

Recognising all members

The place of people with disabilities in the Uniting Church in Australia

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Abstract

In this article we present a case study related to the NSW Synod of the Uniting Church in Australia. We look at the gap between the official theology of the church and its policy and practice, compare this to the church's approach to other groups who have experienced barriers to church participation and outline a project which is attempting to move the church forward to a more appropriate praxis.

Introduction

This case study is based on a view that people with disabilities are not "differently abled" but are part of a wide diversity of Uniting Church members. The barriers that they face in the church stem from a lack of awareness of how to deal with practical problems, rather than from an inherent difference created by their disability.

A particular methodology also underlies the case study, which is about "praxis", the way we operate and the ideas that support that. If the church is to move from unjust to just praxis, then we need to pay attention to specific experiences of injustice, analyse and question the ideas that support the injustice, recover those parts of the Christian tradition that will help us understand the demands of justice on these specific issues, determine the principles that justice requires as the basis for future action and take action to bring about change. (Wansbrough A 2000) This is not a simple or linear process; rather there is interaction between these tasks. The point is that change does not come from sweeping generalisations and grand abstractions, but from dealing with reality and finding ideas that have value in bringing about change in particular contexts.

While we refer to specific Uniting Church documents, we believe that neither the issues of praxis nor the theology of the UCA documents are unique to the UCA.

The case study is offered as a way of assisting people in all churches sharpen the way they deal with these issues.

Fundamentals of our faith

“Differently-abled” or part of a wide “diversity”?

In 1995, the late Elizabeth Hastings, then Commissioner for Disability with Australia’s Human Rights and Equal Opportunity Commission, launched the disability policy of the NSW Synod of the Uniting Church in Australia. She questioned the title of the document, *Include me in*. Her concern was that it implied that people with disabilities are a separate group, not yet part of the church. She was an Anglican who had a disability, addressing a Uniting Church synod that included some people with disabilities. The title clearly gave a false impression. The situation of those who face barriers to full participation because of disabilities is not helped by giving the impression that we disabled are outside, rather than inside, the church. Terms like “include me in” also sound like a plea to those in power, as if the church has the right to decide who belongs and who does not. Instead, language and policy should reflect that people with disabilities belong, enhance respect, and help people see the wrongness of the barriers and harms that they encounter in the life of the church.

This example illustrates why the question of how to talk about people with disabilities theologically is of fundamental importance. Inadequate and inappropriate concepts can be offensive and encourage ideas that support discrimination and injustice. Appropriate theology can help the church see situations and issues clearly, and assist in ending discrimination and harm.

An examination of the synod policy shows that it is not only the title that is problematic. There are generalizations such as “people with disabilities constitute a community that makes space for God” and “people with disabilities teach others that there is more to ministry than clinical understanding”. These comments are not only unrealistic, but sacralise disability. They give people with disabilities characteristics and responsibilities based on their disability, instead of recognizing the characteristics they share with other human beings, and with other Christians. The same impression is given in the section on inclusive ministry in the congregation. The basic assumption seems to be that people with disabilities and people who are not “disabled” are different and complementary.

This approach to the question of disability is not unique, of course, to this policy document. It seems to be the view of Moltmann, for example, when he argues that the non-handicapped and the handicapped need one another and that there is need for change “on both sides” (Moltmann, J 1983, page 150). The same view seems to underlie the term “differently abled” that is used by the World Council of Churches and elsewhere.

The problem with a theology of difference or complementarity is that it conveys the impression that disability changes the nature of one's humanity. Disability becomes the basis of one's humanity and one's participation in the church. This undermines some of the central theology of the Christian faith.

Church membership is not primarily about human action, but about God's action – through Christ, through baptism, through the work of the Holy Spirit. The issue of participation is not about letting disabled people in, but about acknowledging the reality of God's church, in which we disabled are present, and removing the practical barriers that stand in the way of our full participation.

Ministers with a diversity of gifts

This attempt to create a special theology is puzzling in a Uniting Church document. A more appropriate approach would have been to start with the Basis of Union, the document that formed the basis on which Methodist, Presbyterian and Congregationalist churches became the Uniting Church in Australia in 1977.

The Basis of Union recognizes that it is God who calls people, both women and men, to Ministry of the Word, to the ministries of elder and lay preacher, and to the roles required for the government of the church. It is God, through the Holy Spirit, who gives people the appropriate gifts for the ministry to which they are called. It is not the role of the church to categorise people and determine what part they can play. It is the role of the church to listen to God, to recognise those to whom God has given the particular gifts of the Spirit that are required for particular roles and tasks, and to *“order its life”* in an appropriate way so that it uses the gifts of ministry that God gives to people.

Each council of the church (congregation, presbytery, synod and assembly) has the responsibility “to wait upon God's Word and to obey God's will in the matters allocated to its oversight.” This recognition of the local congregation as a council of the church is crucial to Uniting Church understanding of participation and ministry. Every member of the church has one or more God-given gifts of ministry. The church needs to both recognise the gifts, and provide ways in which the person can exercise the appropriate ministry that utilizes those gifts. No one can be left out. No one is without a ministry. No one has a “special ministry” because of disability. Everyone has a ministry, a special ministry, by virtue of their God-given gifts and the responsibilities that go with the gift. So in the Uniting Church, we talk about specified ministries (for which professional training is required, and certain status is granted through ordination and induction, or commissioning) and lay ministry (for which the church offers less formal training and different forms of recognition). It is all ministry, it is all important, and it often overlaps.

Fellowship of reconciliation

This theology of ministry is consistent throughout the Basis of Union. It is shaped by Christology. Jesus is “a representative beginning of a new order of righteousness and love”. The church is a fellowship of reconciliation, “a body within which the diverse gifts of its members are used for the building up of the whole, an instrument through which Christ may work and bear witness to himself.” All ministry and the whole life of the church depends on Jesus Christ, “who gives life to the dead and brings into being what otherwise could not exist”.

The Basis of Union describes Baptism as Christ’s act, the way Christ incorporates people into his own baptism, the benefits of his saving work in life, death and resurrection, and the gift of the Holy Spirit. “Baptism into Christ’s body initiates people into Christ’s life and mission in the world”. Through the Holy Communion or Eucharist, people “grow together into Christ, are strengthened for their participation in the mission of God in the world, and rejoice in the foretaste of the Kingdom which Christ will bring to consummation.”

This understanding of salvation, membership and mission renders a theology of the “differently abled” unnecessary and counter-productive. Ministry belongs to the whole people of God. For the United Church, being the church means ordering our life together so that all may participate, so that we value all as fellow Christians. We are to value the gifts God has given each and every member and ensure that they are used in an appropriate ministry. If we as a Church are to be faithful to the *Basis of Union*, we cannot define people’s ministry on the basis of characteristics such as age, sex or disability and we cannot allow barriers to remain that prevent anyone from using their gifts in an appropriate ministry. We people with disabilities belong in the church, and participate in its life, on the same grounds, for the same purposes, and with the same range of gifts of the Spirit as anyone else.

Evaluating praxis

UCA models in other areas of diversity

The UCA commitment to recognizing God’s diverse gifts and the ministries of all members is reflected in regulations, policy and practice. As the Basis of Union and the Constitution and Regulations were developed, some attention was paid to some groups who had faced barriers in the churches proposing union – non-clergy, women, and people of youthful age.

The UCA regulations require that the national assembly, synods, and presbyteries have at least as many non-ordained as ordained members. Both women and men may be ordained. There is no church structure by which ordained clergy alone can control (“guide”, “lead” or “serve”) the church or its agencies and activities. Both ordained and un-ordained men and women have occupied leadership roles such as President, Moderator, synod secretary, executive directors of official church agencies, and chairperson and secretary of

Presbytery. The only role that is usually reserved for ordained ministers is the celebration of the Eucharist, but a Presbytery can allocate this role to a layperson if the person has the appropriate gifts and training, and the Presbytery believes that circumstances warrant them exercising this role. The Basis of Union provided for at least one third of various councils and committees to be women for the first years of its life. That provision was later extended. It also provided for the participation of people of youthful age.

Later decisions have also been aimed at encouraging and enabling participation of all. In 1985, the assembly adopted the policy that children, as baptized members of the church, should receive the Eucharist. In more recent times, the church has developed programs to enable children to participate in synod and assembly as voting members. The children's education policy recognizes that children are church members and this should shape their education. The national Assembly has adopted policies seeking to give appropriate power over their own congregations and ministers to Indigenous members of the church (by establishing the Uniting Aboriginal and Islander Christian Congress in 1985 and other means). The 1985 statement *The Uniting Church is a Multicultural Church*, was intended to move the church towards ensuring participation of migrant-ethnic groups in the church, especially those of non-English speaking background. The church has also adopted a consensus process for decision-making (*A manual for meetings, 1994*). Its aim is to ensure that views are shared in the course of large meetings such as synod and assembly and that people have the chance to contribute on the basis of their gifts and insights rather than status. Programs such as Covenanting and cross-cultural awareness workshops help people understand how their personal behaviour needs to change to allow others to participate.

The church has thus sought to order its life to allow identified groups of people who have previously been disadvantaged to enter fully into the life of the church and participate in its power structures. None of the structures or mechanisms is perfect, but they do represent significant progress and changed norms. Struggles are not at the level of arguing theologically that these groups should participate and have the right to participate (include me in) – the struggle is to improve church practice.

UCA and people with disabilities

There are two groups for whom the UCA has failed to take seriously the theology of membership and ministry in the Basis of Union. These are people with disabilities, and people who are homosexual. In both cases, the problem is the wrong focus on a theology of difference. In both cases, it appears to want to make rules that override the clear evidence that God gives gifts of ministry to all Christians, it is not on the basis of rules determined by the church on the basis of categories. Here we will consider only people with disabilities.

Since 1980, the NSW Synod of the Uniting Church has had policy resolutions committing it to make churches and other buildings accessible. There are some examples of new and refurbished buildings providing for the needs of people with disabilities. Yet in recent years, churches have been built that provide access for people in wheelchairs into the building, but not into the sanctuary and pulpit of the church, or onto the stage in the hall. This suggests a view that people with disabilities can participate in the sense of attend, but not lead. The synod's building advisory committee has in the past seemed more concerned with cost than in finding practicable solutions. Many church buildings continue to be badly signposted, so that it is difficult to find the wheelchair entrance or toilet. When UnitingCare NSW.ACT employed a person in a wheelchair as a disability officer, some 20 years after church union, she could access the building to work, but had to go to the building next-door to use the toilet.

Synod and assembly meetings have been held in buildings with limited accessibility, either to the auditorium, the stage, the small group meeting rooms, the toilets, the catering facilities or all of these. In 1995, Elizabeth Hastings had to launch the NSW Synod disability policy from the floor of the auditorium, because there was no way to get her wheelchair onto the stage. Some people with disabilities have found that they were unable to attend the meetings of national committees to which they were appointed, because they were held at inaccessible venues. In 2002, the NSW Synod held its meeting at the Canterbury Race Course, an accessible venue, and there was an advisor on access issues in the Synod Arrangements Committee, 2002.

At the beginning of the 1990s, the NSW synod was asked to set up a task group to look at the circumstances under which a person with a disability might be allowed to be a candidate for the ordained ministry. This was clearly discriminatory and the synod instead passed a resolution to look at the obstacles that ministers with disabilities face and how the obstacles might be removed. Whereas synod would require that a task group about women or Indigenous people included a number of those people, in this case the task group included only one minister with a disability. The task group did not consult with each of the ministers with disabilities. The report was phrased in terms of making concessions to ministers with disabilities, rather than in accordance with the theology of the Basis of Union. Both the process and the report involved discrimination and perpetrated the stereotype of people with disabilities as different, dependent, and burdensome. This is disturbing. Ordained ministers have gone through a rigorous process of selection, education and assessment as to their readiness for ministry. The UCA invests considerable money and time in training them. Many have two or more degrees. It is in its own interests to remove any barriers that ordained ministers with disabilities encounter in their ministry. It is both theologically wrong, and a waste of resources, to fail to do so. If the church cannot get past stereotypes and embrace the theology of the basis of union regarding ordained ministers, then the situation is likely to be even more difficult for non-ordained people with disabilities.

The Community, Disability and Ageing Program, University of Sydney, measured Uniting Church attitudes towards disability at a disability awareness workshop in 1996. The score on the 'Interaction with Disabled Persons Scale' showed the Uniting Church participants perceived level of discomfort when interacting was lower than the general population." (Cahill, L. 1996. P.7) "Community attitudes towards people with disabilities are widely regarded as being negative. [Attitudes interfere] with quality of life and acceptance...as valued members of the community." (Gething, L. 1994. P.23) Negative attitudes towards people with disabilities are likely to hinder full participation in society. Despite the level of acceptance being higher in the Uniting Church than in the community, inclusion of people with disabilities remains a pressing issue, as our other examples show.

In 1998, the Board for Social Responsibility (now UnitingCare NSW.ACT) and the Board of Education of the NSW Synod issued the *Disability Education and Services Policy*. This is about discrimination in society as well as the church. It focuses on the church's solidarity with people who suffer injustice, in the church's service provision and advocacy. It requires that all church-run disability services include people with disabilities in their management. However, its section on "the faith context" still focuses on difference and talks about the need for inclusion.

In 1998 the Synod employed two people with disabilities and suitable qualifications as Disability Education and Service Officers. Their work demonstrated a need to address access into congregations. In 2001, the church advertised for an Access Officer to oversee the Access project outlined later in this article. A person who mobilizes in a wheelchair was unsuccessful, partly because he would not be able to access all the churches in the pilot project.

Clearly, in relation to people with disabilities, there is room for improvement in the church's praxis. For the UCA, what is at stake is its adherence to the Basis of Union, something that all those in specified ministry have undertaken in their ordination vows. The development of the Action Plan reported in the next section is clearly essential if the church is to improve its praxis.

Improving praxis – the action plan

The development of the action plan in NSW has been quite different from the approach adopted by the Victorian Synod, which also has an action plan.

The legal context

In Australia, the human rights of people with disabilities are enforced by the Disability Discrimination Act 1992 (DDA), administered by the Human Rights and Equal Opportunity Commission (HREOC). One of HREOC's responsibilities is to advise organisations on the development of Action Plans and to register these plans. Plans are voluntary, but registering and implementing plans is a way of demonstrating compliance with the act.

In defining disability in the DDA, Australia rejected the restrictive “major life activity” requirement found in USA and UK legislation. Instead, it adopted a generally more pragmatic approach (Innis, G. 2000).

The categories of disability within the DDA include total or partial loss of the person’s bodily or mental function; total or partial loss of part of the body; the presence in the body of organisms capable of causing disease or mental illness; malfunction, malformation, or disfigurement of part of a person’s body; a disorder or malfunctioning that results in differences in learning; and a disorder, illness or disease that affects a person’s thought process, perceptions of reality, emotions or judgement and results in disturbed behaviour. A person’s disabilities are covered by the act if they presently exist, if they have previously existed, if they may exist in the future or if they are imputed to the person.

The DDA proposes action plans as a mechanism for eliminating discrimination and promoting equality within organisations. They generally focus on preventing discrimination and addressing currently known barriers to discrimination, sometimes ignoring the value of complaints mechanisms in bringing about change. (Innes, G. 2000)

Developing action plans is consistent with the theology of the Uniting Church and can usefully shape the approach taken by the church.

The NSW Synod has created an Action Plan. In October 2001 an Access Officer who was an Occupational Therapist was employed to initiate an access pilot project, by working with congregations to develop local action plans. This plan recommends that the Synod ensure

- Congregations understand people with disabilities have a right (ethically, and legally) to be included in worship, activities and decision-making.
- Complaints about equity and access are considered with sensitivity and are acted upon when upheld.
- When any changes occur, people with disabilities must have the opportunity to be involved in the consultation process.
- When new facilities are under consideration, relevant design standards will be met.

The vision for the project is that Uniting Church buildings, worship and activities will be welcoming and accessible to all people and enable their participation, and that the church’s understanding of gifts and ministry, as outlined in the Basis of Union will be achieved. Removing barriers enables participation and service, thereby moving closer to acknowledging that the one spirit has endowed the members of Christ’s Church with a diversity of gifts and that there is no gift without its corresponding service.

AIMS

The project aimed to:

- Make a workable action plan to be followed by congregations.
- Provide education regarding disability issues.
- Provide an estimation of costs involved, and create an appropriate loans system.

The Action Plan is due to be endorsed at the March 2003 Council of Synod, after which it will be submitted to the Human Rights and Equal Opportunity Commission.

THE CONGREGATIONS

The study included members of eight congregations. It emphasis was on people who are elderly and people with disabilities. The National Church Life Survey of 2001 showed that in the Uniting Church the percentage of people over sixty years of age is 56%. Elderly people were included within the study, because their changing health needs create changing needs for access.

The congregations were chosen based on their building type, multi-ethnic mix, and activities of the congregation. It is a purposive sample.

Two Churches have Tongan congregations and one a Korean congregation. Congregation activities included meals programs, literacy programs, after school care, adult groups and counselling.

DEVELOPING THE PLAN

Pilot project activities and their advantages are enumerated below.

1. Focus groups allowed in-depth discussion of issues with a small group of participants.
2. An access audit of the architectural features of the building provided practical solutions and costs.
3. A questionnaire regarding access covered more topics and allowed anonymous views to be expressed by a wider population.
4. Education packages regarding issues of disability were made to foster inclusion.
5. An action plan was created and provides a practical means of addressing identified barriers to access.

FOCUS GROUPS

Access Australia, a consultancy firm that specializes in access, ran the focus groups and performed the building audits. The consultants were an Occupational Therapist and an Architect. Focus groups aimed to:

- Inform the participants of the provisions of the DDA.
- Identify the current social, attitudinal, and physical access barriers to inclusion of people with disabilities within the congregation.

- Seek preferences of people with disabilities to overcoming (identified) barriers.

In practice focus groups concentrated on the provisions of the DDA, plus physical and sensory access issues. Social, attitudinal and cognitive issues were not covered in detail. Five to thirteen members participated; in the larger groups not all members contributed to the discussion. All ethnic-migrant congregations were offered translators; only the Korean congregation accepted.

ACCESS AUDITS

Churches, halls, kitchen, toilet facilities and other areas were audited. The benchmarking standards used were:

- Australian Standards AS 1428 part 1: Design for access and mobility: General requirements for access-New building work.
- Australian Standards AS 1428 part 2: Design for access and mobility: Enhanced and additional requirements-Buildings and facilities.
- Australian Standard AS 2890 Part 1: Parking facilities.
- The Building Code of Australia (BCA)
- Austroads, Part 13: Traffic engineering practice, Pedestrians.
- Advisory Notes on Access to Premises, June 1997, Human Rights and Equal Opportunity Commission.

Audit reports prioritised solutions with respect to safety, equity and dignity, and the likelihood of an event occurring.

EDUCATION PACKAGES

Education packages, based on requested information and identified problems, were compiled. It is intended that they will increase congregations' knowledge and therefore ability to include people with disabilities.

ACTION PLAN

The action plan was created from the above-mentioned research. It outlines problems with access, solutions, time-frames for implementing solutions, monitoring processes and asks congregations to identify relevant committees responsible for implementing and monitoring solutions. It includes a complaints mechanism that will aid in fostering change. The resources provided with the action plan provide information related to a range of physical and mental disabilities.

QUESTIONNAIRE

A questionnaire was developed by the Access Officer with the assistance of Professor Susan Quine, the Associate Professor of Community Medicine at the University of Sydney. The questionnaire was a pre test tool. Pilot congregations

have individualised post -test questionnaires to measure the effectiveness of interventions and education. The questionnaire consisted of mutually exclusive, nominal questions; Likert scales; open ended and closed questions. It addresses:

- The age of the respondent.
- Whether the respondent has a disability, that is physical, mental or both.
- Attitude toward congregation members with physical and mental disabilities.
- Whether members feel included and valued within the congregation.
- Process of the worship service.
- Can the individuals hear, see and use the worship materials.
- Whether the seating arrangements foster inclusion.
- If people are given time to express themselves and if their language needs are met.
- Help that is available and help that is needed for carers.
- Aspects of disability about which respondents would like to have more information.

Questionnaire Results

Response rate

365 questionnaires were sent out. There were 195 responses, a rate of 53%.

Characteristics of respondents

- Elderly people (over 65 years of age): 122 respondents, 62%
- People with disabilities: 47 respondents, 24%
- People with physical disabilities: 41 respondents, 21%
- People with mental disabilities: 5 respondents, 3%
- People with mental and physical disabilities: 2 respondents, 1%
- Elderly people with disabilities: 40 people, 20%

These percentages can be compared with the estimated disability rate in the general population (Australian Bureau of Statistics, 2000) and 1.5% with mental health problems at any one time (Human Rights and Equal Opportunity Commission, 1992)

The responses from all the congregations are tabulated below. Not all people responded to the questions; therefore the numbers do not add up to 195.

Table 1 I VALUE PEOPLE WITH A:					
	Strongly	Disagree	Undecided	Strongly	Agree

	Disagree			Agree	
Physical disability			4	90	96
Mental disability		1	30	92	72

Table 2 I FEEL VALUED BY THE CONGREGATION:					
	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
All responses		1	19	81	89
People who are elderly			2	15	26
People with a disability				1	10
People who are elderly and have a disability		1	3	17	13

Table 3 I FEEL INCLUDED IN THE CONGREGATION:					
	Strongly Disagree	Disagree	Undecided	Strongly Agree	Agree
All responses	1	2	1	69	107
People who are elderly				12	31
People with a disability	1	1		3	6
People who are elderly and have a disability		1		15	18

Do Uniting Church people value people with a disability?

Table 1 shows that 97% of those who answered the question said they valued people with physical disability, and 84% of those who answered the question said they valued people with mental disability. This is a very positive result. It was also

a surprising result, given the number of access problems that exist in these congregations and in the wider Uniting Church. The congregations have begun implementing the action plan even more it has been adopted by synod. (Cooper N 2003) This suggests that their answers to this question were sincere.

More people are undecided whether they value people with a mental disability than a physical disability (15% compared to 2%). There are two possible explanations. The first is that the result is an artefact of the study; people were not clear as to what was meant by mental disability (does it mean, for example, mental illness, or intellectual development disability, or dementia?) and their answers reflected that uncertainty rather than an uncertainty about attitudes. Alternatively, this undecidedness may reveal that some people are still coming to terms with mental disability. Congregation members may feel more comfortable with physical disability than mental disability; they may know more people with physical disability and therefore have a greater understanding and comfort level of physical disability. Discomfort with mental illness creates barriers for inclusion. It reduces the chance of relationships forming whereby each person has a chance to value and be valued, and where gifts can be given and received.

Some of the comments made at other points in this project suggest that for some people, at least, the second explanation may be correct. For example, some people expressed ambivalence about people with mental illness who from time to time exhibited disruptive behaviour during worship or other activities. It may be that the answer “undecided” indicates that members of the church are not willing to describe their attitude as not valuing people, but wanted to indicate that they face some difficulties in dealing with some people with mental disability. Resources in the action plan should assist congregations in overcoming these perceived difficulties.

Do people in the Uniting Church who are elderly or have a disability feel *valued* by their congregation?

Table 2 shows that of those who responded to the question, 89% of all respondents felt valued by the congregation, compared to 95% of those who were elderly, 100% of those with a disability, and 91% of those who were both elderly and had a disability. Ten percent of all respondents were undecided as to whether they felt valued, compared to 5% of those who were elderly, none of those with a disability, and 3% of those who were elderly and had a disability. The one person (0.5% of all respondents) who disagreed with the statement of being valued was both elderly and had a disability (3% of this category).

These results are very positive. They should not, however, be taken to mean that people who are elderly or have disabilities do not struggle to participate in the life of the congregation or that there is no need to improve accessibility and attitudes. The project as a whole revealed serious deficits in accessibility and practice.

Other parts of the project involved discussing with congregations how they might better value people with disabilities. Congregations themselves recognised that they needed to do better. The solutions offered by the congregations to help people with disabilities feel more valued included not focusing on their disability, and keeping in touch. One congregation member replied: “have a variety of forms of activities at worship so all can take part [and] involve [people with disabilities] to the limits of their abilities, [as] each of us have some gifts to offer.” This is also a positive expression of the theology in the Basis of Union.

Do people who are elderly and people who have a disability feel *included* in their congregation?

Table 3 shows that of those who responded to the question, 98% of all respondents felt included in the congregation, compared to 100% of those who were elderly, 81% of those with a disability, and 97% of those who were elderly and had a disability. The three people who disagreed with the statement of inclusion constituted 2% of the total sample. Two had a disability, 18% of the respondents with a disability. One was elderly and had a disability, 3% of the respondents in that category.

Again, these results, while positive, cannot be taken to show that accessibility does not affect people’s relationship to the church or that the church is fully implementing its theology. Two respondents reported respectively about physical access:

I am an amputee and cannot get back to my church without [accessible] toilet facilities or a ramp.

Provision of a reasonable means of access to church services and facilities [is necessary.] I have been with this congregation for over sixty years ...[and] am very disappointed that because of disability (use of a wheelchair) I can no longer attend.”

It is apparent that lack of access is preventing these congregation members from attending church, enjoying their rights and fulfilling their responsibilities as members of the congregation. Where once their faith and gifts defined their role in the church, now their disability does. It must be assumed that many other people with similar disabilities are also unable to access the church.

In answer to an open-ended question to members of the congregations about inclusion, there were many suggestions. These ranged from communication issues to physical access. Suggestions to improve the former were to “be kept more up to date” and to have a “more face to face approach.” This is a matter of greater effort rather than cost.

Other people may attend church, but still face barriers to participation for example: difficulty reading the overhead screen and poor lighting, not knowing a hearing loop is available, or isolating seating arrangements.

A more just form of participation

The results in tables 2 and 3 are highly positive. People feel valued and included, even most of those who are elderly and/or have a disability. How are we to interpret this, given that we know, and the congregations acknowledge, that access needs to be improved?

Many elderly people bring with them a lifetime of church experience and a faith that has been nurtured over many years. Their answers to these questions are best taken as showing that their sense of value and includedness are based on much more than their current experience of accessibility. It may be partly based on their experience when they were younger or before they acquired a disability. But this finding also goes to the heart of the issue raised by Elizabeth Hastings, referred to at the beginning of this article. The church does include people with disability. The problem has never been as simple as saying that lack of adequate access means people with disabilities are not valued or are unable to be part of the church. The problem has been that the church relies on people with disabilities making the effort to overcome the barriers. That is what the access project is intended to change – now the church will make that effort. In many aspects of the church's life, it is not about moving from exclusion to inclusion, but from unjust conditions for participation to just conditions for participation. Unjust barriers are to be removed. The church will no longer expect people with disabilities to be so forgiving of its failures and insensitivity.

The action plans

A local action plan was provided to each congregation that participated in the pilot study, and these are already being implemented.

The information from the various processes was used to formulate a synod-wide action plan for congregations. It covers issues, goals, strategies, time frame, suggested responsible body, and ways of monitoring implementation. It includes an accessibility action plan, an access checklist, a list of resources, information on funding, information on international symbols, and resources relating to communication and hearing, communication and vision, mobility and wheelchairs, mobility and vision, epilepsy, dementia, Parkinson's Disease, stroke, head injury, intellectual disability, multiple sclerosis, depression, and schizophrenia. It is thus designed to be a comprehensive plan.

The action plan has acknowledged that heritage listed churches need special consideration; however, this does not exempt them from taking steps to improve access. Other issues covered in the action plan are: creating a formalised complaints mechanism; providing an accessible path of travel to the church and

hall from accessible car park facilities; installing, maintaining and advertising the presence of hearing augmentation systems; printing all overheads and handouts using large print guidelines; provision of integrated seating, and information about the accessible facilities of each church to welcome visitors more effectively.

The action plan has not yet been lodged with HREOC. Despite this, the pilot congregations have taken steps to rectify problems identified for their building or worship processes. Such steps include: increasing the print and font size of the worship sheets and handouts; inking the lapel microphone to the hearing loop system; provision of chairs with arm rests, accessible car parks, integrated seating and demountable ramps; installation of rails on both sides of the stair entrances; and liaison with local councils regarding provision of footpaths and or kerb ramps on government owned land adjoining church property.

When the action plan is lodged with HREOC, all Uniting Churches in the NSW Synod will be expected to follow the action plan to improve access. The actions already taken by the pilot congregations are a positive example for other congregations and attest to the commitment of congregations to make their church buildings and process more accessible and more inclusive to people with disabilities. They show that congregations want to keep faith with the peoples who face problems of access and participation but have nevertheless said that they feel valued and included.

Financial feasibility

Every pilot congregation raised funding concerns. One respondent stated that: “congregations must be prepared to spend money on better access for people with disabilities, including wheelchair users.”

Congregations with activities such as the meals programs have stated: “government regulations to enforce standards (for example provision of heating trays) add to our budget constraints, as funding is only from the Church.” Other congregations have found proposed modifications too costly. For example, quotes have reached AUS \$43, 740 for installation of mechanical lifts. Therefore other options need consideration.

Where buildings are multi-level or have a close proximity to other buildings, creating permanent, standard ramps is often not possible. In one such congregation a de-mountable ramp is used, and installed with prior notice. This prevents people who use wheelchairs entering church spontaneously.

Many churches are heritage buildings. One person stated that they “try hard to retain [the church’s] heritage fabric, to honour the congregation and the city.” Full access to heritage buildings may not be possible. It is important to: “evaluate accessibility options within a conservation context... Solutions should provide the greatest level of access without adverse effects on the place’s

significance. Solutions should also minimize modifications, as this reduces their impact and, often, their cost.” (Martin, E. 1999)

As a result of this project, the Board of Finance and Property has developed a loans system to help congregations finance the modifications required by the Action Plan.

Signs of hope

During the project, positive progress in creating an accessible church for people with disabilities has been observed. This augurs well for inclusion of people with disabilities and creating access on a wider scale than the pilot congregations. Church members have become more aware that people with disabilities face issues when joining congregation activities and using church buildings. Members of congregations have asked many questions and made many phone calls to inquire about how to deal with access issues that the congregations have identified for themselves. Congregations outside the project have also inquired about modifications to church buildings and church processes. The pilot congregations all affirmed that they wanted to include people with disabilities better, identified gaps in their knowledge about disability issues, and requested relevant information. All the congregations acted upon many problems identified on the initial visit to their church prior to the action plan being provided. Some congregations have discussed instituting “pastoral care committees” to be more proactive about meeting the needs of all their members. The acceptance and action taken so far, is a positive indicator that other congregation members will seize the opportunity to make their activities inclusive, and buildings accessible to all.

Conclusion

There is no doubt that the Uniting Church needs an action plan to ensure accessibility of people with disabilities. At stake is the sincerity of its theology of membership and ministry, and its faithfulness in expressing the Gospel it says it believes. This project has sought to provide an action plan that is clearly defined and capable of implementation. It will make a difference. There is now a loan system in place so congregations can afford to implement the plan.

While people with disabilities have good reason to criticize the inaccessibility of the Uniting Church in Australia, there is now reason for hope. Its theology of membership and ministry lays good foundations for people with disabilities to feel valued and included. The accessibility project shows that congregations can become committed to accessibility for everyone when provided with appropriate information, ideas and means of funding.

The Basis of Union ends with an affirmation and a prayer.

The Uniting Church affirms that it belongs to the people of God on the way to the promised end. The Uniting Church prays that, through the gift of the Spirit, God will constantly correct that which is erroneous in its life, will bring it into deeper unity with other churches, and will use its worship, witness and service to God's eternal glory through Jesus Christ the Lord. Amen.

To which people with disabilities will surely say Amen, and apply it not only to the Uniting Church but also to all churches.

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