- Tremain, S.L. 2001, “On the government of disability”. *Social Theory and Practice* 27(4): (2001), 617-636.
- Barnes, Elizabeth, *The Minority Body: A Theory of Disability*, Studies in Feminist Philosophy Series, Oxford, (2016).
- King James Version*, Luke 14:13.
- King James Version*, John 5:14.
- King James Version*, Gen. 32: 23-32.
- King James Version*, John 9:1-3.
- King James Version*, Matt. 12:10-13.
- King James Version*, Matt. 20:10-34.
- King James Version*, Matt. 8:5-15.
- Herzog, Albert A.. *The Social Contexts of Disability Ministry: A Primer for Pastors, Seminarians, and Lay Leaders*. United Kingdom: Wipf and Stock Publishers, 2017.
- Fox, Bethany McKinney. “Pastors Discuss Their Churches’ Healing Practices and the Healing Activity of Jesus.” *Disability and the Way of Jesus: Holistic Healing in the Gospels and the Church*. InterVarsity Press. (2019). 107-134.
- Creamer, Deborah Beth. “Disability and Christianity.” *Disability and Christian Theology: Embodied Limits and Constructive Possibilities*. (New York, 2008), 36-52.
- Block, Jennie Weiss. *Copious Hosting: A Theology of Access for People with Disabilities*. Continuum, New York. (2002).
- Clifton, Shane. “Crippling Christian Theology: Reflections of a Post-Pentecostal Disability Theologian.” ABC Religion & Ethics, December 5, 2020.
- Raffety, Erin. “From Inclusion to Justice: A Dream for Disability Ministry.” *The Presbyterian Outlook*, June 28, 2022.
- Jackson, Audrey. “Making Jesus More Accessible.” *The Christian Chronicle*, May 25, 2023.
- Brock, Brian. “Disability Is Not a ‘problem’ to Be Solved.” *Faith and Leadership*, June 23, 2020.
- Deuel, David. “Shepherding People with Disabilities.” *Training Leaders International*. Accessed June 21, 2023.

“A Church of All and for All - an Interim Statement.” World Council of Churches, September 2, 2003.

Romanowsky, Zoe. “This Catholic Group Supports Church Leaders, Parents to Catechize Children with Disabilities.” Catholic News Agency, May 20, 2023.

G, Dr. “What Are the Stats on Disability and Church?” Church4EveryChild, February 9, 2016.

Press, Associated. “‘not Just the Ramp.’ Worship Spaces Need More Accessibility.” WBBJ TV, December 29, 2022.

Encyclopedia Britannica, The Editors of. “Hermeneutics.” Encyclopædia Britannica. Accessed June 21, 2023.

“About Us.” National Council of Churches – National Council of Churches. Accessed June 21, 2023.

“About General Synod.” The Church of England. Accessed June 21, 2023.

“Your Rights under the Americans with Disabilities Act .” U.S. Department of Health and Human Services. Accessed June 21, 2023.