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ABSTRACT

This resource packet includes information relating to the inclusion of people with disabilities in the Christian church. The first article, "Changing Attitudes, Creating Awareness," highlights several critical areas where churches can begin to understand the barriers of exclusion to people with disabilities. The following article, "Victim Theology," discusses biblical and theological issues that blame and victimize persons with disabilities. A syllabus is included of a two-credit course that introduces students to ministry with people with physical and mental disabilities. The syllabus and an extensive annotated bibliography serve to provide a reference guide for resources that are available to churches. The next section of the packet includes handouts used for courses, retreats, and lectures. Information addresses: (1) church accessibility; (2) counseling persons with disabilities or their families; (3) implications of disability on family life; (4) the grief cycle; (5) identifying spiritual needs; (6) forgiveness; (7) strategies for pastoral care of persons with disabilities or their families; and (8) attitudes of clergy with disabilities. Reprints are included of "Healing of Bodies and Victimization of Persons: Issues of Faith-Healing for Persons with Disabilities" and "A Theology of Anger When Living with Disability." (Articles contain references.) (CR)

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Resource Packet on Disability, Spirituality, and Healing

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AUTHOR'S BACKGROUND

The Rev. Nancy Lane received the Ph.D. in Religion and Psychology from The Union Institute, Cincinnati, Ohio, and was a Visiting Scholar at Oxford University, England, where she studied the meaning of healing and suffering. Dr. Lane received the Master of Divinity from Colgate Rochester Divinity School, Rochester, N.Y., and a B.A. in Religion from Wells College, Aurora, N.Y.

Ordained in the Episcopal Church in 1984, she served as a diocesan staff officer and Director of the Office of AccessAbility for the Diocese of Central New York. Dr. Lane later became the Executive Director of Disability Awareness: An Empowering Ministry. She is known as a national and international speaker on issues of accessibility and disability in the Church and the community, and delivered papers before the World Council of Churches Congress in the Netherlands, the W.C.C. Consultation on Religion and Disability in Uruguay, and the International Congress on Pastoral Care and Counseling in Australia. She has lectured at numerous colleges, seminaries, and conferences within the ecumenical community and for many secular organizations, including medical schools. Dr. Lane has also preached and led workshops in several hundred churches across America. For many years she has led a retreat for people with disabilities on the Spirituality of Living with a Disability at Kirkridge Retreat Center in Bangor, Pa.

Dr. Lane is a Jungian-based psychologist, with expertise in treating women with disabilities, battered women and women suffering from Post Traumatic Stress Disorder (PTSD). She is also trained in Spiritual Direction.

Dr. Lane has written a number of articles on the *spirituality of living with disability* and is author of a book on *the spiritual and theological implications of the abuse of power toward women with disabilities*.

INTRODUCTION

The Rev. Nancy Lane, Ph.D.

The materials in this resource book have arisen from my fifteen years of ministry concerned with the inclusion of people with disabilities in the Christian church. Consequently, the resources reflect a Christian perspective. However, I believe that people of other faiths can use some of the resources as springboards for exploring the issues of disability and accessibility in their faith community. Further, it is not necessary to be a Christian to be engaged in theological reflection on the issues of healing and suffering, the meaning of life, and the presence or absence of God in our experiences.

As noted in the page devoted to the *Author's Background*, my academic studies and my professional experiences have been devoted to the theological, spiritual, biblical, hermeneutical, psychological, and practical aspects of the experience of disability. I have read extensively on the issues of healing and suffering as they relate to living as a human being in general and to living with a disability or chronic illness in particular. As a Christian and an ordained priest I have found deep meaning in the life, crucifixion, death, and resurrection of Jesus. As a psychologist I find that these are also powerful symbols of the spiritual journey toward healing and transformation even if one is not a Christian. Thus, you will find the themes of suffering, death, transformation, healing and resurrection running through the materials in this book.

I also have the experience of living with cerebral palsy since my birth. This experience has been rich with the blessings of those who see and accept me as a person who is also gifted and able. Life has been blessed with loving parents, two lovely daughters, and life-long friends. I have been able to achieve most of my goals – from being a pianist, a dancer, a serious cook and gastronome, mother and grandmother – to being a scholar, a writer, and a priest of the Church. Nevertheless, I have also encountered years of discrimination and exclusion in and by the institutional church. In my early work as a diocesan staff officer and in the years since then as a volunteer director for Disability Awareness, I answered hundreds of letters and calls from people with disabilities who have been excluded from the church because of negative attitudes, "victim theology" and architectural and communication barriers. They wrote of the spiritual wounds engendered by exclusion and despaired of God's presence to them. Like them, I have had to wrestle with this same pain of exclusion – of being denied the sacraments, access to colleagues and a worshipping community, and prevented from being deployed as a priest for the last ten years. It was within this context that I eventually pulled together the material on "Spiritual Abuse" which is among the handouts. The materials gathered there show that my experience is not unusual; others have written about the pain of exclusion and have repeatedly called the church to become welcoming and inclusive. It is my hope that the resources included here will be used to open the mind, hearts, and doors of faith communities to people with disabilities.

Just as the experiences of discrimination and exclusion affect our journeys, so do the experiences of acceptance and affirmation. Whenever I give a workshop, lecture, or lead a retreat I find that my voice, my experiences, my gifts and abilities, and my life are affirmed. What I have learned through years of study and wrestling in prayer makes a difference to many people because it

affirms their own experiences of living with limitations, disabilities, vulnerabilities, suffering, grace, healing, and faith. People thank me for putting their own experiences into words, for giving a name to the pain and anger of exclusion, for affirming that people still use biblical texts to blame them for their (or their child's) disability. They thank me for affirming that a merciful and loving God does not condemn them.

Thus, the published articles, the articles "Victim Theology" and "Changing Attitudes, Creating Awareness" and the handouts arise out of my years and years of formal study, extensive correspondence, lectures and retreats, teaching, work as a psychotherapist, and my own experiences of exclusion and inclusion in the Church. Those of us who work in the field of Religion and Disability often write about how important it is for people with disabilities to tell their stories, and how equally important it is for people in the faith communities to hear and receive our stories. Our stories are a missing but significant part of the ongoing story of the history of God in creation and are a testament to what we can teach others about living in faith in the midst of the ambiguities of this life.

The handouts which are included in this resource are intended for both people with disabilities and people wanting to minister with them. The handouts are usually used in conjunction with my seminary course, workshops, retreats, or lectures. However, most of them can also stand alone as useful resources. The handouts on *forgiveness* were written in the context of the article *A Theology of Anger When Living With a Disability*. They are also useful in addressing the various issues outlined in *The Grief Cycle*. Many of the handouts also draw on years of reading in the classics of both western and eastern spirituality. This will be seen more specifically in the handouts which give a definition of *healing* and a definition of *spirituality* as used in my writing.

Included in this resource booklet is a revised syllabus of a course I taught recently at Union Theological Seminary in New York city. This was a two credit course, taught once a month for three months. Given the brevity of class time, there was not time to cover everything that needs to be covered for total ministry. I would add ethics to a full time course because of the continuing backlash against the ADA and the effects this is having on life and death decisions for people with disabilities. However, the syllabus does attempt to give students an introduction to ministry with people with physical and mental disabilities, including mental retardation. The syllabus and the annotated bibliography serve to provide an extensive reference guide for resources that are available to churches.

There were two very significant components to this course which verified once again the importance of narrative and the power of story-telling. One of the assignments was to select a healing (or miracle) story and exegete (explain) it from the perspective of the person being healed. Students made their presentations in class and nearly every one was a powerful example of what the ministry of Jesus must have been like for those whose lives were changed. The stories came to life as students spoke about their own experience with disability, praying for healing, and the disability remaining. Unlike listening to a sermon on the healing stories by preachers who have not examined disability or healing at a deep level, one did not go away feeling the healing ministry of Jesus was irrelevant today. The stories of my students were the biblical stories come to life and they changed each of us who heard them.

The second component of the course which involved story-telling was the final reflection paper, using the questions outlined. Students had to grapple with questions of suffering and how they would minister to or with someone who questions the meaning of life because of disability. Like the general population, students were in different places in terms of understanding suffering and in asking their own questions. It was very clear, however, that while the problem of suffering was a major issue in their thinking (and lives), few of them had found the means (or taken the time) to engage in deep theological reflection or reading on suffering. Yet, suffering is a fact of life, whether or not one is disabled. As future clergy persons, they will be called upon often to speak to the questions of "why?" or "how long?"

A persistent theological and biblical theme that affects people with disabilities and their families is that suffering, in whatever form, is "God's will." I have discussed this briefly in the article "Victim Theology," where I have also mentioned how study of the *suffering of God* has been very helpful in attempting to understand the incomprehensible mysteries of suffering and evil in the world. Just as I will commend future divinity students to read further in the area of suffering and the suffering of God, I urge you, the reader, to do so as well. The reading may challenge you to expand your understanding of the images of God – images that teach us about the depth and breadth of a loving God who is present with each of us in suffering. The reading will also ask you to enter the mystery of suffering – where there may not be any answers but there will be transformation and strength for the continuing journey.

You will note that the articles and the handouts reflect the historical, biblical, psychological and medical distinction between *cure* and *healing*. Recent scientific studies on the *bodymind/soul* unity confirm this distinction. As you live with a disability or chronic illness or minister to those who do, reflect carefully on this distinction. When you pray for healing of your self or others, be open to what it means to be healed. The majority of people living with disability do not want or ask for "fixed" bodies; they pray for healing – of the wounds engendered by discrimination, the barriers of exclusion, the pain of abuse, and the negative attitudes of our communities and churches. One can live with a disability or chronic illness and know healing.

I pray that readers will find these resources of use in their own spiritual journey as well as in working to create an inclusive, welcoming, and accessible faith community.

ARTICLES:

Changing Attitudes, Creating Awareness

and

Victim Theology

CHANGING ATTITUDES, CREATING AWARENESS

This paper highlights several critical areas where churches can begin to understand the barriers of exclusion to people with disabilities. Several of the hand-outs illuminate how a faith community becomes accessible and inclusive. Our workshops also address these issues more fully for those who are interested in learning more.

ACCESSIBILITY ISSUES

"The current dominant social view in No. America is that people with disabilities and chronic illness should be invisible and powerless."¹ There is a deafening silence in our faith communities about the injustice that people with disabilities continue to face at the end of the 21st century. This is compounded by the refusal of the most religious communities to understand and accept responsibility for the barriers erected by negative attitudes, inaccessible buildings and programs, and an able-bodied theology that is too often abusive to people with disabilities. Many of the frustrations of people living with disability result because the distance between our need for inclusion and access and the religious community is too great. We are constantly caught up in adjusting to exclusion and the spiritual wounds engendered by it while the community fails in their responsibility to become inclusive.²

People with disabilities are not only physically excluded but we are psychologically and spiritually alienated from participation in the fullness of life in the faith community.³ Harold Wilke has reminded the Church for several decades that "The Ramp Is Not Enough!" The ramp may get you into a building but there is no point in being there if you are not welcome and included.

The Church has adopted all of society's prejudices of people with disabilities.

Negative attitudes exclude people from participation in the community and in the Church. Negative attitudes include fear, ignorance, patronization, and prejudice – all of which "block people with disabilities from their rightful place within the community."⁴

"These experiences are not simply inconvenience or mere documentation of human insensitivity. The right to participation in one's community touches on issues of justice and ultimately, concerns one's dignity as a child of God. Conversely, exclusion from the

community to which one belongs can cause acute suffering and can erode a person's sense of identity."⁵

Exclusion is oppressive and dehumanizing. "The categories of inclusion and exclusion touch immediately on a profound current of biblical thought. The root meaning of justice in the biblical context has to do with right relationships, with the *restoration of a situation or environment which promotes equity and harmony in a community* (Anchor Bible Dictionary).⁶ "A body that despises or overlooks its own members is an unhealthy body. A church that is not inclusive of people who are disabled is incomplete and is not yet the body of the crucified and risen Christ."⁷

In 1978, **21 years ago!**, a White House Conference for the Handicapped adopted a resolution which cited the failures of the church to be more welcoming and inclusive:

"religion and religious institutions have marginalized the handicapped, seeing them as objects of pity and mission only, failing to see them as participating members of the whole family of God."⁸

In a document written by the Evangelical Lutheran Church in America (ELCA) it was noted that

"Among the clergy as well as the laity, there exists much prejudice, ignorance, indifference, rejection, and misunderstanding of disability. This may well stem from an unawareness of their own or potential disability. Therefore, the clergy and professional church workers need to be educated to a conscious awareness of [the issues of disability.]"⁹

When I began ministry in 1984, I saw very few signs of change in the Church as a result of the comprehensive statements of either COCU or the ELCA. People with disabilities are required to accept the limitations and problems which disability imposes on them. We are also expected to accept these discriminatory barriers and negative attitudes. The normative tradition of our culture, and by extension much of the Church, is that one should be white, male, wealthy, educated, able-bodied, and able-minded. Consequently people without disabilities are not expected to accept the reality of disability in others, nor the possibility that it will probably affect them personally. Those within the Church who have attempted to do a ministry around the issues of disability are constantly inundated with reminders of more pressing needs of oppressed groups, and that disability is not an issue. Thus, there are many people with disabilities who continue to be wounded by the spiritual death-making of exclusion in and by the Church.

The Americans with Disabilities Act

The Church should be a leader in accessibility, integration, and acceptance of all people, yet it has done little to welcome, nurture or sustain people with disabilities. Negative attitudes keep people away; inaccessible buildings and programs prevent people from entering and participating. One cannot participate if shut out by inaccessible architecture within the church or by the lack of appropriate communications for hearing or vision impairments.

In 1990 the ADA was passed as a result of the disability-rights movement. This civil-rights law was designed to end discrimination and exclusion for 54 million Americans. "Churches lobbied for and received blanket exemption from the ADA, Consequently, there are many denominations which continue to condone the discrimination of people with disabilities. Nancy Eiesland writes,

Many religious bodies have continued to think of and act as if access for people with disabilities is a matter of benevolence and goodwill, rather than a prerequisite for equality and the foundation on which the church as a model of justice must rest.¹⁰

The religious community remains silent about these negative attitudes and their insensitivity toward marginalized persons. They are not pro-active for integration and accessibility for people with disabilities. *IT TOOK A LAW* to get our rights protected in society, but the religious community was exempt! One religious leader defended this exemption in this way:

[Does] the church needs its own ADA?...Should the church pass such laws? I don't think so. You see, churches already have such a law. And churches should guarantee the rights of all individuals not because of a law but because of THE law. It is called the Law of Love.¹¹

Carter Heyward has written that love requires justice.¹² James Nelson says *agape* love respects and liberates the other.¹³ This is the same liberating love which people with disabilities seek from faith communities. Yet, the experiences of people with disabilities demonstrates well that the liberating love that requires justice and offers healing may be the law of the land but it is not operative in places of worship. While society has now improved, because of a law, the Church remains inaccessible and outside the law. They promote the fourth-class (women being

second-class, ethnic minorities third class) citizenship of people with disabilities through exclusion and "victim theology."

Attitudinal and physical barriers allow the religious community to continue practicing oppression, causing the act of worship to be a "source of frustration, exclusion, and pain."¹⁴ Barriers always convey the "message that some people are more valuable or worthy than others, that disability equals incompetence and inferiority."¹⁵ In a just community there would be no inferior people, no barriers, no insensitivity to the subtle forms of oppression being perpetuated.

The ADA "clearly reflects the principles of love and justice which form the foundation of a life of faith."¹⁶ Voluntary compliance with the principles of the ADA would demonstrate that the religious community believed in the supreme worth of all of God's people and that all people had equal privileges and responsibilities in the community.¹⁷ Further, an ethic of love and justice requires acceptance of the ADA, for it makes "illegal that which was immoral."¹⁸ There are no credible arguments for ignoring the biblical law of love and justice which would end discrimination and exclusion within the religious community. (See characteristics of love.)

THEOLOGY

The various theologies of the 90's reflect the cultural and experiential diversity of our world in significant ways for bringing needed change to the Church. Yet, the voices of people with disabilities, both in and out of the Church, are absent. Our stories of struggle and oppression are not heard or received. While many theologies address classism, sexism, racism, heterosexism (and homophobia), none of them speak to handicapism. "Handicapism" refers to societal and institutional oppression and stereotyping, including negative attitudes. This omission allows theology to continue setting us apart and treating as different, unequal and invisible. It remains the task of theology to hear and include the voices of people with disabilities in the struggle against oppression. I believe Nancy Eiesland and the women who wrote *Not All Violins* are attempting to do this.

Eiesland points out that "disability has never been religiously neutral, but shot through with theological significance,"¹⁹ while Charlotte Caron's book illustrates that "...many people with disabilities have experienced the church as destructive [and] acknowledge[s] the churches' participation in that evil."²⁰ Both books point out that there are many denominations which have

a "theology of access" or written policies about access but, reject people with disabilities for ordination, reflecting an "institutional double-minded stance [of] discrimination and injustice..."²¹ Justice, in a religious sense, means that all are created equal. There can be no justice as long as the power of a few oppresses others. This is a basic denial of human rights²², which always seek justice and liberation from oppressive conditions.

In some of my own writing I have looked to liberation theology which is concerned with justice and with empowering people. "A key principle of liberation theology asserts that God is on the side of those who are oppressed and those who do not have power in society."²³ Liberation theology listens to those who suffer at the margins and who speak from the "underside." Black theology also listens to the voices of people who are oppressed and dismantles the *pie-in-the-sky-by-and-by* theology of the status quo. I also believe feminist theology has much to contribute to a theology of disability but feminists have historically refused to include the voices and experiences of women with disabilities.

While all of us can point to changes in accessibility and inclusion in society and some places within the religious community, "the prejudice, hostility, and suspicion toward people with disabilities [cannot] be dismissed as relics of an unenlightened past."²⁴ Nancy Eiseland notes, the church has sometimes been a place of inclusion, hope and liberation but, more often it had devalued and ignored people with disabilities.²⁵ In the meantime, "the church [continues] to squander the considerable theological and practical energies of [people] with disabilities who...call the church to repentance and transformation."²⁶

SPIRITUALITY

Spirituality is about our faith development and growth in moving toward God. Disability or chronic illness often cause a crisis of faith, yet it can be crisis in which our faith is deepened as a result of our questioning and wrestling with our questions about the meaning of life. We learn also to live into our questions.

Religious roots, traditions, and communities are very important to people who seek to know God and find the meaning of life. Religion is a source of hope and a sustaining factor in the lives of most human beings. Yet religious communities are places where people with disabilities are "marginalized and drastically oppressed."²⁷ Religious communities throughout America

"feel no obligation toward the spiritual needs of [people] with disabilities and seem oblivious to their omission."²⁸ Contrast this omission with the words of Morton Kelsey: "God's action is the perfect expression of love. It is a mixture of concern, caring, and action. When we love, we participate in God's way of reaching out to humankind."²⁹ God's love is inclusive; it reaches out to everyone.

Religious traditions help people find meaning and hope for their lives, but when we are shut out of the faith community, the search for hope and meaning often turns to needless despair. Charlotte Caron writes "Often we want to find hope but, in fact, despair prevails. We lose hope at certain points in our lives when we cannot see a future for ourselves."³⁰ When people with disabilities are alienated from their religious tradition, emptiness and pain stand in the place of soul and spirit. That pain is exacerbated by the soul pain of rejection, isolation, powerlessness, and oppression. Oppression hurts at a very personal level, for it is death-making to the soul.

One of the more difficult aspects of living with disability is the way society handles suffering, loss, grief and disability. Disability is not accepted as one of the many realities of life. The reality of human experience is that we live in a world where there is chaos, death, destruction, grief, loss, and disability. In general, society treats nearly all forms of physical, mental, and emotional disability as unacceptable. Consequently, the burden of *acceptance* is placed on those who are disabled. People with disabilities are expected to live with their disability and accept the barriers and limitations of people who find it difficult to accept or include us in the life of the community.

Disability is affected, for better or worse, by the spiritual dimensions of one's life. The pain of being disabled is exacerbated by the pain of rejection and struggle caused by negative attitudes toward us. The soul-pain of coming up against negative attitudes on a daily basis magnifies physical pain. When pain dominates body and soul, the need for the reconciling and healing love of others becomes critical. Yet, many faith communities fail to offer or provide this healing love. Consequently, people in pain often experience "abandonment by God" and isolation from the faith community. Too often, they decide that disability, loss, and grief invalidate any possibility of belief in God.³¹

Fr. Donald Senior, who leads a Bible Study tour to Israel for people with disabilities, writes about the suffering brought on by negative attitudes. "Very often the suffering [people] with disabilities experience is not due to [the disability itself],... Much of the acute suffering connected with...disability comes from the reactions of able-bodied [people] who treat them as less than human, or worse, ignore them altogether."³² Exclusion diminishes people. It is "often more de-humanizing and painful than [the] disability itself." It is a form of suffering we do not choose, but are left to bear alone.³³

ANGER AND ANGER AT GOD

The problems related to living with a disability are not created in isolation but within the very real context of the political and economic systems. These systems work to oppress and suppress the lives and voices of people living with disabilities. Only as we express appropriate rage at these systems will we be liberated. "Physical access and attitudinal acceptance form basic prerequisites for justice and liberation of [people] with disabilities."³⁴ Martin Luther King said that freedom was never voluntarily given by the oppressor, but that it must be demanded by the oppressed.

Having said all of this, we must turn to the use of anger to address the issues of injustice. Many of people with disabilities have known that feeling of hopeless rage at the barriers and prejudices of discrimination. Our anger at these forms of oppression must not be denied. It is a sign of hope and faith, for anger which confronts the issues causes a tension which is necessary for creative change. You may well encounter a person with a disability who is angry and who has been labeled angry – which usually means "pay no attention." Labeling someone as angry is a convenient way to dismiss their concerns and to ignore their demands to be taken seriously. Beverly Harrison writes that "Anger directly expressed is a mode of taking the other seriously."³⁵ Too often it is we who are not taken seriously so it is difficult for our anger to be heard and understood as necessary for our inclusion.

When anger is because of oppression and social injustice, we usually feel alienated from others. However, failure to express our anger at the injustices which threaten the quality of our lives results in apathy and diminishment of who we are.³⁶ People tend to feel angry and guilty when the oppressed "spill their guts." It requires courage and boldness to confront with honesty

and clarity the injustices which undermine our lives. This is a place where expressing our anger to God can protect us from apathy. (I have written about anger at God in one of my articles which is in the handbook.)

Much of the injustice we face is created and sustained by political structures. It is difficult to address an entire system in an effort to create change and effect justice. Personal communication usually has no effect, and political communication by persons with disabilities has brought too little too late for too many. We can use our anger in positive ways to insist upon change by seeking love and not destruction. This is the hard path as it makes no concessions to injustice and requires a spiritual discipline which will keep us from becoming the oppressor.

...anger can often reflect the human capacity to transcend the immediate situation, gain a new perspective and effect a change for the better, or...at least register a protest at the wrongness of that which cannot be changed.³⁷

"The gospel of anger" can be found in the anger of Jesus, who sided with the rejected of society and who spoke out fearlessly against the authorities. Jesus had no patience with those whose piety overlooked justice and mercy. His anger was to speak truth to falsehood and hypocrisy. The gospel of anger is about truth, love and justice.³⁸ This is anger which identifies and articulates clearly what is needed. It speaks out of love and seeks to bring change where it is needed.

People with disabilities experience considerable anger because they have to "expend so much energy and emotion as [they] struggle for what so many people accept with unconscious ease."³⁹ We are often angry because the necessary changes for inclusion in the Church occur very slowly or not at all.⁴⁰ Our anger is real but there are few safe places for expressing it. Anger in people with disabilities is regarded as a problem, a symptom of numerous disorders. The Church compounds this by corresponding anger with sin, rather than seeing anger as a healthy emotion that needs appropriate expression.⁴¹

Religious communities seldom address the sins of negative attitudes and injustice toward us, so people with disabilities remain excluded, angry and hurt. The anger of people with disabilities is rarely accepted. Our anger is ignored, denied, or silenced by those who tell us how we should feel and behave. This mis-understood anger then becomes another reason for

excluding or labeling us. Our society controls marginalized people by blaming the victim, and dis-empowering them by declaring their behavior as aberrant.

If we identify many of the sources of our anger from prejudice, discrimination and denial of our rights, we have three choices: "remain silent, leave, or confront."⁴² Confrontation has a high price, but these struggles are often necessary in order to eliminate the barriers which are placed in our way and which exclude us from full participation in life.

Anger can be creative when used to bring needed change, or it can be destructive if we turn it inward and succumb to the silence and invisibility that is demanded of us by oppressive structures. There are also other reasons for anger in people with disabilities, including the anger that comes with loss and grief. Many of those losses are caused by the barriers of exclusion and discrimination but, if we identify these losses and express our grief, we are labeled angry.

Anger, grief, and depression are major spiritual issues in the lives of those with disabilities but we rarely find spiritual help from the religious community in learning how to move through these experiences. There are spiritual issues which the religious community addresses in the lives of non-disabled people. However, they remain ignored in the lives of people with disabilities because non-disabled people are uncomfortable when we express the pain and anger of injustice and oppression. If people of faith were to listen and hear our frustration, they would inevitably be led to action--action that would ask them to examine their own attitudes, challenge the attitudes of those close to them, and then to work to eliminate the barriers that contributed to our pain and loss. Currently religious communities find it is politically correct to end the suffering of many oppressed peoples in this and other countries, and this is important and necessary ministry. However, it is still not politically correct to hear the voices of people with disabilities and address the barriers which continue to be death-making to our souls, but this, too is a necessary and important ministry.

Anger that is trivialized, medicalized, or silenced turns to despair and depression. People with disabilities live with lengthy and recurring periods of depression. Non-acceptance of who we are, our feelings or our reality is death-making to our souls. It isolates us, denies our humanity, and leaves us frustrated... and angry. This may cause one to be locked into a vicious cycle that leads to destructive behaviors and/or depression and hopelessness.

What many of us forget, or fail to understand, is that anger is a choice we make when faced with the struggles of living. It is a chosen reaction to humiliation.⁴³ For persons living with a disability, it may be the only appropriate choice in the face of negative attitudes and barriers of discrimination. Whenever we are prevented from achieving our goals and desires, we are frustrated and have a need to change the situation. The emotional response to frustration is anger. A response to a threat or to frustration causes bodily change, thus we feel angry." We feel anger as a reaction to injustice or frustration. Anger that we feel has the power to transform and heal our lives if we acknowledge its' presence and purpose in our lives.

- * Anger denied prevents us from being part of a community.
- * When we hide anger, we lose the power to Be, to act, and to love.
- * Anger is a protest against being treated as less than equal.
- * Anger expressed is a way of asking to be taken seriously.
- * Anger heard is being taken seriously.
- * Anger is a normal reaction to injustice or frustration.

Anger is a powerful spiritual resource for people with disabilities because anger is a motivating force for necessary change. "Action to change structures that perpetuate the violence of [any prejudice and discrimination] is essential for those who profess a liberationist faith and desire a just world."⁴⁴ William Sloan Coffin reminds us that "Anger keeps [us] from tolerating the intolerable."⁴⁵ Anger is the energy which promotes justice and pushes us toward growth.

People with disabilities question everything through entering into the struggle and exploring the rough places in the spiritual journey. Our questions keep us going. Sometimes we gain insight and wisdom; other times we ask new questions and continue the journey. We are often angry, but our anger empowers us to seek justice, confront evil, to wrestle with God and demand a blessing.⁴⁶ Expressing our anger in a community of faith where it is heard and received would enable all of us to gain health.

CONCLUSIONS

The religious community must change its attitude toward people with disabilities or they will continue to be devalued. Devalued people are treated badly; they are rejected, abused, and considered unworthy for time and friendship, thus causing further marginalization. They

become objects of pity, subjects of charity, and treated in ways which diminish their dignity, growth, competence, health, finances, and their quality of life. There are too many who continue to regard us as brave or courageous at one end, or worthy of pity at the other end. Neither extreme allows for understanding or acceptance of us as human beings in the same struggle.

Every human society has scapegoated and marginalized some group of people. The vision of a *whole* human community still challenges us: a family of God in which the stranger is welcome and treated with justice and integrity. The religious community cannot exemplify the *Imago Dei* or bear witness to the interdependence of human beings as long as we exclude people with disabilities. When we marginalize, exclude or distance ourselves from others, we narrow our own boundaries and foreshorten our own vision.⁴⁷

The religious community has much to learn from people who live with disabilities. I believe that those of us who understand suffering and who have moved into and through it, can inform the religious community in ways which will transform it. Charlotte Caron reminds the faith community that

It is not always easy to survive and the power and passion that keeps us surviving is not to be minimized. The endurance that enables survival reflects an important spiritual resource... This resource exhibits moral strength and spiritual courage...⁴⁸

END NOTES

¹ Charlotte Caron in *Not All Violins: Spiritual Resources by Women with Disabilities and Chronic Illnesses*. The Barb Wire Collective. Toronto: United Church Publishing House, 1998, p. 16.

² The Barb Wire Collective. *Not All Violins: Spiritual Resources by Women with Disabilities and Chronic Illnesses*. Toronto: United Church Publishing House, 1998, 12-13.

³ cf. Richard Steele. "Accessibility or hospitality: reflections and experiences of a father and theologian" in *Journal of Religion in Disability and Rehabilitation*, Vol. 1 (1), 1994, 20.

⁴ Senior, Donald, "Beware of the Canaanite Woman: Disability and the Bible" in Marilyn Bishop, ed. *Religion and Disability: Essays in Scripture, Theology and Ethics*. Kansas City: Sheed and War, 1995, 5.

⁵ Senior, 6.

⁶ Senior, 6-7.

⁷ Senior, 25.

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- ⁸ Anthony P. Kowalski, "The Church and the handicapped," in *America*, May 27, 1978, pp. 426-27.
- ⁹ *Disability Within the Family of God*, 22.
- ¹⁰ Eiseland, 67.
- ¹¹ Verseupt. Ted. Quoted in Fall Newsletter of the Religion Division of the AAMR, October, 1990, p.8. Note: a non-disabled man defining what people with disabilities could better define for themselves.
- ¹² Heyward, Carter. *Our Passion for Justice*. New York: Pilgrim Press, 1984,. 30-31.
- ¹³ Nelson, James. *Embodiment: An Approach to Sexuality and Christian Theology*. Minneapolis: Augsburg, 1978, 113, 117.
- ¹⁴ Gail Christy, in *Not All Violins*, 125.
- ¹⁵ Christy, 125.
- ¹⁶ Jane S. Deland, "Breaking down barriers so all may worship" in *Journal of Religion in Disability & Rehabilitation*, Vol. 2(1), 1995, p. 13.
- ¹⁷ cf. Deland, 13.
- ¹⁸ Deland, 14.
- ¹⁹ Eiesland, Nancy L. *The Disabled God: Toward a Liberatory Theology of Disability*. Nashville: Abingdon Press, 1994, 69.
- ²⁰ *Not All Violins*, 24.
- ²¹ Eiesland, 70.
- ²² Human Rights: that which is justly claimed for full development of a person, as child of God and member of the human family.
- ²³ *Not All Violins*, 31.
- ²⁴ Eiesland, 74.
- ²⁵ cf. *Not All Violins*, 24.
- ²⁶ Eiesland, 75.
- ²⁷ *Not All Violins: Spiritual Resources by Women with Disabilities and Chronic Illnesses*. Barb Wire Collective. Toronto: United Church Publishing House, 1997, 132.
- ²⁸ Blair, William A. & Dana Davidson Blair. "Ministry to persons with disabilities: can we do better?" in *Journal of Religion in Disability and Rehabilitation*, Vol. 1 (1) 1994, 5.
- ²⁹ Morton Kelsey. *Caring: How Can We Love One Another?* Paulist Press, 1981, 16.
- ³⁰ *Not All Violins*, 177.
- ³¹ Cox-Gedmark, Jan. Coping with Physical Disability. Philadelphia: Westminster Press, 1980.

³² Donald Senior, C.P., "...with new eyes" in *Stauros Notebook: Reflections on the Mystery of Suffering*, 9, 2, March/ April 1990, 1.

³³ See Senior, 1-2.

³⁴ Caron, 31.

³⁵ Harrison, Beverly W. "The Power of Anger in the Work of Love: Christian Ethics for Women and Other Strangers," *Union Seminary Quarterly Review*, 36 Supplement, 1981, 50.

³⁶ Campbell, Alastair V. *The Gospel of Anger*. London: SPCK, 1986, p.12.

³⁶ cf. Campbell, p. 55.

³⁷ Campbell, p.12.

³⁸ cf. Campbell, p. 102.

³⁹ *Not All Violins*, 37.

⁴⁰ *Not All Violins*, 46.

⁴¹ *Not All Violins*, 178.

⁴² Christ, Carol P. *Laughter of Aphrodite: Reflections on a Journey to the Goddess*. San Francisco: Harper & Row, 1987, p. 29.

⁴³ Rohrer, Norman and S. Philip Sutherland. *Facing Anger*. Minneapolis: Augsburg, 1981, p. 15.

⁴⁴ Caron, 105.

⁴⁵ Coffin, Jr., William Sloan in *Pax Christi*, Fall, 1989.

⁴⁶ See Caron, *Not All Violins*, 207.

⁴⁷ cf. *Homily Service*, August 1987, 26.

⁴⁸ Caron, *Not All Violins*, 208.

VICTIM THEOLOGY

Most of my ministry has been concerned with the issues of healing and disability. The majority of people with disabilities whom I talk with or who write me have experienced spiritual trauma from Christians who continue to use biblical and theological issues to blame and victimize persons with disabilities: 1) your faith has not made you well; 2) you are demon possessed; 3) whose sin is it that you were born disabled?; 4) suffering is God's will; and 5) the blemished shall not approach the altar;¹ These verses are used to judge, dismiss, and dis-empower us, usually shutting us out of the religious community. They also place the burden for healing on the person who is disabled, causing further suffering and continued alienation from faith communities. This is what I call "victim theology." In this paper I will attempt to set out how these scriptures are used and how such use reflects a "victim theology."²

Many well-meaning religious people encourage people with disabilities to "bear their cross" or to "offer it up." While these can be authentic religious responses for those on the spiritual journey, they are not welcome or healing responses to people with disabilities who are asking for inclusion and for recognition of their abilities within the faith community. A more appropriate, life-giving response would involve listening to our stories and responding by working with us to change attitudes. Religious leaders who

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have studied scriptures know that God is the author of the "impossible" and the "miraculous"--a boundary-breaking God who offers access to everyone, Jew and Gentile, able-bodied and disabled.³ Thus, it is all the more disturbing to know that religious leaders are frequently the defenders of limitations, barriers, and negative attitudes. Rebecca Chopp says that "...physical afflictions become elevated to virtuous suffering when... they can be spoken of as trials of obedience. Such teachings allow either one of two options for those with disabilities: miraculous healing or heroic suffering."⁴ Neither of these options are acceptable to people with disabilities.

I. Faith healing:

There are many faith-healers out there pronouncing that people who are not healed lack faith. Many healing services continue to suggest that physical and mental imperfections are the effect of sin, or that disability reflects evil. There are also those who imply that persons with disabilities chose to suffer, or that "disabilities are merely the physical manifestation of imperfections of the soul."⁵ Such pronouncements are spiritual abuse. "Spiritual abuse is the act of denying people considered disabled their full humanity. It is to treat and care for them as if they were less than human."⁶ Exclusion produces spiritual wounds: anger, low self-esteem, "...a sense of meaninglessness, despair, even loss of faith." While many people are vulnerable to these feelings, "...we are

more...likely to experience spiritual pain directly connected to our [living with] a disability, and we have a right to turn to theology for healing."⁷

Healing in the early Church involved the laying on of hands. This continues to be a powerful ministry of healing when the community lives in faith that God's will be done. The efficacy of prayer and caring also have healing effects on people. To care for another is to understand, listen to and accept the person you are praying for. When people are accepted as they are, they are empowered to move toward wholeness. Wholeness does not always mean that disability or illness will be removed from our midst. When people are accepted as they are, they are empowered to move toward wholeness. The healing ministry of Jesus was concerned with the whole person: body, mind, and spirit. This meaning has been obscured wherever persons with disabilities become "victims" of healing rather than persons whose lives are healed.

Healing occurs in many ways and at many levels of an individual. Likewise, illness and disability occur at levels within us beyond the reach of medicine. The early church saw healing as a sacrament. People seeking healing went to confession and sought forgiveness before being anointed in healing service. One entered into the sacrament of healing with a contrite heart and a deep intentionality toward God's will. Today, it is often not God's will which is prayed for but the will of others who decide that healing will mean our disability will disappear. This becomes another form of oppression as it pushes

us back into the guilt, shame and fear of stigma. This is death-making to the soul seeking a spiritual life.

There are many people who interpret faith as the prerequisite for removing the disability, which is entirely different than being healed. They are obsessed with wanting disabled bodies to be "healed," meaning fixed, turned into something society defines as "normal" because disability is seen as a basic flaw rather than a human variation. The prayers of these people place the burden of "healing" on people with the disabilities. Healing is expected to change the person with a disability into someone without a visible disability. Physical healing is not what most people with disabilities desire. Rather, it is spiritual and emotional healing---acceptance, respect, inclusion and opportunity.

Even the gospel stories suggest the distinction between *curing* and *healing*.

Donald Senior, a New Testament scholar who writes about religion and disability says

"I use the term *cure* in a strict physical sense, referring to physical transformation by which, for example, the withered arm of the man in the synagogue of Capernum is made straight. *Healing* has a more profound and comprehensive meaning, referring not only to physical transformation but to a profound spiritual transformation as well. Not all people – even in the drama of the Gospels – have access to cure; but all are invited to be healed. Even Jesus himself, one could say, would ultimately not experience cure but would be healed through the experience of resurrection."⁸

There is a distinction between healing and curing. Healing "represents a condition of one's life; "cured" relates strictly to one's physical condition."⁹ Healing is a continuing process leading one to wholeness and integration. The word "health" comes from a root

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word meaning "whole." Wholeness, or health, is not just an absence of illness or disability, it is a way of living."¹⁰ To be healthy or whole is to be integrated and at peace with oneself.¹¹ Wholeness is founded upon the transformation of our whole being--of our spiritual and psychological self, of our way of living in the world. Healing is not always about being free of illness or disability. It is often about letting go of false expectations and unrealistic hopes or dreams and becoming all you can be. Healing allows us to live with disability rather than suffer from it.

II. Disability reflects evil.

"The New Testament knows two different forms of illness. First, there is possession by an evil spirit, which has robbed the person concerned of his or her self, or centre. Secondly, there are various illnesses which are really called *weaknesses*, in which the inner centre of a person's power has been disturbed."¹²

Religious tradition has regarded people with disabilities as "either divinely blessed or damned: the defiled evildoer or the spiritual superhero."¹³ Neither characterization "adequately represents the ordinary lives and lived realities of most people with disabilities."¹⁴ Christine Smith points out that is especially true for women with disabilities, whose bodies "are the enemy and that the way to escape them is to transcend them spiritually."¹⁵ "...theology that encourages us to ignore our bodily experiences and to hate our bodies is not constructive. [The women in Caron's book write] "We are appalled

by the idea of a God who might see us as evil simply because we are women with disabilities... unable to live apart from the concrete existence we have here and now" (Caron 26).

Literature often portrays public responses to the sight of persons with disabilities in ways which suggest the person represents evil or sin. Consequently, there are many who see deformities as punishment for sin. These attitudes cause people with disabilities to become victims or scapegoats. Victims become scapegoats because they are perceived as a threat to all that had been defined as "normal" by the culture.¹⁶

Telling people that disability is the result of sin is a form of scapegoating. Rene Girard's treatment of the scapegoat shows that, historically, people with disabilities have been the primary scapegoats in our culture. Scapegoating is also a projection of the sin against us that goes unchecked. "Sin is the collective attitude of our society that rewards power, violence, betrayal of trust, lies, threats and violation of persons. ... Sin is revealed by a society that does not value persons, destroys creation, and uses power and privilege destructively."¹⁷ Violence against people with disabilities, and in particular women, is epidemic. Some statistics show that 90-95% of women with disabilities are abused and raped. They are rarely believed and few, if any, services are available to them because of negative stereotyping. The sins of those who betray, violate and abuse people with disabilities are not identified and no one is held accountable. The religious community

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should be standing with us in identifying these sins of oppression and injustice, working with us to seek justice, and praying with us for healing of the deep wounds. Instead, there is a deafening silence and it is death-making to the lives of those left to suffer alone.

III. Disability reflects sin:

In the gospel of John, the question is asked of Jesus, "whose sin is it?"¹⁸ This verse is often cited as proof that God's will takes the form of punishment brought on by the person or by the parents. Many of us would quickly reply that we do not accept this theology. Yet, the birth of a child who is disabled or the occasion of a late onset disability brings forth a common question: what did I do to deserve this?¹⁹ Even if these people are able to move beyond self-blame, the church reinforces this viewpoint with its theology of victimization--"if you have enough faith you would be healed."

The disciples were attempting to blame the man's blindness on him or his parents. This attitude relieved them of the need to respond to the man born blind in ways which heal. The disciple's failed to express their faith or that God was at work through them. Jesus did the work of faith and healing when he responded that no one sinned, thus lifting one of the many burdens projected on to persons with disabilities. Jesus says that the man born blind has the opportunity to express his FAITH by demonstrating that God is at work in his life.

IV. Suffering is God's will:

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This view holds that disability is God's will, that God is the author of suffering in order to get our attention. This view suggests an avenging God, a selfish God, a manipulating God-- images which are not useful to people living with disability. The concept of virtuous suffering is "used to promote adjustment to unjust social situations and to sanction isolation among people with disabilities... [it] encourages people with disabilities to acquiesce to social barriers as a sign of obedience to God and to internalize second-class status inside and outside the church."²⁰

Another theme of suffering stresses the goodness of the one who is disabled and encourages them to bear their suffering as they will be rewarded in heaven. This is "pie-in-the-sky-by-and-by" theology, intended to silence complaints or expressions of need. This is also a theology of oppression, which marginalizes people with disabilities and renders them invisible. This theology is used by the powerful to "silence the voices of the powerless and maintain the positions of the powerful."²¹

There are many people who suggest that God gives pain and suffering as a way to find meaning in life. Whenever theology or New Age philosophy are used to provide vapid answers to complex issues, God and the spiritual quest for understanding are trivialized and there is victim blaming. For the last several years I have studied extensively the suffering of God as found in both Christian and Jewish literature. This reading has enabled me to understand the suffering and death of Jesus in ways which

liberated me from the trite advice that disability, oppression, injustice, and marginalization were my "cross to bear." Instead I discovered the deeper truth of Elie Weisel's story about the child who was hung in the courtyard of their prison camp. His neighbor asked him, "where is your God now?" Weisel answered, "There. God hangs there with the child." There are those who think Weisel despaired of God at this point. For me, it is a vivid reminder of God's suffering and of God's presence in human suffering.

The image of the "crucified God" expresses the suffering-love of God. Whitehead calls God "the suffering companion who understands." In order to understand our reality, and be present to us, God suffers with us. The God who suffers is thus a God who is disabled. God enters into our reality in order to know it. The image of a "disabled God" is meant to remind us that God's power is limited, thus God is able to be disabled, and to suffer. Burton Cooper writes that "Jesus on the cross is God disabled, made weak and vulnerable to worldly powers because of the perfection of divine love."²²

Viktor Frankel's book, *Man's Search for Meaning*, is a classic example of how people found meaning in the aftermath of the most meaningless and senseless suffering the world has known. Frankel demonstrates with his life that deep faith and spiritual connectedness to God enable one to grapple with meaninglessness and find the strength and courage to enter the mystery of suffering, and find God. This is theology that does not blame God or others for suffering. Rather, this is a theology that says we are not left

alone to suffer. God is with us, and in embracing both God and life as it is, we will grow deeper in our understanding of God's will for our lives.

Life with a disability is not all suffering. Nevertheless, those of us who live with disability, who have plumbed the depths of our experiences of grace and limitation, of loss and survival, of grief and joy, of oppression and crying out, have much to bring to the theology and spirituality of seeking, finding, and knowing God. It is simply of matter of acceptance and inclusion, of being welcomed into the community, where our stories and experiences are heard and received as part of the ongoing history of God in the world.

Charlotte Caron suggests that our endurance is a spiritual resource which others can learn from:

...endurance shows that the human spirit is tough, that it will hang on and not say no. Endurance enables people to lead complex and meaningful lives in the midst of incredibly dehumanizing conditions. ...[Our ability to hang on] shows a self exercising responsibility, a self of often tremendous moral courage.²³

V. Disability as mission for charity.

The fifth theological interpretation of disability is that of mission. People with disabilities are regarded as objects, in need of charity. Charity "neglect[s] the social and political needs of people with disabilities"²⁴ and leaves them further isolated in the struggle to find inclusion. When you are the object of charity, others decide what you need and assume that they know what is best for you. You are not allowed to articulate

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your real needs or to have a say in decision-making about your life. Objectifying people with disabilities is a political act because it is a way of controlling us and it prevents us from being seen as real "people with interests, opinions, needs, desires, emotions or expectations."²⁵ Nancy Eiesland writes

As long as disability is addressed in terms of the themes of sin-disability conflation, virtuous suffering, or charitable action, it will be seen primarily as a fate to be avoided, a tragedy to be explained, or a cause to be championed rather than an ordinary life to be lived. As long as disability is unaddressed theologically or addressed only as a special interest perspective, the Christian church will continue to propagate a double-minded stance that holds up the disabled as objects of ministry and adulation for overcoming the very barriers that the church has helped to construct.²⁶

CONCLUSIONS

The stories of healing in the New Testament are stories that need to be appropriated by each of us as our own healings. Jesus heals the whole person, their place in life and in the community, and helps them to find their own way of life. When Jesus raises the sick, "health, life and confirmation of their being were restored to them."²⁷ They were no longer solely dependent on others but became their own person, with their own language, dignity and their own story.²⁸

Healing in the NT has far-reaching consequences, extending well beyond being able to hear, see, talk or walk again. Rather, one finds support and is able to stand again,

social relations are restored, patriarchal exclusions are broken, peace is bestowed, and righteousness is achieved (forgiveness of sins).

People who live with disabilities and/or chronic illnesses and who have experienced healing in some way often experience conflict with “healthy” people. Healing transforms people and sometimes other people may not recognize the transformation. They do not know that the person who has been healed has been on a journey that has been life-changing.²⁹ We see this in many of the Gospel stories where the person who has been healed is instructed to go and show him or her self to the priest—who had the power to declare a person clean and could permit their return to the community. The power of prayer and the sacrament of healing are intended to restore us to wholeness. Wholeness does not always mean that one's disability or illness will be removed. It does mean that we learn to find meaning in them, and integrating our experience into the totality of our life. We do live with disability, and that should be the message of a lived out hope. Faith lived out may be most visible in persons with disabilities who endure the struggles, accept the challenges, and continue to face life in all its ambiguity.

Those of us who live with disability, who have plumbed the depths of our experiences of grace and limitation, of loss and survival, of grief and joy, of oppression and crying out, have much to bring to the theology and spirituality of seeking, finding,

and knowing God. It is simply a matter of acceptance and inclusion, of being welcomed into the community, where our stories and experiences are heard and received as part of the ongoing history of God in the world.

Walter Wink has written that the world is divided into two groups: "those who are aware of their disabilities and those who are blind to them. Those who are more obviously disabled or who have been forced by life to come to terms with their disabilities have a prophetic task to play in awakening [others] to the uniqueness of who we are under God." Wink suggests that others may discover their "own most divine possibilities" by turning to us "for guidance, leadership and wisdom."³⁰

If you are a person with a disability, tell your story to your faith community, persisting until you are heard. Telling our stories is holy work; it is making sacred that which has been painful for too long. If you are a person without a disability, find opportunities to listen to our stories in your community. Encourage people with disabilities to be visible and work with others to make your community a welcoming and healing place for all people, a place where God's love, mercy and justice counteract all injustice and victim theology. Amen.

END NOTES

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- ¹This law from Leviticus is used frequently in denying Ordination to persons with disabilities.
- ²This paper is a revision of the article published in *The Disability Rag ReSource*, found in this collection.
- ³Donald Senior, C.P. "...with new eyes" in *Stauros Notebook: Reflections on the Mystery of Suffering*, March/April 1990, p. 3.
- ⁴Foreword in Nancy L. Eiesland, *The Disabled God: Toward a Liberatory Theology of Disability*. Nashville: Abingdon Press, 1994, p. 11.
- ⁵Owen, Mary Jane. "Reflections on Disability and Organized Religion" in *A Positive Approach*, Winter 1992-93, pp. 20-22.
- ⁶Brett Webb-Mitchell, "The spiritual abuse of people with disabilities" in *Journal of Religion in Disability & Rehabilitation*, Vol. 2(1), 1995, 63.
- ⁷Charles Gourgey, "Disability and destiny" in *Journal of Religion in Disability & Rehabilitation*, Vol. 2(1), 1995, 75.
- ⁸Donald Senior, O.P. in *Religion and Disability: Essays in Scripture, Theology and Ethics*, Marilyn E. Bishop. Ed., Kansas City: Sheed and Ward, 1995, p.13.
- ⁹Siegel, Bernie S. *Peace, Love and Healing*. New York: Harper & Row, 1989, p. 117.
- ¹⁰David Eisenberg in Bill Moyers, *Healing and The Mind*. New York: Doubleday, 1993, 308.
- ¹¹Moyers, Bill. *Healing and the Mind*. New York: Doubleday, 1993, p. 189.
- ¹²cf. Seybold, K. and Mueller, U. B. *Sickness and Healing*. Nashville: Abingdon, 1981, p. 126ff.
- ¹³Eiesland, 70.
- ¹⁴Eiesland, 71.
- ¹⁵Christine M. Smith. *Preaching as Weeping, Confession, and Resistance: Radical Responses to Radical Evil*. (Louisville: Westminster/John Knox), 1992, 55.
- ¹⁶c.f. Girard, Rene'. *The Scapegoat*. Baltimore: The John Hopkins University Press, 1986.
- ¹⁷The Barb Wire Collective. *Not All Violins: Spiritual Resources by Women with Disabilities and Chronic Illnesses*. Toronto: The United Church Publishing House, 1997, pp. 115-116.

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18. John 9. The issue here is *spiritual blindness*. However, before preaching on this text I suggest reading: Kathy Black. *A Healing Homiletic: Preaching and Disability*. Nashville: Abingdon, 1994.

19. cf. *Not All Violins*, 25.

20. Eiesland, 72-73.

21. *Not All Violins*, 27.

22. Cooper, Burton. "The Disabled God" in *Theology Today*, July (1992): 173-182, 176.

23. *Not All Violins*, 104.

24. Eiesland, 74.

25. *Not All Violins*, 59.

26. Eiesland, 75.

27. Moltmann-Wendel, Elizabeth. *I Am My Body: A Theology of Embodiment*. New York: Continuum, 1995, p. 71.

28. Moltmann-Wendel, 71.

29. See Jean Shinoda-Bolen, *Close to the Bone: Life-Threatening Illness and the Search for Meaning*. New York: Touchstone (Simon and Schuster), 1998.

30. Walter Wink, "Holy and without blemish before God: Disability and normalcy" in *Auburn Views*, Spring 1993, p. 6. Portions were taken from his book *Engaging the Powers*, Fortress press, 1992.

Seminary Course Syllabus

Disability, Spirituality and Healing: Theological, Spiritual and Biblical Perspectives for Ministry.

Dr. Nancy Lane

INTRODUCTION TO THE COURSE

This course is designed to prepare students to minister with people with disabilities in a "caring and inclusive" church community. To be welcoming and inclusive usually requires the personal and communal transformation of individuals as well as institutions. Transformation is about shifting attention from diversity to inclusivity, from segregation to integration, from counter-dependence to interdependence.

There are well over forty million Americans with some disabling condition in America, with a diversity of social and pastoral needs. This means that one in four church members are disabled or have a family member who is disabled. However, this 25% of church members are often invisible or absent from congregational life. People with disabilities are often overlooked in parish ministry because of this "invisibility." Their need for access to the community of faith is rarely understood or addressed. The Church has been one of the most resistant institutions in becoming accessible. Too often access is defined as architectural adaptation, rather than being properly understood as an issue of faith and justice—requiring an attitude of welcome and inclusion.

Attitudes cannot be legislated. However, our theology is reflected in the ways in which we live out our faith—which is further reflected in our attitudes toward people who are categorized as "different" in our society. "Attitude adjustment" is never a simple matter as human beings are formed by the beliefs, attitudes, and fears of family and friends, as well as their own life experiences. These contributing factors often include the myths and negative images and attitudes of our culture toward people with disabilities.

We will explore the biblical, theological, spiritual, liturgical, hermeneutical and pastoral care issues associated with ministry with people with disabilities and their inclusion in the faith community. Students will examine the issues of access (attitudes, communications and architecture) to gain understanding of the social resistance to inclusion. Old and New Testament scriptures will be examined as a means of reflecting on contemporary theological-pastoral attitudes about disability. We will look at several of the gospel healing stories from the perspective of people with disabilities and people who have been healed. We will analyze the relationship between faith and healing (both in traditional thinking and in the current literature related to studies of the *bodymind* connection), issues of healing vs. cure, illness vs. disease, and the emerging theologies of disability.

We will focus on (1) the roles of faith, spirituality, prayer, and healing as it relates to issues of disability, (2) the theological and psycho-spiritual issues of living with disability and, (3) how theology, ministry and scriptures impact these issues. Areas to be examined also include: the cycle of grief and depression as stages of death and resurrection; a theology of anger as social protest and faith development; the meaning of suffering and healing in the spiritual journey; finding God's strength in weakness; healing, wholeness and transformation vs. curing. Class texts and resources will include autobiographical, theological, psycho-spiritual and literary writings and films.

Course Content

The focus of this course will be concerned with biblical, theological, pastoral, and practical aspects of ministry.

- Accessibility: Attitudinal and Architectural
- A theology of ministry with people with disabilities.
- Pastoral care with people with disabilities or their families.
- Spirituality and disability.
- Healing and disability.
- A theology of suffering
- Developing sensitivity to the language of disability and the labels of our culture.
- Ethical issues (if we have time).

Components of this course will include both lecture/didactic, experiential, and theological reflection. The theological reflection will occur both in class and through journal writings. The intention is for students to integrate the didactic and experiential components for the purposes of ministry and pastoral care.

The issues of disability are very important to anyone in ministry. How one treats people with disabilities and how a parish includes and welcomes them tells much about how we live out the Gospel message. Secondly, ministry always involves being present to the pain, suffering, and vulnerability of our parishioners. If we are afraid of our own vulnerability and limitations, then we will be uncomfortable and unavailable to the experience of others. Thus, this course is not about a marginal ministry but, rather, is a significant paradigm of ministry. Wrestling with the issues of disability, suffering, and healing, is to wrestle with the very human questions about the meaning of life.

While this course can be seen as an area of "specialized ministry," our intention is to highlight the central questions and issues ministry in general. We intend to interface the issues of ministry with the more general issues of disability. These issues will be placed within a theological context for the purposes of understanding suffering, healing and spirituality—for those with whom you minister and for yourself. Theological reflection will be used as a means of integrating this understanding in your daily life; that is, you are expected to gain more than a purely intellectual understanding from the content of this course.

Due to the brevity of this course, we will not be dealing with specific *disabilities*. The readings cover the experiences of people with a variety of disabilities. When I refer to *disability* I am being inclusive of persons with major, chronic illnesses; physical, mental, and emotional disabilities; vision and hearing impairments. I am not referring to people who are alcoholic, HIV infected, obese, anorexic, or dealing with phobias. This is not meant to minimize in any way the seriousness of those issues. Rather, this course is designed to deal with disabilities as understood in the biblical-historical context—disabilities which have historically been seen as the result of sin, evil, or demonic possession. A note regarding Deaf people is also made under the assignments.

Secondly, there are a wide range of issues which could be dealt with in a course on disability—ranging from Christian Education issues to guardianship to ethical considerations. Since it is impossible to cover everything in our brief time together, I have chosen to address the more fundamental issues of ministry and theology—how we understand God's will and how God works in and through suffering, illness, disease, spiritual life, and healing. This includes getting at the affective aspects of this course—what are your feelings as you read, see a film, and interact with people with disabilities? How do these feelings affect your understanding of ministry and how will they inform your ministry?

COURSE OBJECTIVES

1. To understand how the risen Christ embodies the brokenness of people who live with disabilities, disease or chronic illness.
2. To recognize why the Body of Christ is incomplete wherever people with disabilities are not included.
3. To understand the healing texts of the gospels from the perspective of healing and people with disabilities.
4. To be able to incorporate ideas and strategies for ministry that will enable you to develop inclusive and welcoming faith communities wherever you serve.
5. To be able to identify people with disabilities in your own faith community and in institutions where you study or work.
6. To be able to help people find meaning and purpose in life in the midst of loss and suffering.
7. To integrate the learning from this course in ways which prepare you for a pastoral ministry of presence.
8. To foster your academic, professional, spiritual and personal growth.

PRIMARY TEXTBOOKS

Students are expected to read all six of the primary textbooks.

Kathy Black. *A Healing Homiletic: Preaching and Disability*. Nashville: Abingdon, 1994.

Nancy L. Eiseland, *The Disabled God: Toward a Liberatory Theology of Disability*. Nashville: Abingdon, 1994.

Judy Griffith Ransom. *The Courage to Care: Seven Families Touched by Disability and Congregational Caring*. Nashville: Upper Room Books, 1994.

The Barb Wire Collective. *Not All Violins: Spiritual Resources by Women with Disabilities and Chronic Illnesses*. Toronto: The United Church Publishing House, 1997.

Brett Webb-Mitchell. *Unexpected Guests at God's Banquet: Welcoming People with Disabilities into the Church*. New York: Crossroad, 1994.

Carter, Rosalynn. *Helping Someone with Mental Illness*. New York: Random House, 1998

The following item will also be distributed to students:

Faith Communities and Inclusion of People with Developmental Disabilities. Mair Hall and Philip Lambert. Syracuse, NY: Center on Human Policy, April 1998.

The following book is an invaluable resource for ministry. It is **required** for the course. You will need to order this resource on your own. Please do this immediately.

Dimensions of Faith and Congregational Ministries with Persons with Developmental Disabilities and Their Families: A Bibliography and Address Listing of Resources for Clergy, Laypersons, Families and Service Providers. Cost \$10.00

The Rev. Bill Gaventa
The Boggs Center - UAP
P. O. Box 2688
New Brunswick, N.J. 08903
Phone: 732-235-9304 Fax: 732-235-9330

ARTICLES

A packet of articles will be on reserve in the library. These are **recommended** reading and you will be expected to cite new learning from at least **six** articles in the final paper.

ON RESERVE - for further exploration of specific issues.

Frederick Borsch. *Power in Weakness: New Hearing for Gospel Stories of Healing and Discipleship*. Philadelphia: Fortress, 1983.

Nancy L. Eiseland and Dan E. Saliers, eds. *Human Disability and the Service of God*. Nashville: Abingdon, 1998.

Stewart D. Govig. *Strong at the Broken Places: Persons with Disabilities and the Church*. Louisville: Westminster/John Knox, 1989. **Excellent exploration of biblical themes.**

John A. Sanford. *Healing and Wholeness*. New York: Paulist Press, 1977.

Klaus Seybold and Ulrich B. Mueller. *Sickness and Healing* (Biblical Encounters Series). Nashville: Abingdon, 1978.

OTHER MATERIALS ON RESERVE

Please refer to these materials for very practical information on disabilities and ministering with people with disabilities.

All People: Disability and Today's Church. CHAD. October 1990, 52.

Accessibility Materials. Board of Church Extension of Disciples of Christ.

Is Our Theology Disabled? A Symposium on Theology and Persons with Handicapping Conditions. Health and Welfare Ministries Div., General Board of Global Ministries, The United Methodist Church, 1982.

National Organization on Disability.

Loving Justice: The ADA & The Religious Community
From Barriers to Bridges: A Community Action Guide for Congregations & People with Disabilities.
That All May Worship: An Interfaith Welcome to People with Disabilities.

Pathways to Partnership: Awareness & Resource Material on Ministry & Mental Illness
Pathways to Promise, 5400 Arsenal St, St. Louis, MO. 63139

Religion in Disability & Rehabilitation Journal. Vol. 1, 2 1994.

Supportive Care in the Congregation. Dean Preheim-Bartel and Alfred H. Neufeldt.
Mennonite Central Committee, 1986.

The Gift of Hospitality: Opening the Doors of Community Life to People with Disabilities. Mary O'Connell. Center for Urban Affairs and Policy Research, Northwestern University and Department of Rehabilitation Services, State of Illinois, February 1988.

Toward Full Compliance with the Provisions of the Americans with Disabilities Act in The Christian Reformed Church in North America
The Committee on Disability Concerns, 1993

We Don't Have Any Here: Planning for Ministries with People with Disabilities in Our Communities.
Winifred Anderson, Toby Gould, James L. Paul. Discipleship Resources, United Methodist Board of Global Ministries, 1986.

FILMS AND DOCUMENTARIES:

Two of the following films must be watched. Cite new learning from these films in your reflection paper.

Hauerwas, Stanley: *The Church and Mentally Handicapped Persons.*

This is a challenge to seminary' and seminarians that questions the value of biblical studies and asks what it means to be a Christian working to bring the kingdom of God into the world. This is a thought-provoking talk and the most important one of the five listed here.

Saliers, Don. *Human Disability and the Service of God.*

Non-disabled liturgical scholar discusses how people with disabilities anoint others by their touch, etc.

Senior, Donald. *Beware the Canaanite Woman.*

New Testament scholar discusses the place of people with disabilities in the Church.

Let My People In: Realizing the Dream of Inclusive Worship. Disability Committee of the Diocese of New York (Episcopal).

Opening Hearts, Minds and Doors. Board of Church Extension (Disciples of Christ).

Dialog '88 with Parker Palmer and Nancy (Chaffee) Lane.

The other films listed below are recommended as additional ways of exploring the issues if you have the time and inclination.

The Elephant Man
Mr. Holland's Opus
Harold and Maude
The Fisher King
The Sound & Fury
My Left Foot.
Children of a Lesser God
Rainman
Forest Gump

BIBLIOGRAPHY

A comprehensive bibliography will be provided for your exploration of specific areas of interest. **You are expected to cite new learning from at least one additional book from the bibliography in your final reflection paper.**

CLASS SCHEDULE

Week I:

A. Introductions: Who are you? Who am I? Why are you here? What do you want to take from this class? What are your theological questions in reference to disability, suffering, healing, and spirituality?

B. Introduction to Disability issues, theology, ministry, pastoral care.

C. Theology: The problem of suffering, evil, injustice, oppression.

D. Spirituality: Exploring issues of grief, pain, anger at God, forgiveness

Week II.

A. Healing: Defining Healing:

B. Look at gospel texts. **Each student is to come prepared to give a presentation on one text from the perspective of a person with a disability—the person in the text who was healed. Texts are listed under assignments. You must also hand in the written paper for this presentation.**

Week III.

- A. Pastoral Care, Preaching, and professional ministry with persons with disabilities
- B. Implementing the practical aspects of ministry with people with disabilities in a parish: building and program access, communications, inclusive worship, outreach.

COURSE REQUIREMENTS

1. Class attendance at all three classes (100%) is expected unless there are extenuating circumstances and you have received my approval. Students are expected to read carefully all assigned readings, talk with one or more persons with a disability, and visit a church which is actively carrying out a ministry of inclusion.

CLASS ASSIGNMENTS

1. POLICY ON THE USE OF LANGUAGE: Students are expected to read this and remember it when writing any paper for this class.

The language we use reflects our theology – how we understand one another in the image of God. Language has a power that we must never underestimate, to shape, teach, and transform our lives together. Most of us have learned to be sensitive to language use with regard to gender, race, age and social class. It is equally important to be sensitive to language use in regards to people with disabilities. **Please use person-first language** (vs. disability identification) and **avoid all euphemisms**. A brief discussion and hand-out about language will be provided to students.

1. Due **Week II - FOUR ANNOTATIONS**: 1 page (double-spaced, standard margins) annotation for each of three of the designated text books and one book of your choice from the bibliography. (**Note: there are 6 required texts to read. Choose 3 of the 6 to write annotations for this part of the assignments.**) Annotations should include a) bibliographic information (title, author, publisher, date, no. of pages), b) a statement of a central hypothesis, c) one implication of the reading for a specific aspect of your ministry, d) one question raised by you as a pastor. **Please use this outline for each annotation!**
1. Due **Week II: WRITTEN PAPER**. Choose one of the healing texts from the gospels to exegete and present in class **from the perspective of the person who is disabled and healed.** You must hand in a written paper of your presentation.

Mark 2:1-12; Luke 5:17-26; Mt. 9:1-8 - The paralyzed man
Mark 3:1-6; Luke 6:6-11; Mt. 12:9-14 - The man with the withered hand
Mark 5:25-34 - The hemorrhaging woman
Mark 7:31-37 - A deaf man with a speech impediment
Mark 8: 22-26 - Blind man of Bethsaida
Mark 10:46-52; Mt. 20:29-34; Luke 18:45-43 - Blind Bartimaeus
Luke 8:26-39; Mark 5:1-20; Mt. 8:28-34 - unclean spirits
Luke 9:37-43; Mt. 17:14-21; Mk. 9:14-29 - the boy with epilepsy
Luke 17:11-19 - The ten lepers
John 5:1-15 - The sick man and the pool of Beth-zatha
John 9:1-41 - The man born blind

4. **Experiential component - WRITTEN PAPER.** This component is intended to help students bridge theory and practice so that they are able to integrate concern for the place and care of people with disabilities into their understanding of parish ministry. **This is ONE assignment. Read each of the following criteria carefully and write ONE paper on your visit to a church and your interview with a person with a disability.**

A. Visit a church **which is involved with ministry with people with disabilities** for the purposes of gaining an understanding of how various churches have addressed the issues of accessibility, inclusion, and welcome. This will also give you an opportunity to be in touch with your feelings, assumptions, and any stereotypes about people with disabilities.

If your visit is to another parish other than your own, can you describe how your own faith community ministers with people with disabilities:

Are they active participants in the full life of the church?
Are there separate, special programs? If so, do you know why?
Is your church welcoming and inclusive in their attitudes?
Is your church accessible? In what ways? What more needs to be done? Why do you think it has not been done?

B. Interview and listen to the stories of one or more people with a disability; compare them to *your* story; seek the common ground in *our* stories.

A NOTE ABOUT DISABILITIES WHICH QUALIFY FOR THIS INTERVIEW. READ CAREFULLY.

1. The person must have a disability which has interfered with normal access to the church/synagogue and/or to full participation in the life of the community: someone in a wheelchair, or who uses a walker, braces, cane; someone with mental illness (not an anxiety or panic disorder); someone who is developmentally disabled; someone who is blind; someone who is elderly and finds it difficult to access the building, read the bulletin, or hear the service.
2. Unless you are Deaf or Hearing-Impaired, please do not interview someone who is. People who are Deaf do not consider themselves disabled. This is a cultural issue for them.

You may have to inquire from the church who to interview. The pastor or others may tell you they have no one who is disabled in their church. Check with the church secretary: s/he will probably know of someone who stopped coming because of a disabling condition. ***Remember that one-fourth of every congregation is disabled in some way and are probably invisible because of access/attitudinal issues.***

C. **Write an informal 4-5 page paper about:**

- Your Church visit.
- Your interview—answering as many of the questions listed below as possible.
- Your pastoral response to any issues which you identify in the church's accessibility or in the interview.

Due the first week after mid-term break.

QUESTIONS TO CONSIDER FOR YOUR CHURCH VISIT:

Is the church accessible? In what ways? Is anything more needed?
If it is not accessible, what is the attitude toward making it accessible?
Are people with disabilities active participants in worship and the life of the community?

If your visit was to another parish other than your own, can you describe how your own faith community ministers with people with disabilities:

Are they active participants in the full life of the church?
Are there separate, special programs? If so, do you know why?
Is your church welcoming and inclusive in their attitudes?
Is your church accessible? In what ways? What more needs to be done? Why do you think it has not been done?

QUESTIONS TO CONSIDER FOR YOUR INTERVIEW:

- How do their stories enable you to see God in the person with a disability?
- How has their spirituality been affected by their experiences of church or faith?
- What were the issues of their lives that may affect their spirituality? Pay particular attention to the issues of:
 - their sense of the church's history toward people with disabilities
 - what Christians (including clergy) said to them that excluded or included them
 - how scripture has been used to blame or heal their wounds
 - experiences in which others attempted to heal them. ***Be careful and be sensitive to whatever is said.***
 - how they see the healing miracles
 - issues of abuse: physical, sexual, emotional or spiritual. ***If this comes listen and try to be present. You do not have to have answers or solve the issues. Do not leave without acknowledging the privilege of being present with them to hear their stories and affirming the pain of their experiences.***
- Were you able to identify the needs and gifts of the people you met?
- What is your reaction to their needs? Can you identify what it means to you personally?
- How would you, as a pastor, address these needs or areas of concern?
- How easy was it for you to identify their gifts? How would you receive them if you were the pastor?
- How did talking with this person(s) change or challenge your assumptions or stereotypes?
- Did this encounter raise questions for you that you would like to see addressed in class?

5. Reflection Groups: We will take some time during the afternoon sessions to reflect together on how the readings and your experiences affect your understanding of ministry and theology. What is happening to you as a person and pastor? What have you seen or experienced that has changed you in some way? What does it mean to you? How will you integrate your learning into your own life? Into your ministry?

As preparation for your reflections I expect students to take time to carefully evaluate themselves honestly and clearly. This means being conscious of your feelings, thoughts, and reactions to the various issues of disability. What do issues are raised for you in your encounters with people with disabilities? Can you identify any fears? Are you afraid of limitation and vulnerability? Do you know why?

Not all of your thoughts may be appropriate for group reflection. I expect students to discern carefully what they feel comfortable discussing in a group. Your journal will be a good place for other thoughts and reflections. You may also make an appointment to speak with me directly about issues that are raised for you and which need further attention.

6. THEOLOGICAL REFLECTION PAPER - Due by _____.

YOUR PAPER WILL HAVE TO BE MAILED TO ME OR SENT BY "CONNECT" IF WE ARE USING THAT PROGRAM. Please include a Self-addressed Stamped Envelope with adequate postage!

Write a theological reflection paper, 12-15 pages in length and double-spaced, drawing on the readings, lectures, parish visit, reflection group. **Cite new learning from the texts, at least 6 articles, 2 films, and one book from the bibliography.** Describe the implications this course has for you as a person and as a pastor, using the following questions:

- How has it contributed to your understanding of spirituality?
- Reflect on the problem of suffering and how you would respond pastorally to someone who questions God and seeks to understand the meaning of suffering.
- How has this course prepared you to do pastoral counseling with people who are disabled, become disabled suddenly from accident or illness, have a child born disabled?
- Reflect on the meaning of healing when disease, chronic illness, or disability remains.
- How will you implement ministry with people with disabilities in your parish? How will you address the objections and/or various barriers that exist in a parish?

CRITERIA FOR EVALUATION OF STUDENTS

Obviously class attendance, completion of reading assignments, group reflections and your theological paper are expected. These are the components which make up the required grade for completion of the course.

I will provide a written evaluation of each student at the end of the course based on academic growth, professional growth, spiritual growth, and personal growth as a result of this course.

Hand-outs Used for Courses, Retreats and Lectures

ARE YOUR CONGREGATION AND CHURCH ACCESSIBLE?

I. IN MINISTERING WITH PERSONS WITH DISABILITIES:

Do you know...

who is disabled

what disability is

where these persons are in your community

why some are invisible to you

why some of your members no longer come

II. WHAT IS YOUR ROLE?

Do you have a committee to gather information about members who have disabling conditions

Is your church accessible:

- Welcoming and inclusive attitudes
- Ramps and/or elevators
- Every area accessible
- Loud speaker system
- Large print worship or service books, Hymnals, and bulletins
- Wheelchair placement via pew cuts
- Accessible bathrooms
- Signed services if appropriate
- Brailled materials if needed
- Adequate lighting

III. LAY PASTORAL CARE:

Are you able to consider providing the following in relationship to persons with disabilities and their families:

- Respite care to relieve family caregivers
- Guardianship (by church)
- Support for families through bureaucratic maze
- Advocating for a place in society for people with disabilities
- Involvement with other churches in your community for resources

IV. DO YOU KNOW ...

- You already have the skills needed for working with people who are disabled.
- This is a ministry of you and your congregation.
- Clergy can be angry with God.
- How to make God present to people with disabilities or their families?
- You can provide a theological perspective for understanding suffering as a universal experience.
- You can help families learn to live with disability through finding acceptance and support in the life of the Church.
- How to reach past the isolation and alienation of people with disabilities and draw them into community with your congregation?

V. ARE YOU PREPARED TO ...

- Support parents
- Give them permission to be angry
- Help them grieve
- Find a support group
- Encourage them to bring their child for the sacraments

VI. WHAT WE CAN DO FOR YOU:

- Preach
- Create sensitivity & awareness in your congregation
- Provide information about total access
- Provide information about Christian Ed materials
- Provide workshops on:
 - ⇒ ministry with families
 - ⇒ ministry with persons w/ disabilities psychology/theology of disability
 - ⇒ the spirituality of disability
 - ⇒ what is acceptance: the double bind
 - ⇒ what is healing and who is it for

A HEALTHY RELIGIOUS COMMUNITY TAKES DISABILITY IN STRIDE.

The behavior of a healthy community would reflect the following:

- Negative attitudes disappear as people embrace and practice a liberatory theology whereby all people are welcomed and included as equals.
- Stereotyping is non-existent. In listening to the stories of people with disabilities, the community comes to know us as people with real feelings, needs, desires and abilities.
- Diversity is more desirable than homogeneity.
- Injustice and oppression come to end as all barriers are removed and non-disabled people are held accountable for the sins of discrimination, prejudice, exclusion, violence, and marginalization.
- Spiritual growth deepens in the community as they learn the significance of recognizing humanity's interdependence.
- Attitudes of pity, condescension and charity are replaced with a spirituality of compassion; no one is objectified and there is mutuality in giving and receiving.
- Inclusion is a reality and not a resolution or mission statement confined to paper and routinely ignored.
- The spiritual needs of people with disabilities and their families are addressed with concern for wholeness and healing, rather than blaming and victimization.
- People with disabilities will live without violence and their abuse will not be tolerated. They will be listened to and help provided as appropriate to facilitate justice and healing.
- The community respects people with disabilities—their lives, experiences, and wisdom.
- The gifts, abilities, and insights of people with disabilities are welcomed and received.
- The lives of people with disabilities will have value.
- We will be invited to tell the truth about our lives and our experiences.
- We will have the power to make decisions about our lives.

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- We will not experience being silenced, dis-empowered, or otherwise marginalized.
- We will be allowed to name ourselves and our experiences (self-identified and self-defining) rather than being defined by others.
- Compassion and respect will accept that we cannot do some things, while celebrating with us the things we can do.
- Communities will routinely accommodate our needs.
- People will stand with us as advocates when necessary.
- People will welcome our friendship and enter into lasting relationships with us so that we can move out of exclusion and isolation.¹

CHARACTERISTICS OF GOD'S COVENANTAL LOVE

These are the characteristics which would define a religious community as inclusive.

1. God's binds us together as members of a covenantal community.
2. God's love affirms the worth and value of each member without exceptions.
3. When God's love is reflected in the life of a community, covenantal love will be extended inclusively.
4. The community will seek to meet the basic needs of every member.
5. They will remember that God's love is steadfast and eternal.
6. They will reflect God's reconciling and forgiving love.²

¹ The Barb Wire Collective. *Not All Violins: Spiritual Resources for Women with Disabilities and Chronic Illnesses*. Toronto: United Church Publish, 1998.

² Joseph L. Allen. *Love and Conflict: A Covenantal Model of Christian Ethics*. Nashville: Abingdon Press, 1990, p. 61.

AESTHETICS OF ASSESSIBILITY

Accessibility into our churches is how we say "Welcome!" to persons who happen to live with disability. But 'the ramp is not enough.' It is imperative that we create an atmosphere of beauty and form that convey a positive message towards accessibility and those who require it. Therefore it is critical that our ramps and entrance ways complement the architecture and decor of our church grounds and buildings. For instance, materials should complement and not detract from the original building materials. Care should be given in choosing materials which do not require excessive maintenance and which will last. It is of absolute necessity to use the correct scale for ramps so they insure the desired accessibility. When ramps are long or have many turns, the use of landscaping to enhance them is highly desirable. This may require some creative thought and attention to detail. Functional use is only one goal in accessibility; maintaining or augmenting the beauty and integrity of the church is a primary goal. This same consideration should be given to your use of accessibility signs. We suggest that signs be made of lucite and use the required international handicap symbol. This permits your signs to be a part of your decor rather than being an unattractive appendage. Signs could identify accessible entrances, elevators, and bathrooms. The accessible entrance sign(s) needs to be in plain view of the main entrance and near the sign announcing what church this is. Remember that your outside sign, and your newspaper ads, cannot say "Totally Accessible" without the following conditions being met:

- ◆ **welcoming attitudes of inclusion**
- ◆ **accessible entrance**
- ◆ **accessible parking**
- ◆ **accessible bathroom**
- ◆ **large print BCP and bulletins**
- ◆ **sound system which augments the entire liturgy**
- ◆ **sufficient lighting in the church**

Accessibility features which are not aesthetically pleasing add to the complaints of those who oppose the presence of persons with disabilities in our churches. Their first complaint is against defacing the beauty of their church. We need to be intentional in conveying that accessibility can be a lovely addition to our churches as well as functional.

The beauty and form of our liturgy call us to worship with hearts filled with praise and thanksgiving for the glory of God. May our accessibility endeavors convey more of that beauty as we glorify God with our inclusiveness.

COUNSELING PERSONS WITH DISABILITIES OR THEIR FAMILIES

I. Learn to understand disability:

A. Know something in general about major disabilities

cerebral palsy
mental retardation
multiple sclerosis
head injury
mental illness

B. When working with a family or person with a disability, ask them to explain what the disability is, the implications, and what they understand about it. They are often the real experts of their child or their disability.

C. Encourage people with disabilities to learn about their disability and what it means for them if you find that they are not well informed or are fearful of the disability or disease.

D. Assess the needs and strengths of the person.

1. They may not know their strengths or their abilities.
2. Do not buy into learned helplessness.
3. Enable them to be comfortable when help is needed and gracious when not needed.

E. Understand the classic grief cycle:

1. There is grief over the loss of abilities and perceived images.
2. There is anger which must be expressed encourage it and acknowledge it.
3. There will be frustration; listen; you do not have to fix it.
4. Address their fears.
5. Understand something about forgiving .
6. Acceptance is not the same as liking a disability; nor is it accomplished once.

F. Learn to enter the struggle

- Be present to the pain
- Understand that it is real for them
- Accept what they feel
- Help them to integrate suffering as *one* dimension of living
- Move them toward *living with* their disability rather than *suffering from* it.

G. Be aware of your own limitations

How do they enable you to understand and accept the limitations of those whose disability affects them in greater areas of their life?

II. There are no special skills for working with persons who are disabled or their families. You already possess skills which can be expanded.

A. CRISIS COUNSELING: This skill can be used to work with parents or persons disabled who are unable to accept disability, or let go of their sense of guilt, sin, or grief. Where there is a child with a disability involved, encourage and enjoy them. Model real acceptance and celebrate both small and big steps in their growth. Look for and encourage the "rites of passage" (e.g. baptism, confirmation, etc.) for them and for their family.

B. PRESENCE AND SUPPORT: Disability is a long term struggle of coping. Pat, ready made answers for coping with prejudice and negative attitudes or expectations of others does not provide presence or support. Listening, hearing the pain, entering the struggle, means reaching out even when you do not know what to say. **You do not need to have the answers!**

C. ENABLER: Professionals often overlook the secondary problems of disability, e.g. poverty, agencies, transportation problems, lack of family, emotional and community support, social isolation, sexual issues. There is a need for these persons to know there is someone who understands their needs, can search through the desert of non-existing or inadequate programs, fight the bureaucratic red-tape, or stand with them as they "fall through the cracks". This may mean finding an able and committed advocate who has the time, energy, and stamina necessary.

These are suggested counseling strategies. The essence here is not developing new skills, but rather widening the boundaries to include persons previously excluded by therapy.

Remember that the questions of any persons in counseling are ultimately spiritual. Counseling must not separate the questions of living, suffering, or dying from the realm of one's spirituality. To do so would be to fragment people and to deny their search for meaning, which is the penultimate search for God.

FEARS OF PEOPLE WITH DISABILITIES TOWARD PEOPLE WITHOUT DISABILITIES

1. FEAR OF INTIMACY:

This is the fear of being open and allowing others to get to know you.

- My insecurity may show and then I will not be accepted.
- Those who treat me as inferior will dominate me (abuse issues).
- I often receive pity when I want to be equal.
- My abilities and gifts are not received; only my disabilities are seen.

2. FEAR OF REJECTION:

This is the fear of being myself because others won't understand my attitudes, actions or behavior.

- My integrity is criticized if I am honest about my values and beliefs as one who has experienced a different life/culture.
- Others have fear of my needs for access, transportation, communication and understanding.
- My competence is too often doubted, forcing me to prove myself.

3. FEAR OF FAILURE:

This is the fear of failing even if I try.

- Others will only see my loss of control or my struggle, rather than giving me a chance to do things as I can.
- My worth may be questioned, even though I am giving as well as I can.

4. FEAR OF SUCCESS:

This is the double-bind fear of succeeding in a society which has few positive expectations of persons with disabilities.

- The extra-effort required to achieve success includes advocacy, struggle, additional energy and resources. This may mean going without a social life, so the question becomes "is it worth the price?" Also, "how far can I go?"
- You begin to doubt normality and decide not to pursue your goals.

- You fail to recognize your own successes and achievements and think others did it for you. You doubt your own abilities.

5. FEAR OF CHANGE:

This is the fear that things will become worse than they already are.

- I will be left isolated and unwelcome.
- Others will make me uncomfortable and will not assist me with real needs.
- My independence will be taken away and others will make my decisions.

6. FEAR OF MATURITY:

- Others will give me too many obligations and responsibilities if I move beyond self-limiting boundaries of safety.
- I will be left without choices, only decisions to make without help.
- There will be no one to walk with me into the unknown.
- No one will accept the new me if I grow.

FINDING ACCEPTANCE OF OURSELVES AND OUR DISABILITIES

Know who you are. Accept who you are, without shame, without apology.

Integrate your limitations and disabilities into the whole of who you are. When disability is not integrated as simply one part of a greater whole, it becomes a weapon against ourselves and others.

We are all different, all of us unique. What is good and right for us may be detrimental to another. Some concepts are for you, others are not.

Do not blame disability for everything that goes wrong in your life. Everyone struggles with loss, problems, suffering, and eventually death.

At the same time, recognize that a struggle for acceptance and value in society is involved. We are not alone in this struggle but one of many disenfranchised groups in our society and religious community. We are participating in a universal struggle for acceptance of the diversity which is found in the image of God.

The responsibility for yourself, your life, and your growth is yours alone, and no one else's. The "blaming game" is a dead end, vicious circle that leads no where except to more of the same. One of the more radical approaches to personality transformation allows for no reasons, no justifications, and no excuses. This is the point at which we cry, "Okay, it's you and me, God!!"

Acceptance comes as we do the hard work of healing the deep wounds which may have been caused by abuse, rejection, loss, betrayal, injury, and so forth. We heal the wounds as we name and acknowledge their affect on our lives; forgive ourselves, others and God as necessary; and let go of the pain.

Allow yourself to enter into the moments of anguish, depression, failure, and grief. We do experience loss; we do grieve for real or perceived images of who we were or might have been. The grief cycle will recur throughout your life time. You cannot conclude it once and for all. Recognize it when it comes and know it will pass. You will not be shattered by it but you will be expanded by the presence of God in the midst of the journey through it.

One of the most debilitating neuroses of our time has been defined as being the desire to be perfect. This is the trap of the "tyranny of the should's," which says:

We should be honest, courageous, brave, unselfish. We should be perfect. We should be able to endure everything, be like everybody, love everyone; nothing should matter; we should never feel hurt, or feel sorry for oneself; we should be grateful to be alive at all times; we should be in control of all emotions and feelings; we should not wish for things to be different; we should be able to overcome every difficulty.

The "should's" are a pressure against us determined by a world alien to who we are. As long as we "should," we are serving the gods of others and not trusting our inner responsibility to being who we are, as we are. Authentic acceptance is claiming our own experience, authority, and thoughts, while also being honest about our limitations and circumstances.

Acceptance is found only by letting go of our "idealized self-image" which denies our limitations and problems. As we face our disabilities with honesty, we will struggle with the suffering and pain we feel. However, entering into this suffering actually liberates us from the suffering of injured vanity and excessive sensitivity to the world.

Acceptance means who do not have to apologize for being disabled or needing assistance. It is letting go of all guilt and shame. People who abuse, discriminate, and are otherwise insensitive, unaware, or inaccessible do not apologize for their behavior. You do not need to be "sorry" for being who you are, or for needing more time, assistance, and for using assistive devices. When we do not apologize for little accidents, we avoid passing guilt around, and we allow grace to work in and through our disabilities. We become witnesses of God at work in and through our lives as we are.

Acceptance is not "out there" somewhere: it is to be found *deep within ourselves*.. If we cannot accept who we are, we cannot expect others to do so. Focus on the abilities you have been given, and not on what you have lost or never had.

Acceptance is the result of integrating disability and all the feelings and emotions associated with that experience. Acceptance is being healed of bitterness and resentment through forgiving ourselves, others and GOD. Acceptance is about being *whole* in body, mind and spirit. It is not about having disability removed from your life. It is about *living with* disability in creative and meaningful ways which celebrate the goodness of who we are.

Acceptance is knowing fully who you are, and then claiming the freedom to Be and Become All that God has created you to be in the world. Acceptance is discerning and claiming your gifts and abilities and then using them creatively to make a difference in the world around you.

YOU ARE ACCEPTED

It is that mixture of selfishness and self-hate that permanently pursues us, that prevents us from loving others, and that prohibits us from losing ourselves in the love with which we are loved eternally. He who is able to love himself is able to love others also; she who has learned to overcome self-contempt has overcome contempt for others. We cannot transform our lives, unless we allow them to be transformed by the stroke of {God's} grace.

Grace strikes us when we are in great pain and restlessness. [Grace] strikes us when we walk through the dark valley of a meaningless and empty life. [Grace] strikes us when we feel that our separation

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is deeper than usual, because we have violated another life, a life which we loved, or from which we were estranged. [Grace] strikes us when our disgust for our own being, our indifference, our weakness, our hostility, and our lack of direction and composure have become intolerable for us. [Grace] strikes us when, year after year, the longed-for perfection of life does not appear, when the old compulsions reign within us as they have for decades, when despair destroys all joy and courage. You are accepted. You are accepted, accepted by that which is greater than you. Simply accept the fact that you are accepted.¹

¹ Paul Tillich. "You Are Accepted," in *The Shaking of the Foundations*. New York: Charles Scribers, 1948, 161.

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IMPLICATIONS OF DISABILITY ON FAMILY LIFE

Disability is almost always understood as catastrophic. It may be seen as punishment, and it usually is seen as being destructive to one's hopes, dreams, and plans for life. How one understands disability in oneself or in a family member is predicated upon the following:

- The developed capacity to understand what happened, e.g. the cause.
- The strength of family relationships, e.g. accepting, supportive.
- One's environment, e.g. freedom in accessibility or isolation.
- The spiritual and religious beliefs one has, or the lack thereof.
- The degree of pain and symptom relief, e.g. pain management and control of symptoms.

Note: Pain cannot be understood within the strict confines of physical symptoms. Pain is a symptom of the whole person: physical, psychological & spiritual. Thus, the level of pain and suffering one is experiencing cannot be determined quickly or easily. It requires an extensive and comprehensive evaluation of the person's physical, psycho-social, and spiritual condition, including levels of access, isolation, finances, ability to make appropriate choices, and ability to maintain a measure of autonomy.

These considerations are essential in understanding the ethical implications of the "right to die" movement. The disability rights movement recognizes these implications and the failure of non-disabled people to insure that a quality of life is accessible to people with disabilities. Their impatience and social constructs of disability as "too painful" or "life not worth living" has allowed our nation to consider "legalized medical killing" – which is what is left when the euphemism's are taken away. (See C. Newell and others.)

People in or near a family respond to the developing characteristics of disability according to the age of the one who is or who becomes disabled. Those reactions influence how (or if) they will chose to help. The following sections list the reactions of people according to the age of the child at the onset of disability:

AGE 1-3:

- Our feelings are influenced by behavior of child.
- Their dependency is source of our anxiety.
- We may feel anger at the parents for their failure to protect the child...even before birth. (This may allow people to "blame the victim".)
- Parents may feel responsible, resulting in anger, guilt, grief.

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- While family togetherness is crucial, some families split apart and do not support each other.

AGE 3-5:

- Disability happens to "others", not to a child, especially one of "ours".
- Disability is associated with coldness and disfigurement.
- Disability isn't permanent, e.g. the reality doesn't sink in.
- Illness is perceived as a just punishment (usually from God).
- The child can tolerate separation, so s/he can be institutionalized, e.g. out of sight: a) placement equals rejection; b) society says we can "kick" a child out of the family because we have "kicked" them out of society.

AGE 6-11:

- Disability has a meaning all of its own: a) it's permanent or b) reserved for old age. Therefore, childhood disability is unnatural; is not fair; can be attributed to external factors.
- Our own fear of injury/mutilation becomes more pronounced.
- The child or family is blamed (blaming the victim).
- The child is not to be told anything beyond bare minimum, as the hope s/he will be "normal" is sustained regardless of the cost.

AGE 12-18:

- They are budding roses, full of vitality, so there is less acceptance of their being disabled.
- Physical ravages are least endurable.
- Their dependency and/or physical deterioration creates feelings in others of shame, disgust, and disgrace.

Families always have certain expectations. Those expectations change where there is a child with a disability, creating additional stresses on family life:

- Stress is related to the relative expectations of the parents for themselves.
- Middle class families usually have control over their lives, make goals and have plans which usually happen. A child with a disability (especially developmental) challenges all of that, bringing a sense of powerlessness. The family then looks for a quick fix, which can come in the form of denial.

CLINICAL STRESSES FOR PARENTS:

- They have lost the fantasized child (who is never disabled).
Parents grieve as if child had died; grief cycle lasts lifetime.
- They worry what to do with the child who IS here.
 - They need correct and adequate information about the disability and resources.
 - There is a need for responsive interaction with child: bonding is more difficult if the child is blind.
- The burden of care takes a huge toll on a family.
- The stigma on families is draining as it is continuous.
- These stresses emerge in waves over life-span, so appears as periodic crisis.
- Families are more socially isolated; they get away less, need for respite care is problem.
- Caretaker (usually mother) is most stressed, affects other children and father.
- Stress in mothers equals response of the child with a disability to her.
- Studies indicate problems between mother and child when first-born is disabled. - Similar problems between disabled mother/eldest daughter, disabled father/eldest son.
- Divorced mothers of children with developmental disabilities turn to clergy most often because they are even more socially isolated.
- Interaction of mother with her non-disabled child is very different:
 - She is overprotective of child w/disability; the child is never the leader, mother knows best--always doing TO the child; does not enhance the child's sense of self.
 - Adolescent non-disabled child gets to babysit too much so is isolated from peers; cannot say no to mother; developmental needs are affected.

COUNSELING PARENTS ABOUT NON-DISABLED SIBLINGS:

- Do not expect them to hide their tears; they too feel loss.
- Include them in plans for the child w/disability which affect family life.
- They have fears that disability is contagious, runs in the families and other fantasies.
- Let them bring the gift of who they are to the situation/family.
- Do not say "God willed this." Offer a model of God that is loving and compassionate, rather than capricious.
- They may go play as a way of reducing their anxiety.
- Siblings have more difficulty if the one with a disability is of same sex.
- The child who is normal is overloaded with responsibility.

IMPORTANT FAMILY HELPS FOR ALLEVIATING STRESS:

- Positive family perceptions of who they are together.
- The strength of the marriage.
- The support of extended family.
- Emotional support from within and without family.
- Having a network of friends, one of which is intimate.
- Reciprocity: being able to give back in order to keep your support system going.
 - Support networks of families with disabled children usually contain more family than friends. Family members burn out and do not wait for the reciprocity. Mothers seldom have the energy to remember and do the niceties.
- Being involved with the community, e.g. neighbors, church, professionals.
- Availability of financial resources: determines quality and quantity of needed services, household help, and equipment.
- Play time for family members.
- Respite care for families improves their perception of their child w/ disability. Reduces over-protectiveness. Social isolation leads to enmeshment.

Ways the Church Can Provide Help for Families of Persons with Disabilities

The birth of a child with a disability contributes to the divorce rate and to women being single parent, head of household. Even where there is no divorce, it seems to contribute to the growing incidence of spouse and child abuse. It also affects family income—usually leaving one income instead of two, and creating greater demand on available financial resources.

I. When you know there is a child with a disability:

- early intervention can provide for better information and options for the family
- connect family with someone who knows where programs/services are and who knows how to access them
- arrange for respite care through volunteers

Although there are many programs for families, there are few which speak to the needs of families of persons with disabilities.

II. Families need on-going spiritual growth.

- They need access to the church through accessible architecture, appropriate communications, and welcoming and inclusive attitudes.
- We need to recognize that there are differences in needs for these families; there are also differences in how each church can carry out their ministry with persons with disabilities.
- There is a real ministry in expecting "appropriate" behavior from persons with disabilities. Allowing inappropriate behavior is destructive to the persons and to the community.
- Provide aid in Christian education classes and in worship services. Allow persons with developmental disabilities or mental retardation to be full participants in the mainstream and not in "special" classes or separate services.
- Be aware that the staff of group homes often interfere with church participation. Their approach is that "we" know what "they" need (This is also dismissive of parents who may be the real authorities on their child).

III. What can Church do uniquely that no one in community can do:

- Provide faith commitment
- Provide a presence
- Be a community of prayer
- Be a source of spiritual growth for the family

IV. What must the Church do:

- Accept
- Hope
- Celebrate
- Educate
- Minister

V. What might the Church do:

- Serve as a model of total accessibility and acceptance

VI. What the Church should not do:

- ⇒ inflict guilt
- ⇒ be blind to need, e.g. " we have no one with a disability here"
- ⇒ be ignorant of either the needs or the abilities of someone with a disability

VII. What Churches can do to undo the damage:

- ◆ REMEMBER: the church can be a lonely place for the family of a person with a disability.
- ◆ People with disabilities do not want to be "special" but want to be part of the community.
- ◆ People with disabilities want to be touched - but always ask first.
- ◆ Help the parish to know that mental retardation can happen in any family.
- ◆ The challenge to the church is whether they can and will accept any and everyone
- ◆ Know how to respond to the birth of a child with a disability rather than reacting to it.
- ◆ Learn how to respond to all persons with disabilities.
- ◆ If there are no persons with developmental disabilities in your church, ask WHY: what are you doing about it?
- ◆ If there are persons with D.D., are you doing "with" them, rather than "to" or "for" them?
- ◆ Are there people who will sit with a child who is disabled during church so that parents can participate in worship?
- ◆ Are young persons w/ disabilities active in Youth Group, or camping?
- ◆ The Church can address the alienation of persons with disabilities by caring, which leads to healing.
- ◆ Do not be afraid to speak to the sexuality of persons with disabilities.
- ◆ The Church can serve as an advocate for people with disabilities, especially in employment:
 - does their employer value the person for his or her work?
 - remember that their rate of pay = value
- ◆ Are we ministering to the staff and volunteers of persons with disabilities, who are often wounded people?

THE GRIEF CYCLE

Emotional Stages for People with Disabilities

Grief gains momentum anytime the reality of disability affects one's life, rather it is having access to people, places and events, or the ability to make choices. Each disappointment and loss triggers the feelings associated with earlier losses and disappointments. Each instance may revive the sadness, frustration, helplessness, and anger associated with being disabled.

1. SHOCK AND DESPAIR:

- The onset of a disability may cause shock as it changes the dreams, goals and expectations that had been taken for granted.
- Despair is usually about the losses related to our person--the Self. It is about what we are without, e.g. a particular ability or image (Kierkegaard).
- There can be despair over external realities related to barriers of access and discrimination in seeking employment, medical care, or social inclusion.

2. ANGER:

Sources of anger in the grief cycle, These are normal and must be expressed in order to move through them. These are not to be confused with the issues of anger related to empowerment, equality and justice.

- Anger at the disability .
- Anger at ourselves (did we cause it? do we deserve it? The "why" questions).
- Anger at doctors, nurses, spouse, parents, children (they may deny our limitations or pain).
- We may see our anger as being unforgivable (further lowering our self esteem).
- We may feel overwhelmed by helplessness.
- The gaps between our idealized self-image and our actual selves are exposed, shattering illusions.

"Self-esteem reflects the congruity or the incongruity...between the ideal self we aspire to be and the actual self we experience in reality. When we have come to accept our limitations and our capabilities, when our ideal selves are in reasonable harmony, our self-regard is likely to be secure and resilient. It can absorb some of the bruises"¹

- We feel inadequate, to blame, guilty, and hostile.

It is important to help people express their anger with God and eventually to forgive God. This enables people to develop a stronger relationship with God and to live out of a deep faith which provides strength to face what is so painful now.

3. BARGAINING:

- Bargaining is an attempt to return to "normal". This is part of a stage of denial. People cannot move through this until they have enough ego strength to face into their inner pain.

4. DEPRESSION:

Depression is a normal response to any situation of loss and grieving. Some depressions require more medical intervention than others. All depression is related to our spiritual life and our search for meaning and purpose. We need to ask what God is saying to us in depression. It is helpful to work with a spiritual director and to read about the "dark night of the soul." The spiritual journey into darkness is a familiar theme in classical spirituality: John of the Cross, Teresa of Avila, Dante and others.

Depression related to disability is a reaction to:

- Loss of perceived images and abilities of self.
- Loss of image of what it means to be an upwardly mobile family.
- Loss of expected or hoped for dreams.
- Loss of abilities once had or wished for.
- Loss of or impaired health.
- Pain that is not controlled.
- Inability to fix or change the disability.
- Guilt: feeling to blame for the disability.

¹ McCollum, Audrey T., "Grieving Over the Lost Dream," in The Exceptional Parent, pp. 9-12, February 1984.

Depression is an expected response to significant disappointment and loss, even the loss of dreams. Depression is marked by helplessness and a loss of self-esteem, outward signs of the inner fear or reality of the disability. Depression usually enfolds a faltering self-image.

5. ACCEPTANCE:

- This does not mean "liking" one's disability, but rather it means learning to live with it rather than suffering from it.
- Letting go of the false ideals of power and perfection.
- No longer turning critical judgments from others into harsh self-judgments (letting go of the tyranny of the "should's").
- Recognizing anger and finding appropriate expressions of it in safe places. Learning how anger can be creative and putting it to work for us, rather than against us.
- Seeking self-forgiveness; forgiving God and others, so that we eliminate guilt and disappointment.
- Letting go of lost or shattered dreams, reconciling oneself to the reality of disability.
- Accepting that which cannot be changed, while looking for modifications for those things which can be changed, e.g. problem-solving can change many things so that we are not left helpless.

Remember that people with disabilities, parents, other family members, and care givers, are each in a different stage of the grief cycle and may not be able to communicate where they are. They may not even know where they are, much less why.

Being courageous in the face of adversity does not serve anyone well. When we postpone grief it will erupt in other ways, perhaps as a global anger and bitterness. It will affect our mind, thus causing biological changes in our bodies until we are physically ill. If we avoid dealing with grief, we succeed only in drawing our emotional energy away from our family and friends. We become distant and detached, further isolating ourselves, thus further contributing to grief and anger.

The grief cycle is part of our growth. It is part of the journey to God. It is not to be avoided, nor is it to merely be endured. It is to be entered into; we have to walk through it in order to move beyond it.

SELF-DISCIPLINE FOR HEALING DEPRESSION

These are practical ideas for the spiritual journey and for aiding the healing process when living with a disability or chronic illness.

- Plan a balanced meal, sitting at a table, with the TV off. Use your nicest dishes, light a candle, put on nice music.
 - ⇒ Make meal time special - a time to appreciate the goodness of yourself and your home.
 - ⇒ Be careful about junk foods, high sugar content, and empty calories. Sugar causes severe insulin drops which affect depression and mood swings. We do not have to do this to our bodies. Read labels; there is sugar where you least expect it. Be careful also of processed foods which are non-nutritional.
 - ⇒ Food can be an addiction when "we are starved for love." You will need to fill your emptiness with good things, and we begin by choosing good food to eat.
 - ⇒ If alcohol and drug addiction are a problem, begin a routine of eating hot oatmeal every morning. Meditate for a time afterwards.
 - ◇ Find a support group and a community where there is prayer and worship.
 - ◇ Join a Recovery Group.
 - ◇ See a psychotherapist and work on your issues of inner pain.
 - ◇ Find a trained Spiritual Director to help you sort out your relationship to God and Self.
- Make sure that you have adequate vitamins to account for any additional stress on your body due to illness, disease, etc.
- Depression can be something calling us to sleep and rest while our wounds heal. Rest according to your physical needs. Do not keep going when you need a break. You are not weak, or failing; you are limited. Loving oneself includes allowing the body the attention it needs to not be exhausted.
 - ⇒ Rest can also include hot baths, with sweet smells and soft music. (incense, fragrant oils, potpourri, perfume, lotion, talc, etc).

- Remember your dreams, keep a dream journal, and work them through with your counselor. **Dreams are keys to your healing.**
- Reduce all chaos in your life by creating a space of beauty and around you. Make it as light and orderly as possible. You will feel much more rested and less chaotic inside.
- Find a way of exercising: swimming at the Y or a high school. Movement to music can be helpful; walking, deep breathing; find a way to get fresh air everyday.
- Meditation and prayer for spiritual and psychological health are essential. Taking 20 minutes once or twice a day to quiet your thoughts, empty your mind¹ and be still. It is a way of reducing chaos in your life.
 - ⇒ Make a special place to meditate - even if it is a corner.
 - ⇒ Have a candle, some incense, a picture or icon, a cross, or a rosary, or all of them.
 - ⇒ There are lovely meditation tapes to use; if money is a problem use the library, beg copies from friends.

¹ I am not here speaking of emptying the mind as in TM or New Age. That emptying can lead to a false self feeling in control and to negative energy leading one on the wrong path. I am referring to the emptying of ego and self (small "s") for the sole purpose of allowing room for God to enter and speak to us.

IDENTIFYING SPIRITUAL NEEDS

Illness, disease, addiction, depression, emotional disorders and other imbalances in our lives are directly related to unmet spiritual needs. We are most aware of spiritual needs whenever we question the meaning of our life. Spiritual needs are those needs for our life to have meaning and purpose:

- Forgiveness
- Reassurance
- Acceptance
- Hope
- Peace
- Giving thanks for the goodness of our life

These are universal needs whether or not one is "religious." These needs are present throughout one's life, in good times and in bad times. Some of these needs may be met by friends, family or others. This is not enough for most people, especially in times of crisis. This is because of the deep, inner longing that cannot be met by another human being. This longing is always for God, who alone can satisfy our deepest hunger and thirst. The depth of this thirst and hunger is known by acknowledging how much it takes to satisfy the demands of your addiction (e.g. how much and how long did you drink, drug, gamble, smoke, shop, etc.?)

On a clean sheet(s) of paper, list your spiritual needs. They will include the following:

- Meaning and purpose of your life
- Forgiveness: being forgiven by God or others; forgiving self, others, and God.
- Relatedness
- Reassurance
- Acceptance
- Peace
- Hope
- Self-esteem
- Control of your life, behavior, choices.
- Dignity
- Personal worth
- Gratitude

Some of these categories will overlap. You may think of others.

FORGIVENESS

- ◆ Forgiveness is about letting go of pain so that we can move on.
- ◆ When we forgive someone who has hurt us, we let go of the pain their hurt caused us.
- ◆ When we accept forgiveness from God, we let go of guilt, shame and feelings of worthlessness.
- ◆ When we accept forgiveness from others, we let go false pride, guilt, and shame.
- ◆ When we forgive ourselves, we let go of our mistakes, poor choices, and our need to be the suffering martyr.
- ◆ When we let go, we heal. Forgiving enables us to heal the psychological wounds so that we are free to move on.
- ◆ Forgiveness helps us to make positive changes in our lives and improve of sense of self-worth.¹ When we do not forgive, we hang on to the grudges, resentments, and self-defeating behaviors that are a barrier to a healthy and productive life.²
- ◆ Forgiveness helps to "re-create your life, rebuild your self-esteem, and find the inner peace" which you seek. Working your way through forgiveness will help you to:
 - acknowledge your hurt and understand the things you have done because your were hurt;
 - get rid of guilt and shame and stop taking the blame for all that has happened to you;
 - stop sabotaging behaviors and break old patterns of relating to life;
 - unload your anger;

- recognize the gifts and strengths you used to survive;
- integrating the past as a small part of who you are and not the sum total.³

In order to do this, we could begin by asking ourselves the following questions:

- Where am I now?
- Where would I rather be?
- What is the next bold step I must take in order to get there?⁴

The Simons' book has some exercises for helping you to work through these questions.

I urge you to get this book and work through the six stages of forgiveness. It is an excellent book. *Forgiveness: How To Make Peace With Your Past and Get on With Your Life.*

Dr. Sidney B. Simon and Suzanne Simon. New York: Time Warner, 1990.

1. Simon and Simon, *Forgiveness*, p. 5.
2. Simon and Simon, p. 5.
3. Simon and Simon, p. 6.
4. Simon and Simon, p. 67.

FORGIVENESS RE-VISITED

- ◇ *Have you begun to think about forgiveness?*
- ◇ *Do you know who you need to forgive?*
- ◇ *Have you asked God to forgive you?*
- ◇ *Have you accepted God's forgiveness?*
- ◇ *Have you asked others to forgive you for hurting them?*

Forgiveness sets us free to move on. It lightens our burden as we no longer have to expend our energy carrying pain, anger and resentments. We need God's love flowing through our lives and our being--loving, healing, illuminating and reconciling all that is broken, lost, or in pain.

To forgive is to confess to God the things we have done and the things we have failed to do. Having another person hear you is an important part of the journey and we will talk about that shortly. Confessing may take the form of writing out the things that you need to let go of. Your confessor may suggest burning this as a concrete, visible way of letting it go. Confessing requires humility--simply meaning that we come to realize that we are dependent on God, rather than on angry self-determination.

Forgiveness is a process, and not accomplished simply or easily. It takes time. We forgive only as much as we can at any given time--and never more than we are ready to forgive. Forgiveness is not about forgetting what has been done to us; it is about remembering it in ways which deepen our wisdom and maturity--rather than feeding our anger and resentment.

Remember this is a process and one that cannot be hurried. We cannot forgive anyone until we are ready. Do not try to rush it. Be patient with the process and with yourself.

- We begin with ourselves: asking God to forgive us those things which have been destructive to ourselves, to others and to God.
- We forgive ourselves for those things God has already forgiven us for--our mistakes, our selfishness and willfulness. Then we must accept God's forgiveness.
- We forgive those who have wronged or injured us.
- We live as people who are forgiven.

If we believe we are forgiven then we will act that way: our self-image will improve; we will be more positive about life, our potential and our future; we will be reconciled to others and will behave in a more loving manner.

God is more ready to speak than we are to listen. The art of listening to the voice of God in our midst probably develops out of our sense of despair, failure and pain, as it did [for] Elijah. ... What we hear the voice of God saying is more like the whisper of silence; more like the roaring of a waterfall; more like the secure movement of a held and sleeping infant. What we hear is the Voice beyond all voices: affirming and calling us to a humble, forgiving, trusting and compassionate walk, not through a garden of un-imagined splendor, but through the grubby reality of the everyday (*Incarnate Hearing*, Jeff Hamilton).

FORGIVING GOD

- Forgive God for the pain and suffering which you feel is unfair and deep. We are not suggesting that you forgive God for not getting your own way in life. No one does. Nor should we forgive God for what we bring upon ourselves ... addictions, bad habits, irresponsible living.
- Hating God is much healthier than turning hatred in upon ourselves. It takes courage and a knowledge of God. Hating yourself is simply hating God in disguise because you lack courage to do otherwise. Expressing this strong feeling puts the venom "out there" rather than allowing it to destroy the God-given potential with us. It allows us to be honest and break down the barriers between us and God so that eventually we can receive forgiveness and heal.
- Stop defending God or trying to explain away the darkness of God. To seek a God of love is to encounter a living presence in whom there is both dark and light, good and evil, love and anger, light and fire. When we are defending God, we are not attending to the inner struggle which calls us from something to something better. Denying the darkness will not help us to see the Light any better, Light has shadows. The cross casts the deepest shadow.
- Life is not perfect; it comes with pain and suffering. It also comes with things which give us happiness and meaning.
- Evil and darkness are realities and are necessary if there we are also to have good and light.
- God suffers with us. We are not abandoned.
- God forgives those who have brought pain and destruction into our lives.
- God forgives us for the pain and destruction we cause others or ourselves.

ANGER AS A CREATIVE POWER

- We may combine our anger with intelligence and reasoning so that we develop a sharp mind.
- Anger may motivate our ambition and we will achieve our goals.
- Anger stir us to work for justice where there is injustice.
- Anger may drive us to work tirelessly on behalf of others who suffer.
- We can turn anger into compassion by being present to the suffering of others (e.g. listening, praying, visiting, support groups, volunteer work).

PASTORAL RESPONSES TO PEOPLE WITH DISABILITIES

If your Warden, organist, secretary, or best friend had an accident or illness that incapacitated him or her today, you would respond with care, suggestions and offers of assistance. It is no different in caring for someone who lives with disability.

1. *See* the presence of the Incarnate God in the person. Respond to the disability secondly. Then you can see and hear what is offered or needed.
2. It is rarely inappropriate to ask the person what their disability is or to ask how you can be helpful. Asking is caring enough to know the person.
3. Disability is not usually an illness. It is rarely contagious.
4. *Listen*: you may not be asked to do anything but asked to receive something they have to offer.
5. *Listen*: you do not need to have the answers and may not be called upon to provide any.
6. *Listen*: simply be present to the pain or the joy. Caring is part of your job already.
7. *Listen*: the person with a disability can tell you best what they need, how you can provide it, and why it is important.
8. *Learn*: You do not have to be an expert in anything. People with disabilities are the experts in their disability and usually know what they need for acceptance and inclusion.
9. *Learn* from their ability to embrace vulnerability and their ability to ask the tough questions of life and faith. Do not be afraid of your own vulnerability.
10. *Learn* that some people with disabilities are angry, stuck, hurting or without needed care, support, etc. These are universal experiences which are often heaped onto the person who has been ignored, forgotten, or unwelcome. Their ability (and inability) to sort it all out can teach you about prejudice, compassion, discrimination, courage and suffering.
11. *Accept* the person as you would any other. You don't have to understand everything or like everything about them.

12. Be prepared to *make referrals* just as you would for anyone needing counseling, respite care, employment, etc. (Most clergy are not good at referral for anything and need to develop this skill.)
13. *Recognize* your own fears (and/or) projections about limitation, powerlessness, illness, and death. Fear of their need for assistance or help is probably denial and fear of your own inability to be inter-dependent.
14. Don't be afraid to *ask* someone to repeat something if you did not understand. It is insulting and patronizing to pretend you understood when it is crystal clear by your look or response that you did not--and did not care enough to be sure you did.
15. People with disabilities have the *same* emotions, desires, and needs as people without disabilities. They may have tough questions of faith and prayer but they are not different from others; we are forced by circumstance to wrestle with God-issues more openly and honestly because we usually cannot hide or deny our limitations.

Ministering with people with disabilities is not something added on to your pastoral responsibilities. It is an integral part of what you already do and is something which can nurture your spiritual life if you allow it to do so.

Clergy get caught up in wondering how to answer or address the issues posed by the simple presence of a person with disability. The more important questions are ignored:

What is God asking of you by the presence of this person in your life?

What can you learn from or because of this person(s)?

What issues and questions of your life are confronted by the needs or issues of the person(s) with a disability in your congregation?

Does your church reflect diversity and receive the gifts of all people or does the church work to avoid and exclude any who remind them of the limitations, imperfections and injustices of God's created order?

How does your church's response reflect their ability (or lack thereof) to be a welcoming and healing community?

What is God doing in the life of your church under your leadership because of the person(s) with disabilities and/or their families?

THE PSYCHOLOGY OF DISABILITY
Faculty and Staff Training and Development

As a general rule, special skills are not necessary for working with people with disabilities. Understanding the issues of people living with disability allows one to use one's skills for effective listening, care, and/or referral.

- Understand that low self-esteem and chronic depression are major issues related to the psycho-social and economic problems that are prevalent when living with disability.
- Understand that learned helplessness people with disability needs to be dealt with directly, rather than feeding it.
- Recognize *projected* anger and deflect it wisely (e.g. not blaming or isolating the person in punishment).
- Learn to hear frustration and anger in constructive ways.
 - Remember that anger may be the only appropriate response of the person to discrimination, isolation, abuse, etc. Help the person to use the anger to work for change if possible.
- Redefine negative expectations - yours and theirs.
- Recognize your own fear of limitation and disability.
- There may be a "fear-of-success" in people with disabilities because of the negative attitudes of society and the need of many people without disabilities to take care of people with disabilities.
- Encourage and enable people with disabilities to discover and use their potentiality and abilities.
- Accept the reality of limitations where necessary while also challenging them where possible.
- Remember the politics of language: it can empower or dis-empower people with disabilities. Avoid medical language as it defines people in the limited terms of a sickness model.
- Use creative approaches to encourage people with disabilities to learn their own stories for personal growth.
- Encourage people with disabilities to integrate their disability into the totality of their life experience rather than as something dragged along behind them.

SOME WORKING DEFINITIONS OF SPIRITUALITY

Spirituality is about **knowing** God in a very intimate relationship, as opposed to having "Knowledge of" or "information concerning" God. Spirituality is rooted in one's experience of God in life. Spirituality bears witness to the revelation of God on the pilgrimage; it speaks about God's holiness and God's justice, in personal and in social life. Spirituality bears witness to the mystery of God, and to the mystery at the heart of the human encounter with God. It leads people away from easy answers into the dark night of faith. Spirituality knows God as the ground of all reality and of our own beings. It seeks to deepen one's inner life and holds together the mystical and political dimensions of the life of faith. Spirituality takes seriously the experiences of God in all people and learns to listen to those who critique Christian tradition because of marginality (See Leech, *Experiencing God*).

Spirituality is defined as the life principle that pervades a person's entire being, including volitional, emotional, moral-ethical, intellectual, and physical dimensions, and generates a capacity for transcendent values. Spirituality integrates and transcends the biological and psychological dimensions. Spirituality is about the deep search to find personal meaning in life. When one develops a spirituality, it becomes possible to relate to reality with *hope*, even in the presence of suffering.

Three things are necessary for one to resolve a spiritual crisis (such as addiction, dis-ease, depression, etc.) and transcend suffering with integrity instead of despair:

- A desire to find and give personal meaning to one's experience/suffering.
- A deep desire for relatedness to God.
- An awareness of your true Self

SPIRITUALITY: GOD/SELF AND WHOLENESS

The Self refers to the whole of one's personality-- ego, consciousness, personal and collective unconsciousness. "Self" with a capital "S" is different from "self", with a small "s", which refers to the ego alone. At the root of finding Self is the key word

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"acceptance." "The Self as the center and totality of the psyche which is able to reconcile all opposites can be considered as the organ of acceptance par excellence."

When we seek after self-knowledge, we want to know who we truly are, as opposed to "being yourself." Self-knowledge requires becoming more conscious than one has been.

Jung described the search for the Self as when people come to know themselves and accept who they are, being reconciled within, and to the adversity in their lives. He saw it as making peace with God, but giving over self-will for God's will (cf. Jung, Collected Works).

The Self is a symbol signifying a union between the opposites within the psyche and "is a God-image, or at least cannot be distinguished from one" (Jung, Collected Works). The Self is not God but there is a psychological relationship between the Self and God. The Self is God within as God cannot be "wholly other."

The Self is the wholeness of the personality," which if all goes well is harmonious, but which cannot tolerate self deceptions" (Jung, Memories, Dreams & Reflections). Finding the Self is the goal of psychic development. The Self emerges as the result of the individuation process, which is a long process of integrating all the fragments of our unconsciousness into a whole which is conscious of itself (Singer, Boundaries of the Soul).

Through the individuation process, one begins to realize and integrate the abilities and potentialities which have always been within one. The search for Self enables one to throw off the projections and conventions of the world in order to be more fully who one is. It is finding one's own direction, purpose and value.

"To those who [feel] rejected and [unloved], this process offers the potentiality of restoring faith in themselves. It may give them back their human dignity and assure them of their place in the world" (Singer, Boundaries of the Soul).

SPIRITUAL ABUSE AND THE CHURCH

All discrimination perpetuates marginalization, spiritual abuse, oppression, and injustice. The Church must take the appropriate steps to embrace and practice the principles of inclusion and equality set forth in the Americans with Disabilities Act (1990). In doing so they will also promote justice by practicing the “law of love” set forth in the teachings of scripture. The following excerpts have been selected to illustrate these points:

Whenever people with disabilities fail to ask for access and inclusion in the Church they contribute to their own oppression. To be silent about exclusion is to “internalize ableism” and perpetuates the spiritual abuse of the Church toward us. “Spiritual Abuse is the act of denying people considered *disabled* their full humanity. It is to treat and care for them as if they were less than human.”ⁱ

“Problems associated with having a disability go beyond the physical limitations imposed by the disability itself. The sense of exclusion we are likely to experience produces spiritual wounds: anger, low self-esteem, a sense of inferiority, a sense of meaninglessness, despair, even loss of faith.”ⁱⁱ

“People with disabilities, who are clearly loved by God, have often not been able to hear God’s word, to see God’s glory or to feel the healing warmth and affirmation of God’s community of faith. This exclusion...has caused people with disabilities to feel marginalized in the very places where love and justice are preached and practiced.”ⁱⁱⁱ

“Having a disability can lead to the destruction of one’s sense of life’s meaning, not because the disability in itself in any way diminishes the intrinsic value of one’s life, but because the social consequences can be so profound. People with disabilities are often seen by mainstream society as *other*, in some marginal category, not whole, not fully human. Having a disability can render one dependent on others, threatening one’s sense of self-esteem. It can limit one’s productivity, leading others to underestimate the productive capacities one may actually still have. Having a disability can thus be socially isolating, creating a sense of rejection and fears of abandonment, even abandonment by God. Thus **the social consequences of physical disability can leave one with a sense that one’s life has lost its meaning.**”^{iv}

“To be prevented, because of disability, from entering or serving in God’s sanctuary should be unthinkable. To give up, because of disability, the goal of becoming a priest or minister, should be unthinkable. To be denied, because of disability, the healing, cooling, uplifting waters of faithfulness, should be equally unthinkable. To speak directly, who among us has the right to tell another person, by action, word or unwelcoming attitude, that they are not worthy enough

to worship and serve God? No person, no group of people, has the right to exclude another from worship.”^v

The attitudinal barriers erected by the church puts disability in a sociopolitical category. These barriers are often more handicapping than is an individuals disability:

- **Barriers lead to positions of subordination and social disadvantage—lack of access to employment and health care, discrimination, poverty, and isolation.**
- **These barriers make disability an issue of justice.**
- **People with disabilities become an oppressed group because of attitudes and behaviors, ...avoidance and assumptions [by other people].**
- **Personal boundaries are repeatedly violated because people with disabilities are not seen as real people.**
- **People with disabilities are either made invisible or given special attention that is embarrassing or demeaning.**
- **Negative stereotypes portray people with disabilities as passive, dependent, childlike. The person is perceived as an object. One’s humanity is lost when they are objectified.**
- **When people with disabilities are excluded from the Church, their strengths go unacknowledged or underdeveloped, and the Church is cut off from what these people have to offer—which is valuable.**^{vi}

“People with disabilities have valuable perspectives based on their experiences with their bodies and with the oppression they experience... We lose the insight that comes from their pain and loss, from struggle and suffering and overcoming the barriers to living. ...When we create barriers..., we lost the additional insight that comes from experiences of achievement and fulfillment, of solidarity and community.”^{vii}

“The ADA (July 1990) prohibits discrimination against and provides equal access for people with disabilities to employment... ...the ADA challenges the stereotype of viewing people with disabilities as ...needing treatment or supervision... The intention of the ADA is to ensure that all Americans...receive equal opportunity to participate freely and fully in society, a goal fully consistent with a Christian ethic of love and justice. ...churches and other religious organizations... are required to comply only with the employment and promotion

provisions of the law, as stated in Title One [of the ADA]. These provisions prohibit discrimination against persons with disabilities in any aspect of the employment process—hiring and promotion... While religious organizations may not be legally mandated to comply with the other provisions of the ADA, as institutions of faith **they should feel a moral obligation to do so. ... Surely full compliance with the spirit of the ADA is a Biblical mandate based on the precepts of love of neighbor and equal respect for all God's children. The Americans with Disabilities Act clearly reflects the principles of love and justice which form the foundation of a life of faith.**"^{viii}

"Above all, the implementation of the ADA within the religious community affirms a political and social vision which seeks to overcome oppression and injustice, the hallmark of an ideological ethic. ...Where love and justice dwell there will be no ...barriers..."^{ix}

The World Council of Churches adopted a resolution in Nairobi in **1975** "which strongly affirmed the need for an attitudinal change within the Church:

The disabled are treated as weak to be served, rather than as fully committed, integral members of the Body of Christ and the human family; the specific contribution which they have to give is ignored.... The Church cannot exemplify *the full humanity revealed in Christ*, bear witness to the interdependence of humankind, or achieve unity in diversity if it continues to acquiesce in the social isolation of [people with disabilities] and to deny them full participation in its life."^x

"There are a number of unique contributions individuals with disabilities often bring to a community of faith. Among the most prominent of these are a spirit of openness, simple acceptance (trust), personal warmth and vulnerability. These qualities can play an important role in challenging a community of faith to re-examine many of its values and achieve significant growth and learning."^{xi}

The Church has to face a crucial choice: "either to proclaim and implement the good news of nondiscrimination and inclusivity to all [people] by breaking down [all] barriers, or to retreat behind concrete, conscious, unconscious and linguistic barriers which perpetuate brokenness and alienation and falsify the Gospel."^{xii}

ⁱ Brett Webb-Mitchell, Ph.D. "The Spiritual Abuse of People with Disabilities" in *Journal of Religion in Disability & Rehabilitation*, Vol. 2 (1) 1995, p. 63.

ⁱⁱ Charles Gourgey. "Disability and Destiny" in *Journal of Religion in Disability & Rehabilitation*, Vol. 2 (1) 1995, p. 75.

ⁱⁱⁱ Virginia J. Thornburgh, "That All May Worship" in *Journal of Religion in Disability & Rehabilitation*, Vol. 1 (3) 1994, p. 8.

^{iv} Charles Gourgey , “Faith, Despair and Disability” in *Journal of Religion in Disability & Rehabilitation*, Vol. 1 (3) 1994, p. 52.

^v Thornburgh (1994), p. 9.

^{vi} Deborah Creamer, “Finding God in Our Bodies: Theology from the Perspective of People With Disabilities, Part I” in *Journal of Religion in Disability & Rehabilitation*, Vol. 2 (1) 1995, pp. 27-41.

^{vii} Creamer, (1995), pp. 41.

^{viii} Jane S. Deland, “Breaking Down Barriers So All May Worship” in *Journal of Religion in Disability & Rehabilitation*, Vol. 2 (1) 1995, p. 11-13 (bold emphasis is mine –NJL).

^{ix} Deland, (1995), p. 17.

^x Deland (1995), p. 9.

^{xi} Richard Chamiec-Case, “Supporting Families of Persons with a Disability: A Judeo-Christian Perspective” in *Journal of Religion in Disability & Rehabilitation*, Vol. 1 (3) 1994, p. 49.

^{xii} Deland, (1995), 18.

The Spiritual Resources of People with Disabilities

We know that religious communities need to listen and learn from us.

We know we are in the image of God even if others are not able to see that.

Knowledge of how to live with pain.*

An ability to be compassionate because we understand the condescension of pity. "We believe that the work of compassion is a needed spiritual discipline in today's world."*

Our unique life experiences have given us wisdom about how to live in the midst of suffering and in the face of death.*

Our lives bear the marks of injustice and oppression so we are able to articulate clearly what is needed for justice and healing.

We understand the abuse of power and appreciate the value of holding people accountable in addressing the real sources of sin.

We have experienced the suffering and powerlessness of God and yet know God's care for us.*

We are deeply creative, having learned to "live in a society that disables us and does not invite our participation."*

We have an ability question, to struggle and explore in a continuing faith journey.*

We are able to give expression to anger and know that anger empowers us.*

We live with loss and limits; we face fear and life-threatening situations, thus are able to offer a different perspective on ethical decisions and social issues.*

Our social location forces us to deal with ambiguity and ambivalence.*

We have the ambiguous advantage of always living on the edges, never quite fitting, but also not caught into the contradictions of privilege of the powerful. ... From the edges we can question everything and express the doubts and outrage embodied in our faith."*

"We offer wisdom to a broken world on how to live with suffering."*

* Indicates resources identified by the Barb Wire Collective, *Not All Violins*, pp. 205-209.

Issues which prevent the religious community from addressing the spiritual issues and needs of people with disabilities:

- Disability seems to mock faith in God.
- People with disabilities are unable to contribute anything to anyone.
- Disabilities can cause embarrassing incidents.
- Accommodating people with disabilities is disruptive.
- It costs too much to make our buildings and programs accessible.
- It is pointless to include those who may not act *normal* in normal interaction.
- People with disabilities are better off with their own kind (the Church too often prefers a "special" ministry to an inclusive community).
- It is useless to invest time in what is hopeless.
- Normal, healthy people have nothing in common with people with disabilities.
- Medical and rehabilitation professionals, not religious professionals, are responsible for helping people with disabilities.¹

Attitudes are formed without conscious awareness. Many people have not taken time to reflect on their attitudes so are not conscious of how or why they reject people with disabilities.

Secondly, the above attitudes are easy to form when disability is viewed from the *medical model*. This model sees a person only in terms of body parts – with a focus on the *dis*-ability.

Christians who claim that the Church is the Body of Christ and who say they are disciples of Christ – who healed people at the margins of life and proclaimed justice – cannot be witnesses of their faith so long as they hold these negative attitudes.

1. William A. Blair, Dana Davidson Blair. "Ministry to persons with disabilities: can we do better?" in *Journal of Religion in Disability & Rehabilitation*, Vol. 1 (1) 1994, p. 3.

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LIVING INTO A SPIRITUALITY

Why we need to choose a life of spirituality:

- * So we can move from a life lived in fear to a life of exploring possibility and potential.
- * So we can ask for what we need without apologizing for our lives.
- * So we can share our needs openly and not suffer in silence and/or shame.
- * So we can live simply rather than fragmented.
- * So we can be present to the moment, thus present to the Living God who appears unexpectedly.
- * So we can create a world of reverence and respect around us. This is to make space and time sacred in our lives rather than profane.
- * Spirituality allows one to go against the rules when appropriate and/or necessary.
- * Spirituality allows one to make space for giving energy and creativity to one's life.

The Benefits of Seeking the Spiritual Life:

- * You are grounded in God so are more able to give yourself away for others without feeling over-burdened or behaving like a martyr.
- * You gain a sense of your own solitude while being related to community.
(This is a necessary aspect for making peace with the inevitability of one's death.)
- * You are able to pull away from the busyness of life to be alone, to enter into prayer with the deeper inner-self, and thus able to become integrated (healed).
- * An awareness of Self in an intimate relationship with God leads to spirituality.
- * Achieving union with the Beloved (Self/God).

Spirituality Requires Creative Renewal:

- * Know who your family is so you can tell their stories to yourself. Look back in order to look forward again.
- * Know your own personal story: where have you been, where are you, where are you being led by God?
 - See your story alongside the biblical stories. The scriptures are our stories: We are, or will, live them in some way in the course of our lifetime. We know the places of exodus, exile, famine, war, despair, and the hope of entering a promised land.
 - Allow every story to come to life within you so that you may see another perception towards the on-going creative event of your life.
 - Remember that you are in prayer whenever you are consciously including and inviting God into where you are and what you are doing.
- * Develop a hospitality towards others, self, and each new day.
 - Hospitality is: welcoming others, seeing God in them for you, sharing with them, entering into a relationship of mutuality where you receive as well as give.
 - Hospitality towards self is to welcome what you do not like in your own life in order to deal with it in creative ways which permit God's healing.
 - Hospitality allows us to find new life, love, concern for others, wider interests, and attraction to new people and places.
 - When you are with another person:
 - ◇ Feel better about yourself & being wanted.
 - ◇ LAUGH, have fun together.
 - ◇ Learn something new because of your time together.
 - ◇ Discover how God is present in your togetherness.
 - Hospitality invites and involves the other so that they may become part of the process, first in offering hospitality to you, and then entering into a spirituality for their own lives.

- * Discovering or Recovering one's sense of humor is necessary to sustain a spirituality. If you cannot laugh at yourself and your life, mistakes and all, then you cannot laugh with God.
- * There is a need for stillness and solitude, for rest and new ideas. Without this, one experiences *BURN OUT*. Burn out is: breathing one's own exhaust...which is deadly to one's spirituality.
- * Find new ways to do old things. There must be an element of DELIGHT in all that one does. If not, one may find that God is not in it, or that it is not for the Glory of God. God's element of delight is to be found wherever God is doing a new thing in our lives.

The Effects of Creative Renewal on our Spiritual Journey:

1. We AWAKE to our inner world thus become more aware and present to the world around us.
2. We become MOTIVATED to seek God and a deeper life of prayer.
3. We make PEACE with where we are in life.
4. We RECOVER life what has meaning and is worth living.
5. We become RESPONSIBLE for living a more interesting life.

I want to beg you, as much as I can, to be patient toward all that is unsolved in your heart and to try to love the questions themselves like locked rooms and like books that are written in a very foreign tongue. Do not seek the answers, which cannot be given you because you would not be able to live them. And the point is to live everything. Live the questions now. Perhaps you will then gradually without noticing it, live along some distant day into the answer.

Rainer Maria Rilke

STRATEGIES FOR PASTORAL CARE OF PERSONS WITH DISABILITIES OR THEIR FAMILIES

- Be sensitive to how you tell a family their child is disabled should you be expected to do this.
- It is important to be aware of your own fear of limitation and finiteness. It is OKAY to have trouble dealing with your fears.
- Intervene early with parents; do not wait for time to pass and damage to occur.
- Remember that families often feel cursed by God because of sin and fate.
- Be honest, direct, and realistic about their future.
- Do not try to fix it. Help them to learn how to *live with* it. Be an advocate as you can, but primarily do ministry and then recruit others as advocates.
- Studies show that families are not looking for technically competent people in the clergy (Heifetz).
- Look at curative care vs. palliative, remembering that healing begins with how we integrate and accept what life brings.
- Treat the situation holistically. Do not treat them as a family of a disabled child. Empower them to be better parents or better siblings. Trust your own gut reactions to the family situation. Ask: 'what can I do for you?'
- You may not necessarily know you are making a difference. The quality of your care is more important than quantity.
- Acknowledge within your church community the presence of the person with a disability.
- Do not desert the family.
- Do not minimize their reality.
- Do no harm. Professionals often do harm by not knowing what they are doing with or for these persons.
- Encourage networking support for the family.
- Provide encouragement in their daily struggle to do what is required for care of their child (i.e. rehab services, exercises).
- Remember that siblings feel embarrassed, ambivalent, and guilty. Many are having identity crisis because of their sibling with a disability. Help them get in touch with the "SIBS" network.
- You do not need to be a specialist. Your ministry is to be there and to listen.
 - LISTEN!!! - to the family and to the person with the disability
 - ◇ absorb the pain and anger
 - ◇ accept that there is grief and frustration
 - ◇ It does not matter that --
 - ◇ they are luckier than...
 - ◇ they have it better than...
 - ◇ they could be worse off...
 - ◇ we all have some problem

All of us are limited in some way but all of us are not disabled. Saying "that we are all disabled" trivializes the daily experiences of people with disabilities. People with disabilities live with stigma, discrimination, barriers, and exclusion at many levels.

As Clergy please remember that:

- You cannot be all things to all people.
- You do not have to be an expert in all fields.
- You can learn what you need to know about disability in a relatively short time and with little effort.
- You do not need to have the answers.

The above strategies ask four things of you as Clergy:

1. Be present to the grief and anger.
2. Assure them you will be there when they come back from the trenches. discouraged
3. Encourage them to grow in their faith and to seek spiritual direction.
4. Provide referral.

Become aware of available resources in your community. MAKE REFERRALS when necessary and appropriate.

CELEBRATE THE LIVES OF PERSONS WHO ARE DISABLED.

Celebration is affirmation of the goodness of who one is.

A FEW DEFINITIONS OF HEALING

*Healing powers consist only in and no more than in allowing, causing, or bringing to bear those things or forces for getting better (whatever they may be) that already exist in the patient.*¹

There is a distinction between *healing* and *curing*. Donald Senior, a New Testament scholar who writes about religion and disability writes

"I use the term *cure* in a strict physical sense, referring to physical transformation by which, for example, the withered arm of the man in the synagogue of Capernum is made straight. *Healing* has a more profound and comprehensive meaning, referring not only to physical transformation but to a profound spiritual transformation as well. Not all people—even in the drama of the Gospels—have access to cure; but all are invited to be healed."²

Healing "represents a condition of one's life; *cured* relates strictly to one's physical condition."³ Healing is a continuing process leading one to wholeness and integration. The word "health" comes from a root word meaning "whole." To be *healthy* or *whole* is to be integrated and at peace with oneself. Wholeness is founded upon the transformation of our whole being--of our spiritual and psychological self, of our way of *living* in the world.

John Sanford (*Healing and Wholeness*) defines illness as "something that results in a malfunctioning of consciousness" because the ego is affected. Illness can also be caused by painful psychological and spiritual distress. Yet, we can also be ill without being aware of our pain because of unconsciousness. In fact, our level of unconsciousness may prevent us from measuring our own state of health--our state of *wholeness*. If we remember that science has now determined that the *bodymind/soul* are one, then we will appreciate that health depends on a holistic balance within, where everything functions harmoniously.

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The ancient Greeks "regarded all illness, physical or psychological, as the result of a loss of harmony."⁴ One remained well as long as one was *in harmony with oneself and with ones' God*. Any illness reflected that one had lost one's balance and was out of harmony within. This is the view of the ancient Chinese, and Tai Chi is the practice of restoring and maintaining balance within the bodymind. However, it was also the view often found in the literature of classical spirituality (both eastern and western).

Healing also depends on self-image and a persons ability to take care of their own spiritual and emotional needs thus, many illnesses originate from inner disharmony. Healing seeks to bring *bodymind/soul* into the harmony essential for health. Finding harmony or balance in our lives requires that we:

- Let go of whatever causes us dis-ease in life.
- Examine our motives: are we control freaks? Why?
- Do we fear being out of control on the inside so take control of everything on the outside?
- Are we manipulative or can we identify what we need in our lives and ask for it clearly or go after it in healthy, life-giving ways?
- Are the activities of our daily lives life-giving or death-making?

Things that are death-making press down on us, sap our energy, and prevent feelings of joy (which is not the same as happiness). Anything which prevents us from being who we are is death-making.

Finally, wholeness does not simply mean a lack of physical or emotional symptoms. Wholeness is a dynamite process of working toward harmony with oneself,

with others, and with the Creator. "A person may find healing *through* sickness rather than *from* it. The insight, courage and fortitude that come through prayer are all a part of healing. They may or may not be accompanied by a cure. ... It is possible to know wholeness in the midst of illness if one has reached a place of honesty and humility about oneself, a place of confession and forgiveness and the receiving of forgiveness."⁵

¹ Eric J. Cassell as quoted in Bill Moyers, *Healing and the Mind*, New York: Doubleday, 1993, xiii.

² Donald Senior, "...with new eyes" in *StaurosNotebook: Reflections on the Mystery of Suffering*, March/April 1990,13.

³ Bernie Siegel, *Peace, Love and Healing*. New York: Harper & Row, 1989.

⁴ John Sanford, *Healing and Wholeness*. New York: Paulist Press, 1977.

⁵ John Sanford.

TRANSFORMATION

One's life cannot be healed unless they are honest about what it would mean to them. Addictive behaviors and many illnesses can be a means of avoidance. People who do not develop good coping mechanisms use illness as a way of getting attention. Instead of asking for what they need in a direct and responsible manner, they let sickness ask for them. Addictive behaviors and illness can also be a means of avoiding people, responsibility, and life. It is a way of avoiding the painful work of growth and transformation, of making hard decisions about changing one's life and oneself. Addictions and illnesses represent an imbalance not only in our personal lives, but in the world around us. Both are a call to transformation and new life, to address what is being avoided in order to be well again. Avoidance leads to dis-order. Healing leads to order: order allows healing.

Our illnesses, addictions, and psychological disturbances are part of the journey toward wholeness and healing. That journey takes us inward and downward in the healing process, where we have to confront and examine our shadow, or dark side and take responsibility for integrating the neglected or rejected aspects of ourselves. The following disease model is usually used in discussing addictive or compulsive thinking and attitudes. However, it is an appropriate way of distinguishing negative, dis-eased thinking from thinking that is informed and shaped by connection to one's spirituality. Whether or not we are able to do this depends on our ability to move from living out of a model of dis-ease to living from a model of spirituality (i.e. wellness).

THE DIS-EASE MODEL

vs.

THE SPIRITUAL MODEL

denies one's shadow

faith in behavior/works

despair is unlimited

sex as power/enemy

inner struggle

alienation from friends/community

hides secrets

denial

avoids pain

religion hides shame

embraces one's shadow

faith in others and God

joy in limitation

sex as gift of God

inner peace

connection/community

congruent

reality

finds meaning in suffering

open to spiritual discovery

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1

BLOCKS TO HEALING

1. Many of us have anxieties or behaviors which actively block the healing process:

- Self-defeating or sabotaging behavior.
- Fear of healing--fear of acting and living in a new way.
- Fear of the truth.
- Fear of having to take steps that will change your current situation.
- Fear of being happy and healthy.

2. Are you working well with a therapist? If you have not found one, why not?

- If you have a therapist, are you comfortable with him or her?
- If not, have you taken steps to address the problem or to find a new therapist?
- What stops you from doing what is best for your future well-being?

3. Have you taken time to be still--to listen to the inner voice?

- Do you take time to reflect on where you are?
- If you are never silent do you know what you are running from and why?
- What is it that you do not want to hear?

4. What are you doing to nurture your spirituality?

- Do you know what you are called from? Do you know what you are called to?
- Have you considered working with a qualified Spiritual Director?

"Healing may not be so much about getting better as about letting go of everything that isn't you--all of the expectations, all of the beliefs--and becoming who you are. Not a better you, but a realer you. ... We need to let go, to throw away everything that isn't us in order to be more whole" (Moyers, *Healing and the Mind*, 354).

Healing is about evoking *the will to live*.

CLERGY WITH DISABILITIES SPEAK OUT

The following statements, set out by a group of clergy with disabilities, reflect our desire to be self-defined and to have our gifts recognized in positions of visibility. They also speak about our need to protest labels and patronization.¹

- The negative attitudes of the religious community about disability get in the way of bringing in the Kingdom of God.
- Pastoral Care for people with disabilities needs to include advocacy.
- The issue of the nature of God is raised by the presence of persons with disabilities. There are many who are disabled who can speak to this best when we are visible as deployed clergy.
- Living out who we are within the religious community must be made visible by the Church. Whenever we are honest about our limitations or needs, the Church uses it as a reason to exclude us.
- We are tired of being told “God loves you.” Tell us how you love us. We’ll make up our own minds about God!
- We see ourselves as individuals, not disabilities, but we are seldom included as part of the worshipping or collegial community.
- Diagnosis has to be dialogical or we become other than you are. We are not our diagnosis, nor does diagnosis define our gifts and abilities.
- We are “vulnerably strong” which is to stand in the image of the Crucified Christ.
- We need to move the religious community from “toleration” of us to “acceptance.”
- There are many clergy with disabilities who feel that whenever we get labeled, we must scream and protest as this is our greatest gift. The religious community responds to the protests of many minorities, but they punish people with disabilities for protesting injustice against us. What we feel is a healthy response to injustice and oppression is still called “inappropriate” behavior.
- When we are told “you have so many gifts” a door is being slammed in our face and we are put at the bottom. If they really believe we are so gifted, wouldn’t they make good use of our gifts by employing us and supporting the gifts?

The religious community has much to learn from people who live with disabilities. Those of us who understand suffering and who have moved into and through it, can inform the religious community in ways which will transform it.

¹ These statements were made by clergy with disabilities attending a Methodist conference in 1990.

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THEOLOGICAL QUESTIONS AND ISSUES IN DISABILITY AND HEALING

- **What does it mean to be created in the image of God?**

1. What does it mean to be human?
2. What does it mean "to be whole?"
3. How do we usually define people? (Example: describe a favorite professor; not describe someone with a disability)

- **How does language reflect our theology?**

1. How are labels used to form judgments and stereotypes?
2. Do labels fully describe a person?
3. Is disability an attribute, e.g. does a person have a disability, or is a person disabled?

I prefer to say a person lives with a disability. "I" is that part of me that is mind and soul and is not *disabled*.

- **What does disability, illness, suffering, and death say about our image of God?**

What would it mean if we believed the medieval saying that "in front of every person there is a host of angels saying *Make way for the image of God! Make way for the image of God!* How might that impact the way we treat everyone?"¹

- **Is God disabled?**

- **What does it mean to be a community—to be the Body of Christ?**

- Why are some parts of the Body missing—e.g. people with disabilities?

There are 45 million people with disabilities in the U.S., or one in five. That has been translated to one in four church members. One fourth of every congregation lives with some disabling condition. Where are they? Why?

Clergy often feel they do not have time to call on those who are invisible to the church—even those who were once active, contributing members who have since become elderly or ill. But a call to ministry is also a call to "search out those who fall between the cracks of systems and congregations. ... when you touch and include [the life of one who is currently invisible] you are impacting a whole family, and often an extended family and other caregivers." There are many families who feel that when the church rejects their child, they reject the parents.²

- **How can a community be mobilized to respond, care, support families/persons with disabilities?**

¹ Gaventa, p. 4.

² Gaventa, p. 12.

1. Look at how the congregation supports one another: are people w/disabilities included? Do they have opportunities to provide support to others?
2. Ask what kind of support is needed; do not decide for others what they need or how they need it.
3. Don't wait for families and persons with disabilities to ask for what they need if it is obvious that changes are needed. Ask what would be helpful and then work together to achieve the goal. Too often people have to ask and fight for inclusion in the church, as well as everywhere else.

➤ **Practical needs that a congregation may help with:**

1. Buying equipment or helping locate it
2. Respite care
3. Advocacy
4. Assisting people in achieving their goals or dreams³

• **Why is there disability, illness and suffering? How does one make sense of these if one believes that God is loving and merciful?**

Below are examples frequently cited for the cause of disability:

1. **Disability is caused by evil or one is demon-possessed.**
2. **People with disabilities are “special,” angelic, holy innocents, eternal children.**

This is a fallacy—people with disabilities are as normal as other people in bad behavior, impatience, etc. “Special” still means different, and often means segregated, as in *special* programs. To be labeled *special* “is dishonest and dis-empowering. Dishonest because it fails to recognize the mutuality of giving and receiving in community and care. Dis-empowering because it too often means *I am glad you can do that because I can't or don't want to.*”⁴

Wherever there is a “special” ministry, it is ministry “to” or “for”, but not “with.” When there is ministry “with” then there is a greater opportunity for there to be ministry **by** people with disabilities.

3. **One lacks faith or would be healed. Who lacks faith?**

Harold Wilke tells this story: He was walking along the street in NYC when someone approached him and said “My friend, if your faith was strong enough, you could be healed.” To which Harold replied, “Friend, if your faith was strong enough, I would not need arms.”

Victim theology blames the one who is disabled when healing does not happen. (See my article *Healing of Bodies and Victimization of Persons...*)

³ Gaventa, p. 13.

⁴ Gaventa, p. 8.

4. **It is God's will....**

Who knows the mind of God?

Are exclusion and the barriers raised by human beings also God's will?

5. **The blemished shall not approach the altar of God (cf. Leviticus).**

6. **Whose sin is it?**

What do we do with this today when human or social behavior causes disability, e.g. fetal alcohol syndrome, smoking, drugs, AIDS, medications like thalidomide, etc.

- **What does it mean when someone says *God does not give us more than we can bear*? Is this a statement of hope and purpose that gives meaning, or is it a statement that implies a lot of resentment and anger at God?**⁵

THEOLOGICAL CONCERNS WHICH NEED FURTHER RESEARCH⁶

Pastoral Care:

"Just what is pastoral care...with people who are not fixable? What is the role of the pastor when the problem is not the disability or limitation but the attitudes toward it, not the individual but the community. It is a place for preaching, visitation, modeling, and empowering people to speak for themselves."⁷

Theology:

Disability, disease, and suffering all have implications for our theology and challenge the traditional images of God. People with disabilities "raise classical theological questions in stark, concrete ways." Might we not learn from them more about the deeper mysteries of God and the ways in which God uses experiences like disability to teach us about wholeness and healing.⁸

Mission, Outreach and Evangelism:

Many churches have signs which say "Everyone welcome." Yet, too many cannot get into the church, or once in do not feel welcome or included. "Reaching out may mean hearing the pain, anger, and distrust from people with disabilities and their families who have been rejected, used, [perhaps] abused by "religious people" in the past. It means looking at the call to concrete, specific actions that can facilitate and accommodate the participation of people who may need particular supports to be included."⁹

⁵ Gaventa, p. 10.

⁶ Gaventa, p. 21.

⁷ ibid.

⁸ ibid.

⁹ ibid.

Religious Education:

How are we inclusive so that people with differing abilities learn and grow in their faith?
Can we re-learn the power of the sacraments to speak to people in different ways—no matter how simple? Can we hear the depth of meaning expressed in the most simple terms?

Church History and Polity:

"How can we learn from church history about the ways that churches at different times and places have included or excluded people with disabilities. ...the church has sometimes justified social prejudices and practices, and sometimes acted prophetically against them. We need ... to recover the voices which have dealt in this area where people's voices have not been heard. One of the hardest issues to face in this area combines with ...our understandings of call and ordination, and policies on whether or not a person with a disability can be ordained."¹⁰

Biblical Studies:

- " What are the stories, images, and themes that have great impact and power in relation to people with disabilities and their families?
- " What can we learn from exegesis of scriptures that deal with people with disabilities?
- " How can we appreciate scriptural traditions in new ways when read and explored through the hermeneutical lens of disability?"¹¹

PASTORAL CARE

I. Be there—at crucial and critical times. At a birth, At a diagnosis. At a first struggle with appropriate schooling and services. At critical transitions, when old and new questions are raised again. Be willing to ask questions, listen to the story—the lamentations, the anger, joys, dreams and frustrations. —the lamentations, the anger, joys, dreams and frustrations. You do not have to have the answers.¹²

Be present to families or people with disabilities by asking questions and entering the story. By being there when it is appropriate and being welcoming when they come to you and to church.

II. As a minister, one is always a spiritual guide. Through pastoral care, or perhaps spiritual direction, one walks with others on the path to God. One cannot do that unless they have someone walking with them and guiding them on the way. **ONE MUST PAY ATTENTION TO THEIR OWN SPIRITUAL LIFE BEFORE THEY CAN ATTEND TO OTHERS.**

- Continue to read and reflect on the significant theological questions in life:
 - What is God's will?
 - What is God's purpose?
 - Why is there evil and suffering, and where is God in these experiences?
- **Learn to live into the questions. Learn to live with ambiguity. Life is not black or white and trying to make it that way will lead one away from God. Be willing to wrestle with the questions of life and with God and encourage your parishioners to do the same. It is the path of growth and change.**

¹⁰ Gaventa, p. 23.

¹¹ Ibid.

¹² Gaventa, p. 8-9.

The World Health Organization definitions of disability

“A disability is first of all an impairment. Something biological or physical has happened which causes a difference. It could be an extra chromosome. It could be a lack of oxygen at birth. It could be another genetic “defect.” It could be environmental pollution. It could be an illness after birth. It could be an accident. There is a physical basis, even though the root causes of many forms of mental retardation and some disabilities are unknown.

“Second, that impairment causes some level of dis-ability...the lack of being able to function in assumed, normal ways. Thus, [one] may not be able to walk. [One] may not be able to think as quickly or clearly. [One] may not be able to see. ...the level of disability is impacted by context. In some cultures or contexts, the same kind of impairment may be much more disabling than it is in another.

“Third, what do we think about the impairment and disability? What is the value judgment placed on that difference? That is the “handicap,” just as we use the word in a race or golf game, a socially imposed value judgment about a difference or a lack of ability [which may also be a judgment].”¹

The definition of *handicap* is that it is an environmental barrier. Stairs *handicap* people who use wheelchairs or have mobility impairments. Attitudes *handicap* people with disabilities whenever they cause exclusion for any reason.

WE ARE NOT ALL DISABLED! *This is a patronizing and dismissive platitude which fails to accept the realities of what it means to live with a disability.* While we all live with some form of limitation or vulnerability, we do not all live with the barriers and consequences of disability. Those who live with disabilities live with different value judgments placed on their lives.

¹ Bill Gaventa. “Pastoral Care with People with Disabilities and Their Families: An Adaptable Module for Intro Courses.” A paper: Disability, Spirituality, & Healing. Dr. Nancy Lane

Annotated Bibliography

BIBLIOGRAPHY FOR

DISABILITY, HEALING, AND SPIRITUALITY

This bibliography includes works which address various aspects of living with physical disability, mental retardation, and chronic illness. Many of the sections, including healing, theology, theodicy, spirituality, and suffering include books which do not address disability in particular, but cover the issues raised by the presence of disability and limitation in the human condition. Most of the books on healing do not address disability at all but do speak to healing as a transformative process. Healing and transformation may mean learning to live with a disability rather than suffering from it. Many of the works listed reflect my interest in Jungian studies and the importance of the relationship between psychology, spirituality and physiology. Some of the works listed under healing also reflect some of the new study being done on the *bodymind*—which have parallels with Jesus' understanding of the whole person.

ABUSE AND DISABILITY

Cole, Sandra S. "Women, Sexuality, and Disabilities," in *Women and Therapy*. New York: The Haworth Press, 1988.

Connors, Debra. "Disability, Sexism and the Social Order," in Susan E. Davies and Eleanor H. Haney, eds., *Redefining Sexual Ethics: A Sourcebook of Essays, Stories, and Poems*. Cleveland, Ohio: Pilgrim Press, 1991.

Groce, Nora E., "Special Groups at Risk of Abuse: The Disabled" in *Abuse and Victimization Across the Life Span*, Martha B. Straus, ed. Baltimore: The John Hopkins University Press, 1988.

Poling, James Newton. *The Abuse of Power: A Theological Problem*. Nashville: Abingdon, 1991.

The abuse of power has become a poorly understood epidemic in our churches and in society. Poling articulates the problem, the causes, and the consequences. This book is must reading for anyone who has a position of power over others, and for all people who know themselves to be vulnerable or who may have been abused by someone in a position of authority or trust.

Sobsey, Dick. Sharmaine Gray, Don Wells, et al. *Disability, Sexuality and Abuse: An Annotated Bibliography*. Baltimore: Paul H. Brookes Publishing, 1991.

People with disabilities often experience abuse for years. The magnitude of this threatens their dignity and rights. In an effort to get the necessary information to professionals, family members and advocates, Sobsey has gathered a wide range of resources relevant to sexual abuse and exploitation of people with disabilities. A valuable resource for people concerned with abuse.

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Sobsey, Dick. *Violence and Abuse in the Lives of People with Disabilities*. Baltimore: Brooks, 1994.

The reality of abuse in our culture has gained greater recognition and various programs exist to provide support for people wanting to move out of abusive situations. Sobsey speaks passionately and with urgency to the continual silence about the staggering incidence of abuse of people with disabilities. People with disabilities are generally abused by family members, therapists, or caregivers upon whom they are dependent. Their vulnerabilities put them at greater risk for further abuse so they are fearful or reluctant to identify their abusers. Sobsey provides clear guidance for identifying abuse and working to change the social situations that perpetuate abuse. This book is for everyone who works with and advocates for people with disabilities.

ABUSE ISSUES (General):

I have not provided separate annotations for the books listed on domestic violence. None of them deal specifically with issues of women with disabilities, but speak to the primary characteristics of abuse: violation of boundaries, control and domination, instilling fear and low self-esteem, blame, intimidation, and isolation.

Davidson, Terry. *Conjugal Crime, Understanding and Changing the Wifebeating Problem*. New York: Hawthorn Books, 1978.

Dobash, R. Emerson and Russell Dobash, *Violence Against Wives*, New York: The Free Press, 1979.

Dworkin, Andrea. *Woman-Hating*. New York: E. P. Dutton, 1974.

Enroth, Ronald M. *Churches That Abuse*. Grand Rapids, Michigan: Zondervan Publishing House, 1992.

There are many authoritarian churches using guilt, fear, and intimidation to mislead people. This abuse of power (usually by male clergy) causes spiritual abuse and leads to spiritual confusion. Enroth defines "abusive churches" and gives ten identifying traits. This book is for counselors, pastors, doctors, and those needing help.

Eugene, Toinette. "While Love is Unfashionable: An Exploration of Black Spirituality and Sexuality," in Andolsen, et al, *Women's Consciousness, Women's Conscience*. New York: Harper & Row, 1985.

Fortune, Marie. *Is Nothing Sacred?* San Francisco: Harper, 1989.

This book is essential reading for anyone who has been exploited and betrayed by a clergy person or who works with people who have been sexually exploited in the church.

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Fortune, Marie Marshall. *Sexual Violence, The Unmentionable Sin*. New York: Pilgrim, 1983.

Sexual violence continues to be surrounded by silence. The sexual violence of people with disabilities is not acknowledged or discussed. While this book is meant to help the religious community understand sexual violence, it is useful to anyone responding to a victim or providing counseling.

Herman, Judith Lewis. *Trauma and recovery*. Basic Books, 1992.

This has quickly become the required text for understanding the nature of trauma and the process of healing. While the book does not address issues of disability, I believe the book has significant implications for people with disabilities because they experience such a high incidence of abuse either from family or care-givers, or from the medical profession.

Jay, Jeffrey. *The Fracturing of Trauma*. (two tapes) Boulder, Co.: Sounds True Recording, 1990.

Jones, Ann. *Next Time She'll Be Dead*. Boston: Beacon Press, 1994.

Kuester, Hilda A. *Woman Battering, Patriarchy and the Church*. D.Min. Diss., Rochester: Colgate Rochester Divinity School, 1989.

Explains how patriarchy and the Church perpetuate the patterns of behavior that give permission to men to abuse their power and deprive women of their power.

Lamb, Matthew. *Solidarity with Victims*. New York: Crossroad Publishing Co., 1982.

Martin, Del. *Battered Wives*. San Francisco: Glide, 1976.

McNulty, Faith. *The Burning Bed*. New York: Harcourt, 1980.

Moore, Donna, ed. *Battered Women*. Beverly Hills: Sage, 1979.

Pagelow, Mildred Daley. *Woman-Battering*. (Beverly Hills: Sage, 1981.

Roy, Maria, ed., *Battered Women: A Psychological Study of Domestic Violence*. New York: Van Nostrand Reinhold, 1977.

Rutter, Peter J., M.D. *Sex in the Forbidden Zone*. Los Angeles: Jeremy Tarcher, 1986.

Men in positions of trust (clergy, doctors, therapists, teachers) often abuse their power by abusing vulnerable women (and men). People with unmet emotional needs often enter into relationships with

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such men on any terms. Understanding how and why this happens is very helpful for those who are trying to heal from such a relationship and helpful for those who want to avoid becoming an unwitting participant in such a relationship.

Straus, Murray A., Richard J. Gelles and Suzanne K. Steinmetz, Behind Closed Doors, Garden City: Anchor Press, 1980.

Chapman, Jane Roberts and Margaret Gates, eds. The Victimization of Women. Beverly Hills: Sage, 1978.

ADDICTION ISSUES

Cleveland, Martha. *Living Well: A Twelve-Step Response to Chronic Illness and Disability*. San Francisco: Harper & Row, 1989.

Living with chronic illness and disability can cause tremendous emotional pain because of the challenges, barriers, and losses that one encounters. Emotional pain can be overwhelming, especially if one does not have adequate support. Addictive behaviors are common among people with disabilities, often due to medications and inadequate pain management. Cleveland shows how the twelve steps can help one to see chronic illness as an opportunity for spiritual growth that leads to acceptance and fulfillment.

May, Gerald G. *Addiction and Grace*. San Francisco: Harper and Row, 1988.

This book should be required reading for anyone who has ever been too attached to anything or anybody. May sees addiction as a behavior and a spiritual quest. As a physician, he is able to describe very clearly how addictions create a memory and response in our brain that must be changed if we are to recover. May understands both the psychological and spiritual problems that result from attachments and develops the relationship between addiction and spiritual awareness.

Miller, J. Keith. *A Hunger for Healing: The Twelve Steps as a Classic Model for Christian Spiritual Growth*. HarperSanFrancisco, 1991.

Miller brings the twelve steps together with biblical teaching in ways designed to help one move out of self-centered, controlling behavior. He offers a model that fosters spiritual growth as he believes addictions are indicative of spiritual problems. The steps are developed in ways that lead one on a pilgrimage toward healing and wholeness.

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BIBLICAL STUDIES

Borsch, Frederick. *Power in Weakness: New Hearing for Gospel Stories of Healing and Discipleship*. Philadelphia: Fortress, 1983.

Borsch studies nine New Testament stories that explore "the relationship between psychological and physical illness and health, between sin and sickness, forgiveness and salvation." He shows how God is present in a world full of contradictions and paradoxes. The point in understanding these stories is **not** about removing disability. Rather, the point is in learning to understand what wholeness and healing mean for our lives, which often includes living with a disability.

Fuller, Reginald H. *Interpreting the Miracles*. London: SCM Press, Ltd., 1963.

"The biblical view of miracles runs counter to the accepted view of miracle as an occurrence contrary to the laws of nature..." In fact, miracles do not prove anything; instead they challenge faith. Secondly, miracles do not have to be extraordinary events. They usually have a symbolic or spiritual meaning which points beyond itself.

Govig, Stewart D. *Strong at the Broken Places: Persons with Disabilities in the Church*. Louisville: Westminster John Knox, 1989. **Out of Print but still available through Amazon.com**

This is an important book, written by a minister who has lived with a disability. Govig examines the attitudinal barriers and investigates biblical resources for addressing them. Govig's biblical knowledge of the healing stories confront the church with the negative issues that have been used to shut people with disabilities out of the community. He shows how the bible points to the inclusion and fellowship of all people in ministry.

Hendrickx, Herman. *The Miracle Stories: Studies in the Synoptic Gospels*. San Francisco: Harper & Row, 1987.

A good resource for serious study of the healing stories and for preaching on those stories.

Kee, Howard Clark. *Medicine, Miracle and Magic in New Testament Times*. Cambridge: Cambridge University Press, 1986.

Gives a full historical account of how medicine, miracle and magic were understood in the ancient world. While this is a scholarly book, it is important for anyone who preaches on the healing stories or is trying to gain an accurate understanding of biblical healing—as opposed to the misguided teachings of those who suggest that disability is due to sin, evil, or lack of faith.

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Latourelle, Rene'. *The Miracles of Jesus and the Theology of Miracles*. Mahwah, N. J.: Paulist Press, 1988.

Another historical account of the miracle stories and their meaning as evidence of God's presence to us. Good for those who are serious students or who are preaching. Serious study of the healing stories can be arduous, but the reward comes in having a more complete understanding of what healing means—especially if one lives with chronic illness or disability. Healing is less about the removal or absence of a disability and more about the state of one's life and soul.

Richardson, Alan. *The Miracle Stories of the Gospels*. London: SCM Press, Ltd., 1975.

While this book is also scholarly, it is very accessible to the interested reader. It is also a small book but every sentence is filled with meaning. Richardson also sees the miracle stories as intending to awaken faith. This aspect alone takes on significance when one considers how often people with disabilities have had their faith shattered by the pronouncements of church people.

Seybold, K. and Mueller, U. B. *Sickness and Healing*. Nashville: Abingdon, 1981.

Two German scholars survey the Old and New Testament for an understanding of the historical view of sickness. Their intention is to show that healing has to do with finding meaning in suffering rather than eliminating illness.

StuhlmueLLer, Carroll. *An Old Testament Response to the Challenge from Sickness and Disability*. Canfield, OH: Alba House Cassettes, 1991.

Carroll StuhlmueLLer and Donald Senior team-taught a course on disability and healing in biblical perspectives at Catholic Theological Union (Chicago). These tapes come out of Fr. StuhlmueLLer's work for that class. His deep understanding of biblical, theological, pastoral and spiritual issues related to disability are reflected here.

DEPRESSION AND SPIRITUALITY

Most of the following books do not speak specifically to disability. Some of them do not even speak directly to depression. However, they all speak in some way to the issues which contribute to depression: abuse, self-image, loneliness, wounds of the past, who we are.

Berg, Richard F. and Christine McCartney. *Depression and the Integrated Life*. New York: Alba House, 1981.

This is an excellent little book if you can find it. It shows that depression can have a purpose in our lives if we seek to understand what it is saying to us or asking us to do.

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Bolen, Jean Shinoda. *Ring of Power: The Abandoned Child, the Authoritarian Father, and the Disempowered Feminine*. San Francisco: Harper, 1992.

Bolen is a Jungian analyst, who uses Wagner's *Ring Cycle* opera to show us the power of psychological healing. The opera articulates how the dysfunctional family and the patriarchal society are places where the quest for power distorts our relationships. Thus, our ability to speak the truth or to act on what is true for us is prevented. Once we recognize these patterns we are set free to recognize our feelings and to know what gives our life meaning. Then we are free to speak our truth and act on it. Accordingly, this is a very significant book for people with disabilities, whose truth is often denied by those who see themselves as having more power. I think this book may also help one to begin seeing that real power is not related to health, money, and job status. Rather, real power comes from within—from the freedom to be who one is and to speak one's truth.

Campbell, Alastair V. *The Gospel of Anger*. London: SPCK, 1986.

Essential reading for anyone who has experienced anger personally or in working with others. Anger is often regarded as a destructive emotion—and can, in fact, be destructive. Campbell shows how anger can be used as a creative power for change. He also talks about anger that is the "fire of love"—a fire that works for justice and love. Many people with disability live with the anger of fighting too many unnecessary barriers and not having access to places and people that would contribute to a quality of life. If we express this anger, we are labeled "angry"—which serves to dismiss us as persons and to dismiss our need for access. This book helps one to see how anger is often the only appropriate response to intolerable situations and we should not be silenced by those who would use anger as a derogatory label.

Clift, Jean Dalby and Wallace B. Clift. *Symbols of Transformation in Dreams*. New York: Crossroad, 1986.

Healing is always about transformation. Dreams are often the guide to what needs to be transformed in our lives. This is a good book for beginners who want to understand their dreams. Both authors are trained in Jungian thought and write with clarity and understanding of how our spiritual reality pushes us toward wholeness.

Furey, Robert J. *So I'm Not Perfect*. New York: Alba House, 1986.

Furey is a psychologist who understands the feelings of shame and inferiority that keep people from self-acceptance. His chapter "On being different" speaks well to the issues people with disabilities confront on their way to self-acceptance.

Houston, Jean and Robert Masters. *Listening to the Body*. New York: Delta, 1978.

Helpful book for learning to listen to your body and draw on your inner resources. The book has a number of useful imaging techniques for getting in touch with your body. Since people with physical disabilities are often *dis-embodied*, this book is a resource for becoming *embodied*.

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Houston, Jean. *The Search for the Beloved*. New York: St. Martin's Press, 1987.

Houston uses myth and archetype to understand the spiritual journey to wholeness. A good book with exercises for starting the healing journey of transformation.

Kane, Thomas. *The Healing Touch of Affirmation*. Whitinsville, MA.: Affirmation Books, 1976.

This book is described as a "psychotheology of affirmation." It is an invitation to live in the present moment, rather than in the past or fearing the future. Kane's concern for healing arises from the part that affirmation plays. Affirmation gives strength and depends on the healing *touch* of others—those who accept us as we are. People with disabilities, people who have been abused, often lack the healing touch of affirmation in their lives. This book helps them identify the problems which arise from this lack of touch, and helps others to see the importance of affirmation in the healing process.

Kelsey, Morton T. *God, Dreams and Revelation*. Minneapolis: Augsburg Publishing House, 1968.

Kelsey is a theologian, Jungian analyst and one who has known disability in his life. His book is considered the ground-breaking text on understanding how God speaks to us in our dreams.

Luke, Helen. *From Dark Wood to White Rose: Journey and Transformation in Dante's Divine Comedy*. New York: Parabola Books, 1989.

Dante's *Divine Comedy* is the most complete exploration of the journey from despair to union with God that has ever been written. The journey begins in the "dark wood" of lost innocence and wanders through despair and blindness until Dante reaches the white rose. This has been called the journey of *individuation*, the path to consciousness and wholeness. It is a journey of many death and resurrection experiences. Luke is a Jungian analyst who shows us how this journey transforms our lives until we reach a place of equilibrium in body, mind and spirit.

Madott, Bertha Catherine. *Sunshine and Shadow: Depression and Spirituality*. Paulist Press.

McCloskey O.F.M., Pat. *When You Are Angry with God*. New York: Paulist Press, 1986.

A good introduction to understanding one's anger at God—especially if one is afraid of expressing such a feeling. When life appears to be unfair or suffering is not understood, the natural response is anger at God. Being in touch with this feeling will help us establish a new relationship with God. McCloskey says unlocking the anger about life's unfairness leads us to peace.

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Moore, Thomas. *Care of the Soul: A Guide for Cultivating Depth and Sacredness in Everyday Life*. New York: Harper Collins, 1992.

When one is busy caring for the needs of the body and mind, one may not pay attention to the needs of the soul. Moore shows us how the wounds of life (e.g. disability, suffering, etc.) are windows on the soul if we are attentive to the care of the soul. He shows us how to look beyond therapeutic models of self-improvement until we can sense the sacredness of ordinary life. If you have never thought about your disability as an occasion for sensing the sacred, let this book be a guide for learning how you might do so.

O' Heron, Edward J. *Your Life Story: Self-Discovery and Beyond*. Cincinnati: St. Anthony Messenger Press, 1993.

This is an excellent book for learning how to tell your story—and how to learn what your story means for your life.

Pearson, Carol S. *Awakening the Heroes Within*. San Francisco: HarperSanFrancisco, 1991.

I use this book with my healing groups and it always stimulates deep discussion and insight into how one moves forward or why one is stuck. Using twelve archetypes, Pearson helps us discover who we are and why—which helps us in the transforming and healing process. A good book for helping people with disabilities to understand their strengths and how to use them in creative ways.

Potter-Efron, Ronald & Patricia. *Letting Go of Shame*. San Francisco: Harper and Row, 1989.

Shame is a powerful but destructive emotion. The author's are addressing people who grew up in dysfunctional families and were abused as children. They understand how shames disconnects us from ourselves, family, and community and leads to despair. The nature of shame is explored and practical exercises are given at the end of each chapter. People with disabilities internalize shame for many reasons, including abuse. While the book does not speak to disability, it addresses the universal experience of shame and thus is very helpful. It is an excellent book.

Ripple, Paula. *Growing Strong at Broken Places*. Notre Dame: Ave Maria Press, 1986.

Ripple writes about healing our pain. Pain can be an intolerable companion or it can be a guide leading us beyond ourselves. The book helps one to reflect on suffering and how one can find growth through this experience.

Rohrer, Norman and S. Philip Sutherland. *Facing Anger*. Minneapolis: Augsburg, 1981.

Anger gets turned into an asset that reflects love and a concern for justice. Anger promotes growth and shows the depths of one's ability to care.

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Rosen, David H. *Transforming Depression: A Jungian Approach Using the Creative Arts*. New York: G. P. Putnam, 1993.

This is the best book I have read about depression and offers concrete hope for the healing process. Rosen understands the purpose and meaning of re-birth in the healing and transformative process. Depression is regarded as having meaning and purpose in calling one to seek meaning to life, mourn the losses, and allow the ego to die in order for the true Self to emerge.

Rosenthal, Norman E. *Winter Blues: Seasonal Affective Disorder: What it is and How to Overcome It*. New York: Guilford Press, 1993.

Serious book, written by an expert. Explains how light affects metabolism and mood. Has questionnaire for self-evaluation. Self-help techniques.

Saussy, Carroll. *The Gift of Anger*. Louisville: Westminster John Knox, 1995.

This is one of my favorite books on anger. Saucy explores the many dimensions of anger and how we can use it destructively or constructively. She recommends that we "befriend" our anger and serve God through expressions of "holy anger." People with disabilities are often labeled "angry" when they express appropriate reaction to the barriers of discrimination and exclusion. The effect is to deny the legitimacy of our anger and to dis-empower us. For those who seek justice, who refuse to tolerate the intolerable, this is a book to read and remember.

Siegel, Bernie. *Peace, Love and Healing*. San Francisco: Harper, 1990.

Siegel is an oncologist who has helped his patients with cancer transform their lives. This book explores how the mind influences the body and how this knowledge influences our path to healing. Siegel is not suggesting mind over matter. He is wisely teaching people how to understand the body-mind connection and the ways in which all of us can be full participants in our healing—a healing that may not remove a disability but enables us to maintain a better quality of life.

Simons, Sidney and Suzanne Simon. *Forgiveness: How to Make Peace with Your Past and Get on With Your Life*. New York: Warner Books, 1990.

Depression is a reminder that something is pressing us down. This is all too often the heavy burden of the hurt, betrayal, and wounds that we carry. While this book originated around Suzanne's experience of incest, it is a wise and profound book for helping one to work through anything which needs letting go and finding the healing that comes with forgiveness. Forgiveness is what we do to liberate ourselves and accept God's love.

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Smedes, Lewis B. *Forgive and Forget: Healing the Hurts We Don't Deserve*. San Francisco: Harper & Row, 1984.

Smedes takes us through the stages of forgiveness: hurting, hating, healing, and reconciliation. He provides realistic answers for forgiving the "unforgivable" and talks about forgiving God. He shows us that forgiving is what we do for ourselves—getting free of the hurt and betrayal of others. One note of caution: the title suggests that when we forgive we should then forget what happened. Writer's in the '90's suggest that it is very important that we forgive and **remember**—**remember** what was done to us so that no one can do it to us again.

Storr, Anthony. *Solitude: A Return to the Self*. New York: The Free Press, 1988.

Storr reminds us that true health and happiness is based upon our ability to live in peace with oneself. Many people avoid being alone in order to avoid hearing their own voice—or the voice of God. Solitude is essential to hearing that inner voice and to knowing who we are and where we have been. Storr examines how solitude heals during mourning, periods of stress, and while sleeping. Above all, solitude is necessary for insight and for tapping into our creativity. **For those for whom solitude is a daily necessity (rather than chosen) this book can help one to find meaning to what may feel meaningless.**

Tavris, Carol. *Anger: The Misunderstood Emotion*. New York: Simon and Schuster, 1982.

Tavris is a psychologist and writes about the research that exploded the myths about anger. Anyone who has experienced being labeled angry for their illness, disability, weight, depression, etc. will want to read this book.

ETHICAL AND MEDICAL ISSUES

Feminist Perspectives in Medical Ethics. Bloomington: Indiana University Press, 1992.

Hauerwas, Stanley. *Naming the Silences: God, Medicine, and the Problem of Suffering*. Grand Rapids, MI: Eerdmans Publishing Co., 1990.

"Why does a good and all powerful God allow us to experience pain and suffering? Drawing heavily on stories of ill and dying children to illustrate and clarify his discussion of theological issues, Hauerwas explores why we seek explanations for suffering and evil so desperately..." (book cover).

Hauerwas, Stanley. *Suffering Presence: Theological Reflections on Medicine, the Mentally Handicapped, and the Church*. Notre Dame, IN.: University of Notre Dame Press, 1986.

Hauerwas presents a theological perspective to the medical ethics debate that asks us to consider suffering and caring.

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Hauerwas, Stanley, with Richard Bondi and David B. Burrell. *Truthfulness and Tragedy*. Notre Dame: University of Notre Dame Press, 1977.

These essays discuss Christian ethics and speak to the particular issues of suicide, population control, and care of people with mental retardation.

FEMINISM AND DISABILITY

Browne, Susan E., Debra Connors, and Naci Stern. *With the Power of Each Breath: A Disabled Women's Anthology*. Pittsburg: Cleis Press, 1985.

Although this book has been out for many years now, it remains a book that breaks the silence of women with disabilities. These are the stories that need to be told again and again until they become part of the larger story of women. These stories challenge the able-ism that continues to oppress and marginalize women with disabilities.

Driedger, Diane, Irene Feika, and Eileen Giron Batres (Eds). *Across Borders: Women With Disabilities Working Together*. Gynergy Books/Ragweed Press, 1996.

The women with disabilities movement is at the forefront of partnership and cooperation internationally. This book portrays the multi-faceted work by women with disabilities from the developed and developing world. Through literacy and economic development projects, and community organizing, women with disabilities collaborate to improve their standard of living and create new opportunities for themselves and their communities. Political activism combines with personal stories in these topical accounts from around the world. *Across Borders* illustrates how women can learn from each other and grow together - across many kinds of borders.

Encounters with Strangers: Feminism and Disability. London: Women's Press, 1996.

Hillyer, Barbara. *Feminism and Disability*. University of Oklahoma Press, 1993.

This was a difficult book to read because it is so uneven and the author has a clear agenda: to defend her views as a parent against the views (rights?) of her daughter who is disabled. One book review sees the book ending up as a *political solipsism*—"an inability to move beyond one's personal experience and take into account the lives and needs of others." Hillyer's antagonism to the disability rights movement runs so deep that one must ask if she ever understood feminism—from which the disability rights movement took lessons. Hillyer does not think women with disabilities should have children, get married, or disagree that "mother knows best." It has been noted that this book "will do real damage to any potential for alliances between feminists and disability rights activists" (*The Witness*, June 1994, 29).

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Rousso, Harilyn. *Disabled, Female, and Proud! : Stories of Ten Women With Disabilities.* (Out of Print)

Women with disabilities face a double set of prejudices, based on gender and disability. The world too often sees them in terms of stereotypes: childlike, dependent, incompetent, asexual, unable to take on the role of worker, sexual partner, or mother. As a result, women with disabilities are left confused about who they are, and who they can become. In this exploration into the lives of ten women with disabilities, Rousso hopes to remedy this confusion. To some degree, all of the successful, adult women profiled in this book have faced these same prejudices about their potential at school, at work, or in their social lives. But they have found ways to make satisfying choices for themselves despite the barriers, and they invite women of all ages to draw upon their experiences to do the same. Rousso encourages and charges women with disabilities to make choices which go beyond society's stereotypes and reflect their own unique talents, interests, and dreams, while at the same time taking into account their real limitations and needs.

Morris, Jenny (ed). *Pride Against Prejudice: Transforming Attitudes to Disability.* Philadelphia, PA: New Society, 1991.

Morris is a feminist and a woman with a disability. She confronts the nature of prejudice and examines the politics of the disability rights movement in the emerging disability culture.

Panzarino, Connie. *The Me in the Mirror.* Seal Press, 1994.

Born with a rare muscle disease, the author recounts the challenges of growing up disabled. Her experiences along the way are horrendous and she speaks with forthright honesty about the frustration and anguish. Panzarino is also a lesbian, art therapist, and political activist. Her book is eye-opening.

Saxton, Marsha and Florence Howe. *With Wings: An Anthology of Literature By and About Women with Disabilities.* New York: The Feminist Press, 1987.

This is an important book because it gives voice to the many experiences women with disabilities live with—from rage and pain, to social dis-empowerment to the triumph of empowerment. It illuminates understanding and provides a springboard for years of research.

Soelle, Dorothee. *The Strength of the Weak: Toward a Christian Feminist Identity.* Philadelphia: Westminster, 1984.

Soelle looks at dehumanizing elements in our society which oppress people. She writes that "people are still dying today from the indifference of others who do not want rebellion and do not need resurrection." While disability is not one addressed, Soelle's theo-political critique of modern society provides a basis for understanding why a disability rights movement in the Church will need to be radical.

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Thomson, Rosemarie Garland. *Extraordinary Bodies: Figuring Physical Disability in American Culture and Literature*. New York: Columbia University Press, 1997.

Historical, psycho-social, feminist look at how the female, disabled body has been understood and portrayed in literature. The author explores embodiment, disembodiment, and the poetics of particularity.

Wendell, Susan. *The Rejected Body: Feminist Philosophical Reflections on Disability*. Routledge: 1996.

Willmuth, Mary E. and Lillian Holcomb (Eds.). *Women With Disabilities : Found Voices*. Binghamton, NY: Haworth Press, 1994.

From Booknews, Inc. "Both women with disabilities and women professionals who work with persons with disabilities address many concerns about life with a disability and issues related to disability and psychotherapy. Also published as *Women & Therapy*, v. 14, nos. 3/4, 1993."

GENERAL DISABILITY STUDIES

Bauby, Jean-Dominique. *The Diving Bell and the Butterfly*. New York: Alfred Knopf, 1997.

In 1995, Jean-Dominique Bauby was the editor-in-chief of French Elle, known and loved for his wit, his style, and his impassioned approach to life. By the end of the year he was silent after a rare kind of stroke to the brainstem. After 20 days in a coma, Bauby awoke in a body which had all but stopped working: only his left eye functioned, allowing him to see and, by blinking it, to make clear that his mind was unimpaired. He was soon able to express himself in the richest detail: dictating a word at a time, blinking to select each letter as the alphabet was recited to him slowly, over and over again. In the same way, he was able eventually to compose this extraordinary book.

Bauby bears witness to his determination to live as fully in his mind as he had been able to do in his body. He explains the joy, and deep sadness, of seeing his children and of hearing his aged father's voice on the phone. In magical sequences, he imagines traveling to other places and times and of lying next to the woman he loves. Fed only intravenously, he imagines preparing and tasting the full flavor of delectable dishes. Again and again he returns to an "inexhaustible reservoir of sensations," keeping in touch with himself and the life around him.

Carter, Rosalynn. *Helping Someone with Mental Illness*. New York: Random House, 1998

This is an important book about living with mental illness and is written to help families, caregivers, and pastors understand mental disorders, their treatment, and the effects on families and caregivers. Concrete suggestions are made on research, treatment, and eliminating negative stereotypical information about mental illness.

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Charlton, James I. *Nothing About Us Without Us : Disability Oppression and Empowerment*. University of California Press, 1998.

"The oppression of 500 million people with disabilities is rooted in the political-economic and cultural dimensions of everyday life", says Charlton. Calling his book part descriptive, part conversational and wholly argumentative, the author observes how oppression and empowerment affect and change individuals and the community. Charlton's interviews with 45 international disability rights activists and his own observations as an activist recognize the essential theme of the disability rights movement: a demand for self control and conditions resulting from the lack of it. The author's threefold mission challenges existing epistemologies and ontologies of disability. With a close eye on Marxist theory, Charlton explains existing practices and suggests new foundations, structures and contexts in which to think about the relationships and conditions of oppression and resistance and to understand and support disability rights.

Davis, Lennard J. (ed). *The Disability Studies Reader*. New York: Routledge, 1997.

Eisenberg, Myron G. *Disabled People as Second-Class Citizens*. New York: Springer Publishing Co., 1982.

Fine, Michelle and Adrienne Asch, (eds). *Women with Disabilities: Essays in Psychology, Culture, and Politics*. Philadelphia: Temple University Press, 1988.

Fries, Kenny. *Body, Remember : A Memoir*. Plume, 1998.

Kenny Fries, noted poet, critic, and essayist, has produced a moving and memorable memoir of what it is like to live with a body you are told is less than perfect. Fries was born with incompletely formed legs, a congenital birth defect that had no scientific name but entailed multiple surgeries just to partially correct. In *Body, Remember*, Fries, with patience and forbearance, travels back through his life--examining medical records, family papers, his own and his parents' memories--to uncover how he became who he is today. Fries's search is, in part, a mystery not simply because he uncovers many details of his early life unspoken within the family, but through its charting of the discovery of his sexual desire and identity. While much of Fries's memoir is a beautifully written elucidation of what it means to be "different," its fire and heart comes from its author's growing sense of self and dignity as he examines and learns to understand the scars on his psyche as well as on his body.

Fries, Kenny (ed). *Staring Back: The Disability Experience from the Inside Out*. New York: A Plume Book, 1997.

In this groundbreaking and far-reaching collection, writers such as Andre Dubus, Stanley Elkin, and Adrienne Rich, confront what it means to be disabled in our society. Through the vehicles of nonfiction, poetry, fiction, and drama, *Staring Back* is the first anthology to open the landscape of the disabled experience for exploration and discussion.

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Gallagher, Hugh Gregory. *By Trust Betrayed: Patients, Physicians, and the License to Kill in the Third Reich*. Arlington, VA: Vanadmere Press, 1995.

"Gallagher's strong study of the murder of disabled people in the Third Reich receives new attention in a revised edition which includes some modern sentiments and moral issues relating to both the events of the past and the concerns of modern times" (Midwest Book Review).

Gallagher, Hugh Gregory. *Black Bird Fly Away : Disabled in an Able-Bodied World*. Arlington, VA.: Vandamere Press, 1998.

Gallagher's moving autobiographical account traces the growth of his self-understanding and the unfolding of a remarkable career that has opened up many possibilities for disabled and able-bodied people. Gallagher, who contracted polio when he was a college student, writes of his feelings and reactions to the iron lung, hospitalization, and rehabilitation. "His stay at Warm Springs, Georgia, strengthened his body, and a Marshall Fellowship at Oxford strengthened his resolve. Working for two senators for nine years in Washington not only trained Gallagher in the methods of politics but produced many improvements for the disabled, ranging from a ramp at the Library of Congress to the development and enactment of the Architectural Barriers Act" (Book Review). Gallagher also writes very movingly about his long bouts of clinical depression.

Keith, Lois (Ed). *'What Happened to You?' : Writing by Disabled Women*. New Press, 1996.

After becoming disabled at age 35, Lois Keith found herself "living in a society which had permission to exclude me from things I had grown to consider my right." She learned writing gave her relief, pleasure, and the key to a new community. The essays, fiction, and poetry she gathered for *What Happened to You?* share differing experiences of women who are disabled or ill.

Linton, Simi. *Claiming Disability: Knowledge and Identity*. New York: New York University Press , 1998.

From the Foreword by Michael Bérubé "...the first comprehensive examination of Disability Studies as a field of inquiry, has just been published by NYU Press. In the past twenty years, Disability Studies has arisen to focus an organized critique of the conceptualizations of disability that have dominated academic inquiry. Disability Studies explains disability as a socially constructed category, rather than simply a product of birth or accident. The field offers a means to think critically about disability, a means that can serve both scholarship and social change. *Claiming Disability* examines the intellectual as well as the political roots of disabled people's compromised social position and challenges the academic community to reckon with its own role in perpetuating a divided society.

Claiming Disability looks at the problematic history of society's response to disabled people, and captures the exciting changes taking place in the lives of disabled people. Simi Linton comments on the social and political change that is evident in reading the daily newspaper or observing newly integrated primary and secondary classrooms, and also describes the exciting change in thinking about disability, embodied in the field of disability studies. The book points optimistically

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toward the actions of the disability rights movement and the social change it has! brought about, and points to the innovative scholarship in disability studies, both endeavors reshaping disabled people's lives, and more broadly shaping a new, more inclusive society. The title, *Claiming Disability*, captures the active voice of disabled people in asserting their role in shaping both knowledge and identity. A persistent call heard from the disability community is: "Nothing about us, without us." This idea pervades *Claiming Disability*, which is critical of oppressive practices and proactive in its approach to disabled people's self-determination.

Mairs, Nancy. *Waist-High in the World: A Life Among the Nondisabled*. Boston: Beacon Press, 1996.

Look for Mairs' books and articles in *Christian Century*. She explores issues related to life, spirituality and faith, as one with a disability. Mairs writes with honesty and wit about her experiences as a woman with a disability in a world that does little to accommodate her. Some of her writing reflects her theological struggle with faith issues

Mitchell, David T. and Sharon Snyder (eds). *The Body and Physical Difference: Discourses of Disability in the Humanities*. University of Michigan Press, 1997.

Nolan, Christopher. *Under the Eye of the Clock*. New York: St. Martin's Press, 1987.

Christopher Nolan is severely disabled and unable to use speech to communicate. This is his second book and reflects a sense of language that expands beyond its own boundaries. He has been compared to Joyce because of his extraordinary skill in using words. In this book, Nolan confronts the battlefield of his faith.

Russell, Marta. *Beyond Ramps : Disability at the End of the Social Contract*. Common Courage Press, 1998.

"What Ralph Nader did for the consumer movement in his book *Unsafe at Any Speed*, Marta Russell has accomplished in her riveting *BEYOND RAMPS*. No one, left, right, or center, who reads this book about the role of the 'disabled' and the 'terminally ill' and the way they are treated will come away unchanged. Russell has centered our attitude in a historical stream of thought, which will at first make people stunned and ashamed, and then cause us hopefully to change the way we behave" (Marcus Raskin)

Marta Russell exposes the neoliberal drive to shrink social services with the Reinventing Government mantra. "We are dangerously close to a Jerry Lewis democracy where middlemen beggars and corporate CEOs getting huge paychecks may replace entitlements with charity," reveals Russell in her devastating analysis of the "reform" of the social safety net. (A WARNING FROM AN UPPITY CRIP.)

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Scarry, Elaine. *The Body in Pain: The Making and Unmaking of the World*. New York: Oxford University Press, 1985.

The book begins by considering that "intense pain is indescribable," then moves outward into the political consequences of this inexpressibility. Pain survives in the culture, and can be used as a political tool, precisely because of its muteness. This first half of the book, entitled "Unmaking", corresponds well to Dante's *Inferno*. The book's second part, corresponding to Dante's *Purgatorio*, describes how humans move out of pain by creating the world of made objects. The reading of the Hebrew and Christian scriptures that begins this section deserves much wider attention. Scarry reads these texts as an archetypal story of how pain led to creation. Scarry presents this story with a warm, generous, jargon-free style. The latter sections in each of the two halves (the first on war, the latter on the texts of Marx) seem to step down from the pinnacles of each half's beginning. The reader can be forgiven for setting down the book at the end of the section on the scriptures, feeling that Scarry's powerful effect is complete. Scarry's book is a welcome reminder that we are all bodies, and that beneath our divisions of race, class, and gender, we all share a pain that drives us to create our world (Janet Walker).

Shapiro, Joseph P. *No Pity: People with Disabilities Forging a New Civil Rights Movement*. New York: Random House, 1993.

This is a wonderful history of the Disability Civil Rights Movement. It provides the background history of how the ADA came about. The stories of real people who wanted to die are explored in depth to shatter the assumptions that our lives are not worth living. The ethical implications of the value of the life of a person with a disability are set forth with clarity and needs to be understood by people with disabilities, their families, advocates, medical professionals and clergy.

Zola, Irving Kenneth. *Meaningful Relationships/Moments In Time*. 1996. Judy Norsigian, 43 Waban Hill Rd, N., Newton, MA. 02167. \$10.00.

Zola's wife Judy has published these short stories by Zola, written before he died in 1994. Zola reminds us of the importance of telling stories and writes that "love, fear, and vulnerability are all intertwined with having a disability. This intertwining has political aims shared by many of us involved in the disability rights movement."

GRIEF

Bell, John L. *The Last Journey: Songs for the Time of Grieving*. CD with prayer book New York : Paulist Press.

Bozarth, Alla Renee. *At the Foot of the Mountain: Discovering Images for Emotional Healing*. Minneapolis: CompCare, 1990.

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Bozarth, Alla Renee. *Life is Goodbye Life is Hello: Grieving Well Through All Kinds of Loss*. Hazeldon Publishers, 1986.

Bozarth is an Episcopal priest and therapist who has known loss and disappointment. Her book identifies the many kinds of losses that need to be grieved and enable one to make grieving an **action** that moves one through grief, toward healing. This book would be helpful to people with disabilities in understanding how grief feels, what it does to us physically, emotionally, spiritually and behaviorally and what you can do about it.

Droge, Thomas A. *The Healing Presence: Spiritual Exercises for Healing, Wellness and Recovery*. San Francisco: Harper, 1992.

This book has exercises using biblical imagery for promoting faith-centered wellness. Using the stories, parables and metaphors of scripture, these guided imageries are rich with healing images for those who live with chronic illness, stress, or addictions and who want to maintain wellness. An excellent resource.

Katafiasz, Karen (ed.) *Grief Therapy*. Paulist Press.

Linn, Matthew and Dennis Linn. *Healing Life's Hurts*. New York: Paulist Press, 1978.

Still a wise book on integrating medicine, psychology and religion as a method for undertaking the healing journey. The Linn's are clear that "coping" with life's hurts simply does not work. We need to bring healing to bear on those hurts or they will control and ruin our lives.

Linn, Matthew, Dennis Linn, Sheila Fabricant. *Healing the Greatest Hurt*. New York: Paulist Press, 1985.

Death is often a trauma that we go to great pains to avoid confronting because it involves broken relationships with unfinished business. Healing requires us to grieve through the unfinished business as well as all of the losses involved. This book also addresses miscarriage, aborted babies, and stillborn babies—issues to often ignored by others so repressed by the mother. The Linn's provide prayerful and wise guidance to healing these deep wounds of the heart.

Moore, Sebastian. *The Inner Loneliness*. New York: The Crossroad Publishing Co., 1982.

Augustine wrote that "Our hearts rest not, O Lord, until they rest in thee." All of us long to be known and uniquely understood. Our deepest loneliness arises there. Moore addresses how we come to be known and the role our sexuality plays in our being known—issues of spirituality and of belonging to God. A fine book for those who wrestle with loneliness.

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Rupp, Joyce. *Praying Our Goodbyes*. Notre Dame, In.: Ave Maria Press, 1988.

When we lose someone or some thing that gave our life meaning and value, we often need to re-orient our lives, and reflect on what our loss means. While this book speaks to loss and grief, it is about learning to let go in freedom, in order to move on with meaning and purpose. Each chapter provides questions, rituals for sources of strength, prayers, and stepping stones leading one to healing. It is a lovely book and reminds us that while our losses cause hurt, they are also occasions for new growth and healing.

Valles, Carlos G. *Let Go of Fear*. New York: Triumph Books, 1991.

Valles confronts the various emotional, psychological, and spiritual fears that hold us in bondage. Using his deep wisdom, he shows us how to move from fear to new life. This is a wise book and one to return to often.

Wangerin, Jr., Walter. *Mourning into Dancing*. Grand Rapids, MI.: Zondervan, 1992.

Sadness, sorrow, and grief are the result of the daily losses of hopes and dreams, of things that give meaning to our lives. These are little endings—daily death—that can give life meaning if we recognize what life is for us. Wangerin sets out the stages of grief and gives names to the many kinds of loss, as well as practical help for grieving. From mourning to dancing is about moving from grieving to living life fully.

HEALING

Barasch, Marc Ian. *The Healing Path: A Soul Approach to Illness*. New York: Putnam's Sons, 1993.

Describes the process of people faced with life-threatening illness who had to change or die. Engrossing, challenging, empowering and important contribution to the literature on healing.

Bolen, Jean Shinoda. *Close to the Bone: Life-Threatening Illness and the Search for Meaning*. New York: Touchstone (Simon and Schuster), 1998.

Bolen is a medical doctor and a Jungian analyst, who writes that "life-threatening illness is a crisis for the soul." This book is about "illness as a descent of the soul into the underworld and the healing that can result."⁴ Using the myth of Persephone, Bolen leads one through the shock, fear, anger and depression that comes with illness in an effort to help one ask what is the meaning of life, and how do we find it for ourselves. She shows how prayer, meditation, and ritual enable us to find answers to our questions in the healing journey.

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Dossey, Larry. *Healing Words: The Power of Prayer and the Practice of Medicine*. HarperSanFrancisco, 1993.

Scientific studies of the efficacy of prayer in healing illness and disease. Eloquently integrates the scientific with the spiritual, shattering the long-held notion that these doctrines must somehow be exclusive.

Duff, Kat. *The Alchemy of Illness*. Bell Tower, 1993.

A woman of "mystical temperament" writes personal, quirky, essays on illness, blending 20th-century psychology with holistic spirituality. Duff, a counselor in private practice, became ill in 1988 with chronic fatigue and immune dysfunction syndrome (CFIDS). Because her illness is poorly understood by medical science, Duff questions the Western approach to medicine and health and looks outside it for answers. Illness, she asserts, defies the rules of ordinary reality and shares in "the hidden logic of dreams, fairy tales, and the spirit realms mystics and shamans describe." This is a world where Duff seems to be exceptionally comfortable. She finds deep significance in her own visions and dreams, and she draws analogies between illness and initiation rites, noting that each involves a loss and that each may result in a new wisdom, a new power. Some of her conclusions are extraordinary: A meeting with a shaman leads her to the idea that her own illness is somehow connected to her ancestors' unfair acquisition of Indian land in Minnesota generations ago. Less startling is the link Duff makes between the onset of her illness and her recollection of having been sexually abused as an infant and her subsequent work with this memory in therapy. Readers accustomed to more straightforward accounts may find Duff's musings difficult to accept; still, her insights into common attitudes toward illness, and into the changes wrought in an individual by illness, are often enlightening. (Abridged from Kirkus Reviews, January 1, 1993).

Galipeau, Steven A. *Transforming Body and Soul: Therapeutic Wisdom in the Gospel Healing Stories*. New York: Paulist Press, 1990.

Galipeau is an Episcopal priest and Jungian analyst who examines the healing stories of the New Testament in light of depth psychology. He explores healing, consciousness, faith and the meaning of illness within the context of new understandings of the wholeness of body and spirit. This is a marvelous book for any who are serious about understanding the meaning of their life—the conscious and unconscious motives that drive us and how we avoid or seek healing of our lives.

Israel, Martin. *The Quest for Wholeness*. London: Longman, and Dodd, 1989.

Kabat-Zinn, Jon. *Full Catastrophe Living: Using the Wisdom of Your Body to Face Stress, Pain and Illness*. New York: Dell Publishing, 1990.

Excellent book for understanding the *bodymind* connection and how to use meditation in the healing process. This is not pop-psychology, passing-fad drivel for people wanting the quick fix. This is a genuine "how-to" book, grounded in sound principles for changing one's life in healthy ways.

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Kabat-Zinn, Jon. *Wherever You Go There You Are*. New York: Hyperion, 1994.

Kabat-Zinn writes for all who are concerned about the simple path to cultivating mindfulness in one's own life. Mindfulness is about wakefulness--about being fully conscious.

Kelsey, Morton. *Psychology, Medicine and Christian Healing*. HarperSanfrancisco, 1988. (A revised and expanded edition of Healing and Christianity.)

THIS IS THE CLASSIC TEXT ON CHRISTIAN HEALING. IT HAS RECENTLY BEEN REVISED, UPDATED AND EXPANDED. REQUIRED READING FOR THOSE WHO ARE SERIOUS ABOUT THE MINISTRY OF HEALING.

Kreinheder, Albert. *Body and Soul: The Other Side of Illness*. Toronto: Inner City Books, 1991.

A Jungian approach to illness, vividly illustrating the symbolic attitude and active imagination with the body. The author was 76 when he died of cancer in 1990. *Body and Soul* reflects a life well and truly lived in relation to the Self. Refreshingly candid and straight from the heart.

Locke, M.D., Steven & Douglas Colligan. *The New Medicine of Mind and Body*. New York: E. P. Dutton, 1986.

A complete study of the new science of psychoneuro-immunology (PNI) that shows astounding ways in which emotions and attitudes, both negative and positive, can affect health and the treatment of illness. **RECOMMENDED.**

MacNutt, O.P., Francis. *Healing*. Notre Dame, IN.: Ave Maria Press, 1977.

_____. *The Power to Heal*. Notre Dame, In.: Ave Maria Press, 1983.

MacNutt is a priest with nearly 30 years experience in the Christian healing ministry. His books combine practical wisdom, psychological insight, and deep faith in understanding God's healing.

McNeely, Deldon Anne. *Touching: Body Therapy and Depth Psychology*. Toronto: Inner City Books, 1987.

Establishes the dialog between consciousness and the unconscious, with emphasis on the somatic expression of emotional problems. Traditionally feminine values, devalued by Western culture, are given their due here.

Moyers, Bill. *Healing and The Mind*. New York: Doubleday, 1993. (This is also in video.)

This book explores the new body/mind research and talks with scientists and doctors about the implications of healing and the mind in understanding health care. Includes a good discussion of Chinese medicine which understands the human body very differently from traditional Western medicine. This provides a good introduction to the use of acupuncture and herbal remedies as part of complimentary health care.

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Ornish, Dean. *Eat More, Weigh Less*. New York: HarperPerennial, 1993.

How to begin healing emotional pain, loneliness, and isolation in your life, providing nourishment not only for your body but also for your soul. **RECOMMENDED**.

Ornish, Dean. *Reversing Heart Disease*. New York: Ballantine Books, 1990.

*****This book is about so much more than "reversing heart disease." It is about taking responsibility for your health, happiness, and well-being. The program takes you beyond the purely physical side of health care to include the psychological, emotional, and spiritual aspects so vital to healing. This book represents the best modern medicine has to offer.**

Parsons, Stephen. *The Challenge of Christian Healing*. London: SPCK, 1986.

Another very wise book for understanding the Christian healing ministry. Parsons relates his experiences as a parish priest and tells the stories of people who have experienced healing.

Pelletier, M.D., Kenneth R. *Sound Mind, Sound Body: A Model for Lifelong Health*. New York: Simon & Schuster, 1994.

A five-year study powerfully demonstrates the shortcomings of America's disease management industry and why it is time for a change. We have to rethink our current disease-oriented paradigm as evidence shows that the protective and caring influences of family, friends and spiritual values are more important than traditional risk factors. This book is a **must read** for understanding the significance of spiritual energy in the healing process.

Sanford, Agnes. *The Healing Light*. New York: Ballantine Books, 1972.

RECOMMENDED AS PRIMER FOR THOSE WHO ARE SKEPTICAL OF HEALING AS JESUS HEALED.
Simple, straight-forward book on God's healing power within each of us. Available through: Order of St. Luke's, Box 680041, San Antonio, TX 78268 PH: (201) 684-2484

Sanford, John A. *Dreams: God's Forgotten Language*. HarperSanFrancisco: 1968.

Shows how dreams can help us find healing and wholeness and reconnect us to a living spiritual world.

_____. *Dreams and Healing*. Mahwah, N.J.: Paulist Press, 1978.

Our dreams provide clear messages to us about what needs healing in our lives and whether we are going in the right direction. Learning to work with our dreams requires time, commitment and study. Sanford lays the groundwork.

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_____. *Healing Body and Soul: The Meaning of Illness in the New Testament and in Psychotherapy*. Louisville, KY.: Westminster, 1992.

Discussion of the relationship of God to illness and the meaning of illness.

_____. *Healing and Wholeness*. New York: Paulist Press, 1977.

RECOMENDED. Sanford has a profound knowledge and understanding of the biblical meaning of healing and wholeness as Jesus intended.

Seybold, K. and Mueller, U. B. *Sickness and Healing*. Nashville: Abingdon, 1981.

This book gives a very thorough history of sickness and healing in the Old Testament and the New Testament. Useful for biblical scholars and preaching, although many of the other books listed are more readable.

Shorter, Aylward. *Jesus and the Witchdoctor: An Approach to Healing and Wholeness*. Maryknoll, N.Y.: Orbis Books, 1985.

Shorter was a missionary in East Africa and draws on his training as a theologian and anthropologist to discuss "total healing"—including social, psychological, emotional and spiritual evil. He also makes that point that it is the **person** in need of treatment, and not the disease or illness.

Ulanov, Ann and Barry. *Primary Speech: A Psychology of Prayer*. Atlanta: John Knox Press, 1982.

Williams, Margery. *The Velveteen Rabbit*. New York: Avon, 1975.

Ziegler, Alfred J. *Archetypal Medicine*. Dallas: Spring Publications, Inc., 1983.

Jungian analyst looks at several illnesses and proposes treatment based on each disease's archetypal root. Our illnesses point us to where our true health lies if we understand what they mean.

MINISTRY

Anderson, Winifred, Toby Gould, James L. Paul. *We Don't Have Any Here: Planning for Ministries with People with Disabilities in our Communities*. Nashville,: Discipleship Resources, 1986.

Describes seven ministries and provides practical suggestions for starting a ministry.

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Bishop, Marilyn E. (ed). *Religion and Disability: Essays in Scripture, Theology and Ethics*. Kansas City: Sheed and Ward, 1995.

This book presents three keynote addresses by Donald Senior, noted New Testament scholar; John MacQuarrie, prominent theologian; and Stanley Hauerwas, an ethicist who writes on the place of people with mental disabilities in the life of the Church. Senior's essay is the best of the three.

Black, Kathy. *A Healing Homiletic: Preaching and Disability*. Nashville: Abingdon, 1996.

This book offers a methodology for understanding disability in the life of a congregation. The author discusses blindness, deafness and hearing loss, paralysis, ritual impurity, leprosy, chronic illness, epilepsy, mental illness, and demon possession.

Colston, Lowell G. *Pastoral Care with Handicapped Persons*. Philadelphia: Fortress Press, 1978.

Cook, Ellen, ed. *Sharing the Journey: Active Reflections of the Church's Presence with Mentally Retarded Persons*. NAMRP & Wm. Brown, Publishers.

Downey, Michael. *A Blessed Weakness: The Spirit of Jean Vanier and L'Arche*. San Francisco: Harper and Row, 1986.

Downey writes about the L'Arche community founded by Vanier at Trosly-Breuil, France. He describes Vanier's philosophy and religious commitment to loving and living in community with people who profoundly disabled and very broken from suffering, rejection, and abuse. This book is out of print but worth finding in the library for its theological reflections on suffering and love.

Eiesland, Nancy and Don Saliers (eds). *Human Disability and the Service of God*. Abingdon, 1997.

Drawing upon various disciplines and diverse experiences, the authors explore how disability affects the work and ministry of the Church. Biblical texts which speak of sin, disability and healing are examined. Theological reflection is used to explore how people with disabilities could be integrated in the life and ministry of the Church.

Empereur, James L. *Prophetic Anointing: God's Call to the Sick, the Elderly, and the Dying*. Wilmington, DE: Michael Glazier, 1986.

This is one volume in a series that examines the ritual practices and sacraments in the Roman Catholic Church. However, I believe this book is relevant to those who use anointing and who pray for healing. Anointing gives meaning to suffering, sickness, and death and is a means of healing, especially of the interior ill. A history and theology of anointing is given. The ill and aged have a vocation in the Church as they are called to remind others that there is a deeper meaning to life which is often found in the experiences of loss.

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Gould, Toby. *A Summer Plague: Polio and Its Survivors*. New Haven: CT: Yale University Press, 1995.

Govig, Stewart D. *Souls Are Made of Endurance: Surviving Mental Illness in the Family*. Louisville, KY: Westminster John Knox Press, 1994.

Hogan, Griff, ed. *The Church and Disabled Persons*. Springfield, Ill.: Templegate, 1983.

This has only one essay by a person with a disability. Given the significant changes brought on by the disability movement beginning in the late '80's, this book is too outdated to be of constructive use.

David Keck. *Forgetting Whose We Are: Alzheimer's Disease and the Love of God*. Nashville: Abingdon,

A Christian understanding and response to the theological, pastoral, and spiritual issues raised by Alzheimer's disease. The issues are examined from the perspectives of the theologian, the patient, and the caregiver.

Martin, Jason. *Baptism & Membership for Persons with Mental Disabilities*. Mennonite Disabilities Committee, Goshen, Ind. (Paper).

Merrick, Lewis. H. (ed). *And Show Steadfast Love: A Theological Look at Grace, Hospitality, Disabilities and the Church*. Louisville: The Presbyterian Publishing House, 1993.

Six essays reflect on current attitudes and behaviors toward people with disabilities.

Moede, Gerald (ed). *God's Power and Our Weakness*. Task Force of Persons with Disabilities. Consultation on Church Union, Princeton, N.J., 1982.

The Task Force states the problems of exclusion within the faith community and then gives the testimonies of several people with disabilities as a reminder that "each person is loved by God and given a ministry in Christ's Church, and second, that all in the Church may be reminded that persons with disabilities have a contribution to make to the ministry of the Church...helping to ...effect reconciliation among God's people, in order that we may all be one in Christ."

Mueller-Fahrenheit, Geiko, ed. *Partners in Life: The Handicapped in the Church*. Faith and Order Paper No. 89, Geneva: World Council of Churches, 1979.

This book was compiled in 1977 by several theologians, people with disabilities, their relatives and clergy. It is an attempt to discover what the wholeness of the family of God looks like and describes the feelings of people who found inclusion in the church and people who were not welcomed and included. The poems and testimonies reflect the courage, suffering and faithfulness of people with disabilities.

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Neufeldt, A., *Celebrating Differences*. Newton, Ks.: Faith and Life Press, 1983.

Park, Leslie D. *How to Be a Friend to the Handicapped*. New York: Vantage Press, 1987.

Perske, Robert. *New Life in the Neighborhood*. Abingdon Press, 1980.

_____. *Hope for the Families*. Abingdon Press, 1982.

Perske's books are very good for introducing congregations and neighborhoods to people with developmental disabilities or mental retardation.

Ransom, Judy Griffith. *The Courage to Care: Seven Families Touched by Disability and Congregational Caring*. Nashville: Upper Room Books, 1994.

Chronicles the stories of people whose lives were dramatically changed by the caring of congregations, friends, and family. Important book for Churches wanting to understand why and how caring is part of what it means to be a community and to offer hospitality.

Standhardt Robert T. *Journey to the Magical City: A Quadriplegic Person's Reflections on Suffering and Love*. Nashville, TN: The Upper Room, 1973.

Standhardt is a Methodist pastor whose faith and wit are very evident to those who know him or have heard him lecture or preach. He sees mature Christian faith helping people come to terms with their own imperfections and accepting our interdependency and very real need for one another.

Thornburg, Ginny (ed). *That All May Worship: An Interfaith Welcome to People with Disabilities*. Washington, DC: National Organization on Disability, 1992.

_____. *Loving Justice: The ADA and the Religious Community*. Washington, DC: National Organization on Disability, 1994.

_____. *From Barriers to Bridges: A Community Action Guide for Congregations and People with Disabilities*. Washington, DC: National Organization on Disability, 1996.

These three resources were developed for Churches wanting to be inclusive. They are among the best resources available.

van Dongen-Garrad, Jessie. *Invisible Barriers: Pastoral Care with Physically Disabled People*. London: SPCK, 1983.

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Vanier, Jean. *Be Not Afraid*. New York: Paulist Press, 1975.

Most of us have fears of one kind or another or are captive to fear-based thinking. This little book is a "spiritual retreat" for learning to move beyond fear and into love.

_____. *Community and Growth*. New York: Paulist Press, 1981.

A good book for anyone living in a community or wanting to live in one. Vanier addresses the challenges, never easy, and the rewards of finding the freedom to love and be loved.

_____. *Man and Woman He Made Them*. New York: Paulist Press, 1984.

Vanier explores the mystery of human sexuality and asks questions about what it means for the people of the L'Arche communities. There are few who agree with his stance regarding sexual relationships in the communities. However, Vanier writes about important understandings of love, loneliness and sexuality—which one needs to explore before entering into a relationship.

_____. *The Broken Body*. New York: Paulist Press, 1988.

Vanier invites us to accept the reality of suffering and the cross in one's own life and in the life of people who suffer.

Webb-Mitchell, Brett. *Dancing with Disabilities: Opening the Church to All God's Children*. Cleveland: United Church Press, 1996.

Webb-Mitchell, Brett. *God Plays Piano Too: The Spiritual Lives of Disabled Children*. Crossroads, 1993.

The stories of children with disabilities who had wonderful, but often hidden, gifts. Webb-Mitchell shows the Church how to welcome and receive the gifts and "reveals the *hidden wholeness* that lies beneath the broken surface of all our lives" (Parker Palmer).

Webb-Mitchell, Brett. *Unexpected Guests at God's Banquet: Welcoming People with Disabilities into the Church*. Crossroads, 1994.

This is a very fine book, written for congregations wanting to be inclusive. Webb-Mitchell gives an overview of how the biblical record has been used to exclude people with disabilities from the religious community and tells the stories of people who have not felt invited, welcomed or accepted into the life of a congregation. The book is primarily concerned with learning *how* to welcome people with disabilities and *why* doing so is essential for the Church. "For it is only when we learn how to be with those who are different from us, and learn how to accept the love of God that we all need, that we will be able to sustain a community that is capable of worshipping God" (79).

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Wilke, Harold H. *Creating the Caring Congregation*. Abingdon Press, 1980.

Harold Wilke has been the great pioneer in teaching the Church to be welcoming and inclusive. He was involved in the UN Decade of the Disabled, the signing of the ADA, and helped develop some of the first church resources of ministry with people with disabilities. Anyone involved in this ministry today would be well served to read his little book and to be aware of his major contributions. **Available from Dr. Wilke at: The Healing Community, 521 Harrison Avenue, Claremont, Ca. 91711**

SPIRITUALITY AND DISABILITY

Au, Wilkie, and Noreen Cannon. *Urgings of the Heart: A Spirituality of Integration*. Paulist,

Explores the close connection between psychological health and spiritual development. Addresses co-dependency, addiction, perfectionism, overwork, rejection of shadow, intimacy, compassion -- all leading to growth.

Bakken, M.D., Kenneth L. *The Call to Wholeness: Health as a Spiritual Journey*. New York: Crossroad, 1987.

Bakken specializes in preventive medicine, integrating both science and religion to present a holistic approach to healing physical illness, as well as emotional, psychological and spiritual distress. Dr. Bakken shows how fear, anxiety, anger, guilt, depression, and loneliness contribute to dis-ease, while spiritual growth (*love casts out fear*) promotes health, healing, and wholeness.

The Barb Wire Collective. *Not All Violins: Spiritual Resources by Women with Disabilities and Chronic Illnesses*. Toronto: The United Church Publishing House, 1997.

This is the singularly most significant book yet written on the spirituality of living with a disability. Nine women of faith share their stories of living with chronic illness or disability and discovering the spiritual resources that emerge from these experiences. "They offer models of truth-telling, anger, passion, creativity, and humor that come with living on the edge" (from the back cover).

Baars, Conrad W. and Anna A. Terruwe. *Healing the Unaffirmed: Recognizing Deprivation Neurosis*.

People who have been deprived of affirming love are too frequently diagnosed as neurotics or are diagnosed with symptoms of fatigue. They do not respond to analytic therapies or to tranquilizers. Deprivation neurosis requires affirming love that is more than simple TLC. While the book is written by two psychiatrists and is helpful for counselors, it is also a good book for people who are seeking insights on how issues of deprivation (lack of affirming love) may have shaped their lives.

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Belgum, David R. *What Can I Do About the Part of Me I Don't Like?* Minneapolis: Augsburg Publishing House, 1974. (out of print).

A good beginning book for those who have not integrated or accepted disability into their lives in ways that reflect healthy thinking.

Cousins, Norman. *Anatomy of an Illness*. New York: Bantam Books, 1979.

This famous story is even more significant today as we understand the *bodymind* connection and its function in the healing process. Cousins used laughter, courage and tenacity to fight against a crippling disease, reminding us that the power of healing (**different for each person**) lies within each of us.

Cox-Gedmark, Jan. *Coping with Physical Disability*. Philadelphia: Westminster Press, 1980 (out of print).

Written by a chaplain who worked in a rehabilitation hospital, Cox-Gedmark provides insight and guidance for coming to terms with disability. This is a good beginner book for people who have not explored any of the issues related to living with a disability.

Gordon, Beverly S. *Toward Acceptance: Prayers for Dealing with Chronic Illness and Disability*. Cincinnati: St. Anthony Messenger Press, 1991.

Using the twelve steps, Gordon writes prayers that reflect the struggles of living with chronic illness and disability and draw on faith in the power of God to accept what cannot be changed.

Frank, Arthur. *At the Will of the Body: Reflections on Illness*. Boston: Houghton Mifflin, 1991.

Our wounds give us our narrative power and are evidence of the truth of our story. This book presents ill people as wounded storytellers. "The ill person who turns illness into story transforms fate into experience; the disease that sets the body apart from others becomes, in the story, the common bond of suffering that joins bodies in their shared vulnerability" (Frank, xi). Arthur Frank writes that the ill [and disabled] offer others the truth in witnessing to their stories. Our stories have much to teach society and needs to have an equal place alongside the expertise of the professionals. Frank calls this the "pedagogy of suffering" (Frank, 145).

Harned, David Bailey. *Patience: How We Wait Upon the World*. Boston: Cowley Publications, 1997.

Patience is a virtue but it seems to have very little value in today's culture of narcissism. Professor Harned's book reviews the history of patience as formulated by the Church's great moral theologians. However, this is a readable book for anyone who is serious about understanding how to live with waiting and with learning to transform their impatience into the virtue of patience. This is not about patience that is passive in the face of intolerable situations, but of patience that is

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active where necessary and at peace when we need to accept that which cannot be changed. This is a **life-changing** book for anyone who has experienced the frustration of injustice and wonders if God hears their prayers.

Horwood, William. *Skallagrigg*. England: Penquin Books, 1988.

Horwood is an award winning novelist in the UK and has a daughter with cerebral palsy. This novel is about people with cerebral palsy in search of freedom. They devise a computer games in their search for freedom which is based on their own quest for freedom from the various institutions and social barriers. The book also raises issues about self-determination and quality of life through the characters.

This book set me on my own quest for freedom and I found myself going back to the book for a very long time. Horwood's writing spoke to my unspoken feelings and helped me identify things I had not yet names. I have not been able to find the book in the US but if you bombard Penquin's US office they will consider making it available.

Miller, Vassar, ed. *Despite This Flesh: The Disabled in Stories and Poems*. Austin: University of Texas Press, 1985.

_____. *Selected and New Poems 1950-1980*. Austin: Latitudes Press, 1981.

_____. *Struggling to Swim on Concrete*. The New Orleans Poetry Journal Press, 1984.

Vassar Miller was an award winning poet and nominated for the Pulitzer Prize in 1961. She was born with cerebral palsy and writes from the perspective of one who understands the pain of loneliness and rejection. She expands our knowledge of her inner world and enables readers to embrace their own inner world. Vassar was a brilliant, witty women whose literary contributions were worthy of prizes but who was ignored as a person. She spent decades trying to get her church to be accessible to her. In the early eighties I spent a weekend with her as her church addressed accessibility. I listened to her and never forgot the impact she made on me. Readers will be impacted by her words in ways that matter deeply.

Nouwen, Henri. *Lifesigns: Intimacy, Fecundity, and Ecstasy in Christian Perspective*. Garden City, NY: Doubleday and Co., 1986.

Nowen bases this book on the love that is stronger than fear and helps one to move spiritually from fear to love. He reminds us that the angels of God always say "Do not be afraid" and these are the words we hear when God speaks to us. A book for anyone who is fearful, Nouwen speaks very knowingly about the inner fears that many people with disabilities live with. I know of no other non-disabled person who has written with greater understanding of many of our experiences.

_____. *The Road to Daybreak: A Spiritual Journey*. New York: Doubleday, 1988.

Nouwen spent at a year at the L'Arche community in Trosly, France before moving to Dfaybreak in Toronto. This is book is a journal of the experiences that changed his attitudes and his spiritual

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life. He writes of his own struggles as he worked with people who were profoundly disabled and deeply wounded yet who taught him universal truths about God and the meaning of the Cross.

Nouwen, Henri. *The Wounded Healer*. Garden City, N.J.: Doubleday and Co., Inc. 1979.

By learning to pay attention to our own wounds, clergy can help others who live with hopeless and loneliness.

Palmer, Parker. *The Company of Strangers*. Crossroads Publishing Company.

Parker Palmer understands the loneliness of the exile and writes about the spiritual journey that enables the stranger to be welcomed into a community. Anyone who has experienced exclusion for any reason will find this book helpful in understanding the exile. Those who care about hospitality will find this book helpful in reaching out to welcome the stranger.

Palmer, Parker J. *The Promise of Paradox: A Celebration of Contradictions in the Christian Life*. Notre Dame: Ave Maria Press, 1980.

Anyone who has known suffering has probably asked the tough "Why?" questions. The answers are some times difficult to accept or to hear if we feel we have had more than enough to bear. The answers that most of us seek are not clear because they are hidden in the mysteries of God and are rooted in paradox—contradiction. Learning to live in the tension of the paradox leads one to answers that remain a mystery but provide the sure hope that God is with us. If you have known abuse, betrayal, despair or doubt, this book will provide direction toward God and healing.

Rohr, Richard. *Job and the Mystery of Suffering: Spiritual Reflections*. New York: Crossroad, 1996.

"This book is a spiritual commentary and chapter-by-chapter study of the many themes that occur throughout the book. In this exploration many questions are raised as much about the reader's own life as Job's, and from this process is promised deeper understanding. . . . Job witnesses to the reality of pain, but also to gaining a new sense of joy and freedom and restoration of soul" (book jacket). If you have ever questioned the meaning of suffering or asked "why" you will want to read this book. It reads quickly and easily but contains deep wisdom for the continuing journey.

Sontag, Susan. *Illness as Metaphor*. New York: Farrar, Straus, & Giroux, 1978.

This book attempts to shift a "blame-the-victim" mentality away from patients with cancer and TB. Sontag believes that our society saw illness as a metaphor for what was wrong with the patient rather than with society's thinking about illness. Given the more current work on the significance of the *bodymind* connection I did not find the book useful.

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STUDIES IN THEODICY

These works do not speak to the specific issue of disability but, rather, to the problem of evil and the related questions about the cause of suffering. Evil is not usually the cause of one's disability but the presence of evil in the world may have been a contributing factor or may contribute to the factors affecting one's life.

Cauthen, Kenneth. *The Many Faces of Evil: Reflections on the Sinful, the Tragic, the Demonic and the Ambiguous*. Lima, Ohio: CSS Publishing Co, Inc., 1997.

Cauthen "interprets the meaning of suffering and the relationship of God to human anguish." He sees that evil and suffering are common human experiences and that evil is a reality of the world we live in. For those who are attempting to understand the meaning of suffering in their own life, Cauthen shows how faith provides hope.

Kelsey, Morton. *Discernment: A Study in Ecstasy and Evil*. New York: Harper & Row, 1978.

Discernment is a spiritual tool for learning to recognize and distinguish between good and evil. Evil is a reality of this world and most often is the cause of the betrayal, abuse, and discrimination that affects many lives. Secondly, too many people with disabilities have heard that evil caused their disability or prevented their healing. Kelsey has lived with a disability all his life and while not necessarily speaking of it, writes with a profound knowledge about the reality of evil and how we can learn to discern its presence before it harms us.

Levenson, Jon D. *Creation and the Persistence of Evil: The Jewish Drama of Divine Omnipotence*. San Francisco: Harper & Row, 1985.

This is an exquisite discussion on the problem of evil in a post-Holocaust era. Levenson analyzes biblical and rabbinical texts to show the fragility and vulnerability to chaos of the created order. Levenson defines God's authorship of the world as a consequence of God's victory in the struggle with evil. Anyone concerned with the problem of evil will find this a very important work.

Sanford, John A. *Evil: The Shadow Side of Reality*. New York: Crossroad, 1981.

"...evil is a constant threat for it has the power to possess and destroy the human soul through war, disease, and crime. So evil is a problem that ultimately none of us can avoid... Suffering always brings the problem with it, and the problem of evil and the problem of suffering are companions" (p. 1).

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THE PROBLEM OF SUFFERING

Chopp, Rebecca. *The Praxis of Suffering: An Interpretation of Liberation and Political Theologies*. New York: Orbis Books, 1989.

A good text book on political and liberation theologies and how they can witness as a praxis of solidarity with people who suffer.

Claypool, John. *Tracks of a Fellow Struggler*.

Parent whose child dies from a disease. Explores the phenomena of suffering, mourning, coping.

Fiddes, Paul S. *The Creative Suffering of God*. Oxford: Clarendon Press, 1988.

This is a dense book by an Oxford Don, whom I studied with and whom I admire. Fiddes writes of "a God who suffers eminently and yet is still God, and a God who suffers universally and yet is still present uniquely and decisively in the sufferings of Christ" (p. 3). This is a scholarly book, drawing on Barth's Systematic theology and Whiteheadian Process theology to set forth a doctrine of a God who suffers with us.

Fretheim, Terence E. *The Suffering of God: An Old Testament Perspective*. Philadelphia: Fortress Press, 1984.

Fretheim depicts the OT images of God "as one who suffers, as one who has entered deeply into the human situation and made it [God's] own" (p. xv). Fretheim's elucidation of the metaphors of God are critical for understanding how and why God suffers with us.

Frankl, Victor E. *Man's Search for Meaning*. New York: Washington Square Press, 1984.

"When [you] find that it is [your] destiny to suffer, [you] will have to accept [your] suffering as [your] task; [your] single and unique task. ... No one can relieve [you] of [your] suffering or suffer in [your] place. [Your] unique opportunity lies in the way in which [you] bear [your] burden" (p. 99). Frankl learned in the Nazi concentration camps how to bear suffering and developed his *logotherapy* while there. An important book for looking at suffering and beginning to make peace with the reality of suffering in one's life.

Gerstenberger, E. S. and Schrage, W. *Suffering*. Nashville: Abingdon, 1980.

This is a dense, scholarly, sweeping history of the meaning of history as found in the Old and New Testament. Both authors counter the idea that one is to be resigned to suffering. The faith found in the people of the Bible show that they struggled against the causes of suffering and, with the coming of Jesus, find victory over affliction.

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Girard, Rene'. *The Scapegoat*. Baltimore: The John Hopkins University Press, 1986.

This is the classical understanding of the scapegoat. Girard shows the history of why and how people with disabilities serve as scapegoats. I found this work very important for understanding how scapegoating is perpetuated by patriarchal institutions.

Hall, Douglas John. *God & Human Suffering: An Exercise in the Theology of the Cross*. Minneapolis: Augsburg, 1986.

"... the reality of human suffering is the thing to which biblical faith clings most insistently (p. 27). ...as Christians are obligated to ask how, according to the gospel of Christ, human suffering is met, addressed, engaged, redeemed" (p. 30). As one who has spent twenty years reading and reflecting on the meaning of suffering, I found this book to be one of the most important books on the subject. While written from a Christian theological position, the book speaks is concerned with how God redeems suffering. **Highly recommended.**

Israel, Martin. *The Pain That Heals: The Place of Suffering in the Growth of the Person*. London: Hodder and Stoughton. **HIGHLY RECOMMENDED.**

Dr. Israel is one of the most sought after spiritual guides in England. His wisdom and guidance are really extraordinary and this is readily seen in his books. This book is not easy for those wanting an immediate solution to the problem of suffering. Instead, Dr. Israel shows us the value of suffering—it's potential to assist us in our growth.

Moltmann, Jurgen. *The Crucified God*. San Francisco: Harper & Row, 1974.

An important theological study of the theology of the cross. Moltmann says the Church will become relevant again only when it takes its identity from the naked cross—a cross of suffering and rejection.

Soelle, Dorothee. *Suffering*. Philadelphia: Fortress Press, 1975.

Soelle says the issue is not about eliminating suffering but about how people respond to suffering. People who have learned from our society to ignore, deny or dismiss suffering will not respond to people who suffer. Those who know suffering have the most to teach us about its meaning and purpose and how we can work to abolish unnecessary suffering. I feel this can enable people with disabilities to turn their experiences of suffering into stories that can teach others how to either work to eliminate unnecessary suffering or how to face their own suffering.

Francis Young. *Face to Face: A Narrative Essay in the Theology of Suffering*. Edinburgh: T & T Clark, 1990.

Francis Young is a theologian and mother, whose eldest child is disabled. She engages the hard questions about the meaning of life and finds that God does not abandon her—even if God is often silent. There are parts of the book which made me very uncomfortable (e.g. her language,

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questioning if severely disabled people are really persons). However, the book has much more that is worth reading. This is a woman who entered the pain and lived into her questions. She comes out the other side, wounded but healed.

THEOLOGY

Eiesland, Nancy L. *The Disabled God: Toward a Liberatory Theology of Disability*. Nashville: Abingdon Press, 1994.

Drawing on the themes of the disability rights community, Eiesland shows that people with disabilities are a socially disadvantaged minority group, whose history in the Church is very hidden. Eiesland uses social scientific, theological, and ethical sources to develop a liberatory theology of physical disability. This book is **required** reading for seminarians, clergy, therapists, people with disabilities, and churches which seek to be truly inclusive.

Moede, Gerald F. *God's Power and Our Weakness*. Princeton, NJ: Consultation on Church Union, 1982.

Moltmann, Jurgen. *The Power of the Powerless: The Word of Liberation for Today*. San Francisco: Harper & Row, 1982.

Moltmann-Wendel, Elizabeth. *I Am My Body: A Theology of Embodiment*. New York: Continuum, 1995.

The author speaks about embodiment from as a feminist theologian and makes references to the experiences of most marginalized people, with the exception of people with disabilities. Her last chapter focuses on the senses as a way of understanding embodiment, which I see as problematic for many kinds of disability. However, this book contains much that is very helpful for understanding the importance of embodiment if one is to understand what it means to be whole and to be healed—while living with a disability.

Nelson, James B. *Body Theology*. Louisville, KY: Westminster John Knox Press, 1992.

Nelson offers an incarnational way of doing theology in this unique book. He takes body experiences seriously and views sexuality as central to the mystery of human experience and to the human relationship with God. He seeks to identify what Scripture and tradition say about sexuality and focuses on sexual theology, men's issues, and biomedical ethics.

Spufford, Margaret. *Celebration: A Story of Suffering and Joy*. Cambridge, MA.: Cowley Publications, 1996.

Dr. Spufford lives with osteoporosis and has a daughter with a severe disability. She sees their disabilities as evil and asks piercing questions of how a loving God can allow evil, while also finding herself sustained by the holy eucharist.

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Thistlewaite, Susan Brooks, and Engel, Mary Potter, (Eds.) *Lift Every Voice: Constructing Christian Theologies From the Underside*. San Francisco: Harper Collins, 1990.

Various perspectives on liberation theology are gathered here and seek to address the questions of oppressed people. As usual, this does not include people with disabilities. However, many of the chapters speak to the issues of vulnerability and empowerment and, thus, speak to some of our questions.

Volf, Miroslav. *Exclusion and Embrace: A Theological Exploration of Identity, Otherness, and Reconciliation*. Nashville: Abingdon Press, 1996.

The author constructs a theology of reconciliation in a world where "otherness" is often thought of as intrinsically evil. Genuine reconciliation with God requires an openness to the "other"—a rejection of our uniquely modern tendency toward continual exclusion.

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Reprints of Published Articles

Healing of Bodies and Vicimization of Persons: Issues of Faith-Healing for Persons with Disabilities

by the Rev. Nancy J. Lane, M. Div.

I have lived with cerebral palsy since birth and have experienced first hand the side-effects of Christians who wanted to heal me of CP. It took many, many years to heal from the damage of those experiences. I have never felt a need to be physically healed. Rather, I have needed healing from the rejection, abuse and frustration which came from the negative expectations and attitudes of those who tried to prevent me from being all I can be. Further healing came in learning to live creatively and meaningfully with my disability. This required the deep, inner healing which comes from an integration of spirit, mind and body. This healing is the result of living in faith and being enabled and empowered by the love and acceptance of others who lived out their faith in ways which brought healing to my life.

Much of my ministry has been concerned with issues of healing and persons with disabilities. The majority of persons who come to me for spiritual direction or pastoral counseling have experienced the negative effects of healing experiences. This article attempts to identify the pain of their experiences, while also defining what healing can be for persons with disabilities.

There are many in the Church

who have an obsession with wanting disabled bodies to be "healed," meaning fixed, turned into something society defines as "normal." Disability is still seen as a basic flaw rather than a human variation. We have a great need to control anything which we do not want to accept or include in our lives. Persons with disabilities challenge society's illusions of control.

There is a distinction between healing and curing. Healing "represents a condition of one's life; 'cured' relates strictly to one's physical condition" (quoted from Bernie Siegel's *Peace, Love and Healing*). Healing is a continuing process leading one to wholeness and integration. The word "health" comes from a root word meaning "whole." "Wholeness, or health, is not just an absence of illness or disability, it is a way of living" (according to David Eisenberg as quoted in Bill Moyers' *Healing and the Mind*). Healing is not always about being free of illness or disability. It is often about letting go of false expectations and unrealistic hopes or dreams and becoming all you can be. Healing allows us to live with disability rather than suffer from it.

Healing in the early Church involved the laying on of hands. There continues to be a powerful ministry of healing when the

community lives in faith that God's will be done. The efficacy of prayer and caring also have healing effects on people. To care for another is to understand, listen to and accept the person you are praying for. When people are accepted as they are, they are empowered to move toward wholeness. Wholeness does not always mean that disability or illness will be removed from our midst.

The early Church saw healing as a sacrament. People seeking healing went to confession and sought forgiveness before being anointed in healing service. One entered into the sacrament of healing with a contrite heart and deep intentionality toward God's will. Today, it is often not God's will which is prayed for but the will of others who decide that healing will mean our disability will disappear. This becomes another form of oppression as it pushes us back into guilt, shame and fear of stigma. This is death-making to the soul seeking a spiritual life.

When churches and prayer groups confine their concern for persons with disabilities to the healing of bodies, they are condescending to the "medical model" which only sees disease not persons. The healing ministry of Jesus was concerned with the whole person: body, mind and

spirit. This meaning has been obscured wherever persons with disabilities become "victims" of healing rather than persons whose lives are healed. A brief review of disability as sin or evil will help explain this.

A Theology of "Victimization"

Literature often portrays public responses to the sight of persons with disabilities in ways which suggest the person represents evil or sin. Consequently, there are many who see deformities as punishment for sin. This can be seen in the cultural attitudes which are still at work in the Church. These attitudes include seeing persons with disabilities as representing punishment or evil, perceiving them as victims, assuming that a disabled body means a disabled or inadequate mind, and valuing persons with disabilities less than able-bodied persons.

There are Christians who continue to use biblical and theological references to blame and victimize persons with disabilities. They will say "Your faith has not made you well"; "You are demon-possessed"; "Whose sin is it that caused you to be born disabled?"; "The blemished shall not approach the altar" (the law from Leviticus used frequently to deny ordination to persons with disabilities); "You are God's special people." Scripture and theology used in this way set people apart. This is what I call "victim theology." It causes immense suffering and alienation for persons with disabilities, and effectively shuts them out of the religious community.

In the gospel of John, the question is asked of Jesus, "whose sin is it?" The disciples are attempting to blame the man's blindness on him or his parents. This attitude relieved them of the need to respond to the man born

blind in ways which heal. The disciples failed to express their faith or that God was at work through them. Jesus did the work of faith and healing when he responded that no one sinned, thus lifting one of the many burdens projected onto persons with disabilities. Jesus says that the man born blind has the opportunity to express his FAITH by demonstrating that God is at work in his life.

What Is Healing? Who Is Healing for?

Healing is expected to change the person who has a disability into one who does not. The burden of healing is placed totally on the person who is disabled, causing further suffering and continued alienation from the Church.

I have heard variations of the following story hundreds of times. Only the disability and setting vary from version to version. Usually it involves a group eager for "proof" of healing. This group determines who and what is to be healed. It also decides the time-frame within which healing is to occur. God becomes a mere puppet dancing to the demands of people who claim to know the mind of God. Thus, healing and movement toward wholeness is prevented. Instead of acceptance and empowerment, there is rejection and blame.

This particular story is about a young woman who attended my college in the late 1980's. She was blind and had never been away from home on her own. The college campus is very hilly and spread out. There are many paths, some of which cross over ravines. During the first semester someone walked with Sue, helping her to learn the route between the buildings. Sue undertook this with the

expectation that she could learn her way quickly and become independent. By the second semester Sue was adjusting to college and her new independence very well. She was developing her autonomy and actualizing her God-given gifts.

During this second semester, the prayer group in Sue's dormitory prayed for Sue to regain the sight she had been born without. After two weeks, the group declared Sue lacked the faith to be healed and was probably demon-possessed. Her faith and self-confidence were shattered. The gains Sue had made were irrelevant in the eyes of the prayer group.

Sue, like many others who have had similar experiences, was left to deal with the pain and grief of rejection, blame and isolation. Her courage and faith to live with her disabilities had been violently shaken. The prayer lives of persons in such situations are usually destroyed and a feeling of abandonment overwhelms them. The road to healing has been bombed and they are left stranded in a wasteland. Many leave the Church in anger and despair.

The religious community too often fails to see the many rebirths of persons with disabilities which attest to their strength, courage and perseverance. The college prayer group failed to see God at work in Sue's decision to leave home to study, grow and become independent.

Unfortunately there are many people who interpret faith as the prerequisite for removing disability, which is entirely different than being healed. If non-disabled persons had enough faith to live with the limitations found in this life, then they would not need to demand that we have more faith. To live in faith requires that all of us learn to live with the diversity

and ambiguity of an imperfect world where we are not in control.

Physical healing is not what most persons with disabilities desire. Rather, it is spiritual and emotional healing - acceptance, respect and opportunity to be welcomed and included. Healing comes when persons with disabilities are able to adapt to their environment and their limitations, enabling them to live full and meaningful lives.

Healing is overcoming the fear of limitations and recognizing gifts and potentialities of person with disabilities. Healing comes in recognizing our own limitations by touching the wounded place within and encountering God. Healing is accepting the unacceptable, accepting each other's limitations and then rejoicing in all that we have been given. Healing is responding to God's love at work in and through the limitations of our lives. To be healed is to live in faith and hope, believing that new life comes out of suffering and loss.

The ministry of healing should always enable and empower people to live with their disability in creative and living-giving ways. Healing comes when we are loved, accepted and empowered to be who we are. It comes through family, friends, lovers, colleagues, as well as through doctors, nurses, clergy, or social workers. Healing is an ongoing process. There are many, many persons with disabilities who need the healing presence of the Church. Likewise, the Church needs the healing presence of persons with disabilities to teach them about living with faith. ■

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the problem of suffering and the meaning of healing for persons with disabilities. Part of her research was conducted as a Visiting Scholar at Oxford University. Ms. Lane received her Master of Divinity at Colgate Rochester Divinity Schools, Rochester, New York.

Lane was ordained an Episcopal priest in 1984. She is currently executive director of Disability Awareness: An Empowering Ministry, located in Elmira, New York. She is the author of numerous articles on religion and disability, including "The Spirituality of Being - Living with Disability."

Entropy and Angels

This relentless caving-in to time,
to gravity - a hand become a hook -
is not laughable
but like laughter stifled:
the first church pew giggle
held and held
until a donkey bray explosion
ripples chalice wine.

My God, this growing old is serious.
Soon, the collection plate
will come up empty
and this system called Susan
will squawk to full stop
like an old organ on the last note
of some glass shattering fugue.

Soon, the angels say, but not yet.
They are merciless in doling out days.
They treat me no better than Pavlov's dog
to candy after the bell.
Today my body is bent to pain.
I cry knives, and they send me
a naked man on the hillside outside my window
who leans against a madrone
in full lemon sun.

There is no turning back
or going forward.
That is the terrible joke.
There is always a child
who cannot be solemn in church
and spears of morning light
dazzling the green eyes of stained-glass saints.

Susan McBride

● Spirituality of Being: Women with Disabilities

By Nancy J. Lane

This paper explores why women with disabilities need to learn and understand their stories as part of the spiritual journey. Spirituality teaches us to live into our stories, where we find empowerment and freedom to transcend disability and re-create a positive self-image. Negative self-images contribute to the myths about who we are. As we come to know the myths we have lived with, we are enabled to shatter them and change our lives. The spiritual journey teaches us to live with rather than suffer from disability. We learn to Be who we are with our disability, while also Becoming all we are created to be by discovering our gifts and full potentiality.

Comprehensive studies of the last decade which examine society's discrimination against women with disabilities find they are oppressed and devalued more than most minorities (Sobsey, Grey, Wells, Pyper, & Reimer-Heck, 1991). A study titled "Through the looking glass: The Church's response to persons with disabilities," demonstrated this is also true in most Christian denominations (Heifetz & Chaffee, 1985; Chaffee, 1986).

I am a woman who has lived with cerebral palsy for 50 years. I am also an Episcopal priest who has studied classical Christian spirituality and who seeks to live it out in my daily life. I grew up in the Church and have given my life to God, yet I too have experienced discrimination and oppression. The spiritual journey continually transforms both myself and my experiences, allowing me to Become more than I was as a disabled woman.

Although much of what follows may apply to men with disabilities, I have intentionally confined myself to discussing the spirituality of women with disabilities. This is the ground of my own experience, as well as the focus of my doctoral research. I have long advocated that persons with disabilities are the experts of what it means to live with disability and our voices need to be heard. Therefore it would be presumptuous of me to speak about the spirituality of men with disabilities.

Unlike men with disabilities, women are doubly and triply oppressed by negative prejudices and stereotypes, in addition to being economically disadvantaged (Minnesota Coalition for Battered Women).

Society places a higher value on physical appearance in women than in men, thus adding another disadvantage to

women with disabilities. They "are encouraged to be helpless, nonassertive, non-sexual, passive, dependent, grateful and apologetic for a less than perfect body..." (Cole, 1988, p. 284).

Women have been defined as "biologically and morally defective males" for centuries (Ruether, 1975, p.15). Thus, it is doubly painful for women with disabilities to face those aspects of ourselves which others have labeled unacceptable, wrong, deficient, deformed, aberrant, or deviant. How can one ever be "normal" when one is defined as imperfect? How can one begin to understand healing and wholeness when "religious" people claim that if one had more faith, one could be healed, that is, meaning without one's disability?

There are many women with disabilities who have no idea of what it means to integrate disability. They see their disability as larger than life, letting it define them rather than being an integrated dimension of living. When disability is not integrated, it is dragged along as a heavy weight and may be used to batter self and others, preventing personal and spiritual growth.

It is important to understand one's disability, its' causes and consequences as much as possible. Then we can begin to integrate our experiences, recognizing that suffering, disappointment, hurt, and rejection are not exclusive to us but are universal conditions. Disability is not a condition separate from the experience of being a human being living in a broken and fragmented world. Understanding one's disability also means exploring the dimensions of one's self-image, doubts and fears, dreams and hopes.

Many women with disabilities develop only a fraction of their potential. We are often familiar with our limitations, and we may succumb to using them as the boundaries within which we move. Yet we have been created with potentialities beyond our imagination. Spirituality is one way of discovering the possibilities, while integrating the limitations of one's disability.

Defining Classical Spirituality

Classical spirituality and spiritual direction is evident throughout civilization. Whether it is the ancient sages of Judaism, Socrates in Greek philosophy, or the religions of India or China, the care of the soul was the essence of coming to "know thyself" (McNeill, 1951).

Soul is considered the essence of human personality and related to the body. Early spirituality interpreted biblical scriptures in light of Greek philosophy, which tended to divide human beings into body and soul. The body was intrinsically evil. Thus a negative attitude towards one's body was an easy projection toward the disabled body. Spirituality has to do with

integrating body and soul into a unified whole and understanding the body as good. How we see our disabled bodies determines the health and growth of our spiritual life.

Health and healing ultimately is the well-being of the soul. The function of therapy is essentially guidance of souls toward healing. In this sense the therapist is the *shaman*, healer, sorcerer, priest and teacher (McNeill, 1951, p. vii).

Spiritual Direction is applied to the care of souls who seek to know God's will for them. It applies to the spiritual life of the whole person (Leech, 1977). Caring for one's soul enables one to recover the sacredness of their life, and to live with the paradoxes of being broken yet whole. Spiritual Direction empowers one to take back what has been disowned and to find deeper respect for what is actually there (Moore, 1992). The mystery of suffering can become the source of one's healing.

God is the term used by classical spiritual theology and mystical religions, both East and West. Essentially, God is incomprehensible and deeply mysterious, the ground of the self, the ground of being, the unfathomable depth (Leech, 1985). Self-knowledge is knowledge of God. Ultimately we discover God in the depths of our own soul, where we discover the Self. I have therefore referred to God in some instances as God/Self. This image is an Jungian archetype which expresses the Self as the integration of physical, psychological and spiritual, e.g. soul.

The spiritual journey always includes:

two constant pulls: forward in faith to the unknown and backward to the slavery of the familiar. Spirituality allows us to break free so that in the transition between those two places we find ourselves and our creativity. The life of faith consists in moving with God in terms of a) being securely oriented, b) being painfully disoriented, and c) being surprisingly reoriented (Brueggemann, 1978).

The purpose of the spiritual journey is to move us from our familiar world, into the abyss, and out again into the Light where we find ourselves transformed by inner healing.

Spirituality is meant to free us from all those things which encumber us. Movement through the spiritual journey requires us to Be who we are, and to Become all we are, To "Be" who we are requires knowing ourselves as more than our disabilities, living with them, rather than suffering from them. We are "Becoming" more fully who we are as we journey. This is the process of encountering God/Self at the center of the struggle, and discovering the potentialities and abilities which are greater than our disabilities. The spiritual journey discussed here refers to how women with disabilities come to know who they are as women, who happen to be disabled.

Why Women With Disabilities Benefit From Spirituality

Spirituality can enable women to do the following:

- a. Move from fear to possibility and potential;
- b. Ask for what we need without apologizing for our lives;
- c. Share our needs openly and not suffer in silence or shame;
- d. Become integrated as opposed to being fragmented;

- e. Create a world of reverence and respect around us, making our lives sacred rather than profane;
- f. Spirituality allows one to go against the rules when appropriate or necessary. As long as we live in an inaccessible, discriminatory, and/or hierarchal world, it will be necessary to break rules in order to create change;
- g. Spirituality allows one to make space for creativity in one's life.

The spiritual journey calls us to begin a new phase of growth and change, leading to inner healing. One sign of a healthy person is the seeking of new experiences and expanding one's awareness rather than merely surviving. Finding wholeness involves the transformation of our spiritual and psychological self. The spiritual journey "is a journey into darkness as well as light, into strangeness as well as intimacy, and in which we are made new" (Davies, 1989, p. 1461).

Learning One's Story: Beginning the Journey

Each of us has, and lives, a story. Knowing one's story is an important part of the spiritual journey. Yet, one has to begin the spiritual journey before one can fully know and understand one's story. Too often the stories of women with disabilities remain untold. Women with disabilities need to understand and tell their stories. Others need to hear our stories before they can walk with us on the journey toward healing.

Our stories are usually a series of sub-plots, detours, exodus and desert experiences. Society has long labeled, stigmatized and marginalized women with disabilities. Thus, we often settle for living the stories, roles and expectations in which we have been defined. In telling our stories, we come to understand the myths in which we have lived and so are able to shatter them and change our lives. We are likewise enabled to reflect on the grace-filled fragments of our lives, and discern how God/Self is calling us (Fortunato, 1982).

Community of Faith: Supported or Abandoned

A young woman who was blind entered a women's college during my senior year there. Sue had never been away from home before. During the first semester someone walked with Sue, assisting her at meals, and helping her learn the layout of the buildings and grounds. Sue undertook the task with the expectation that she could learn her way and become independent. By the second semester she was doing very well. Sue (and many others) felt she had become very accomplished, and was developing autonomy and actualizing more of her God-given gifts.

During the second semester, the prayer group of her dormitory began praying for healing for Sue. They prayed that Sue would regain the sight she had been born without. After a few brief weeks, the group announced Sue lacked faith to be healed, and was possibly demon possessed. Her self-confidence was shattered. Sue's accomplishments were irrelevant in the eyes of the prayer group, diminishing who Sue was. They had failed to see the Creator/God at work in her or "God's strength made manifest in weakness" (cf. II. Cor. 12:10).

Women with disabilities have to live with the limitations imposed on them by their disability. Unfortunately they are also

expected to accept the negative attitudes, the barriers, and the spiritual blasphemy of others. People without disabilities are not expected to accept the presence of disability in others, in the world, or the possibility that one day they will be disabled.

The road to discovery for one who is a person with a disability is difficult and painful. It is crucial for counselors to hear this because so many people do not think about the spiritual journey of persons with disabilities. Disability is affected, for better or worse, by the spiritual dimensions of one's life. The pain of being disabled is exacerbated further by the pain of rejection and struggle caused by negative attitudes toward us. Soul-pain magnifies physical pain, while physical pain magnifies soul-pain. Many women (and men) learn to ignore or block their pain, but pain can suddenly overwhelm and dominate their worlds. When pain dominates body and soul, the need for the reconciling and healing love of others becomes critical.

People in pain often experience "abandonment by God" and isolation from the Church. Too often, they decide that disability, loss, and grief invalidate any possibility of belief (Cox-Gedmark, 1980). Faith is supposed to provide a background of words and responses, symbols and actions which creates a framework of support. Finding this framework may require the support and encouragement of the counselor. It may or may not be found within organized structures of faith. Communities of faith and support can develop from people committed to sharing the journey with each other.

Entering the Abyss

The spiritual journey begins with the quest to know who we are and a willingness to enter the abyss within to find ourselves. Entering the abyss is to encounter the desert, where we depend upon our Creator to nourish and strengthen us. Here, in the depths of our Being, we can listen to the voice of God/Self, who continually calls us to Become all we have been created to Be. This encounter gives meaning and purpose to our history, provides direction for our present, and calls us toward a future.

We encounter our history in the abyss, where "nothing is changed and everything is changed" (Keen, 1970, p. 22). The only thing different is our perception. We must look at the memories and experiences of the past, which have shaped us in many ways. We repress many feelings in an effort to deny pain, suffering, anger, guilt, or grief. We try to bury things that are not really dead in us. When issues are left unresolved, they lurk in the shadows, surfacing in disguised ways as anger, passivity, fears and as doubts of our self-worth and our real abilities. Negative attitudes about ourselves rise up out of the debris of painful memories. For persons with disabilities, these memories often include ridicule, rejection, and social isolation. We encounter the loneliness and anger of our experiences of being disabled. We also feel more deeply the yearning for affection, acceptance, and affirmation of who we are beyond our disabilities. Avoiding these many feelings may cause us to remain stranded in a spiritual wasteland. We must look at our feelings and come to understand them in new ways.

If we remain victims of our past, we continually rebel or react. Or, perhaps we appear to "accept" it and then act resentfully toward the world for imposing the "unacceptable" upon us.

However, we are not called to be victims. The spiritual journey transforms any prior need to be the universal, suffering victim and allows us to take our place in a world which knows suffering universally.

Too often people with disabilities fail to expand the boundaries of limitation because they may have learned to say I "can't." Many women with disabilities say "we can't" for all the wrong reasons. We are what we believe we are. If we believe ourselves to be dependent, helpless, useless, worthless (disabled or not!) then we will be or become so. We are so afraid of defeat that often our fear renders us incapable. All of us are capable of more than we think we are.

We discover our limits only when we expand within to move beyond them. When we say "we can't", we are saying we will not risk defeat, pain or conflict. We are saying that we will not enter the struggle, we will not encounter God/Self. Life will pass us by without our having experienced the fullness of life. We will be unable to integrate the limitations of life, and we will never know those moments of hope which are contained in the possibilities given to us. Our Creator/God has created us with thousands of potentialities in every given moment of time. When we are enabled to embrace our limitations, we discover the infinite potential within, the gifts which may be hidden or buried. To say I "can" takes a certain security which comes from within oneself, and is nurtured by the unconditional love of God/Self and the love of another who walks with us on the journey.

The Cycle of Grief in Disability

Several years ago I was asked to explore dimensions of spirituality with a group of women with disabilities. I asked each of them to tell me about their spirituality. Each of them were lost in a desert, their spiritual journey dead-ended. They were stranded by feelings of shame, anger and grief which they did not understand. They believed there was something "wrong" with them. They had little understanding of their disability other than being defined by it. As with most of the women whom I see for pastoral counseling, they had not integrated their disability into the totality of their personhood.

In the last nine years I have worked with a number of such groups of women, as well as with individual women with disabilities. Consistently, I have found these women to be experiencing the various stages of grief. No one has identified these stages or encouraged the women to work with end through them. Women with disabilities can benefit enormously through the process of grieving the loss of hoped-for or perceived images and abilities. There are times when we "accept" disability and go about living. At other times we experience the grief and depression which is normal to any kind of loss. Frustration with barriers, discrimination, and oppression contribute to the loss and grief. It is important for counselors to recognize that women who are disabled go through the grief cycle many times in the course of a lifetime. It is normal; it will pass. It is not to be avoided for it is a significant part of the spiritual journey. We must understand our grief, frustration, and anger if we are to move through it and beyond it.

Grief is a circular staircase. In a circular process, feelings continually mingle with issues and images in constant recirculation, until someone helps the grieving one to step out of the loop. There seems to be an inevitable, isolating, barren aspect of grief. One can feel locked into a repeated pattern of remembering the loss, especially if one's everyday life is structured around the reality of loss because of one's disability, e.g. impaired or missing limbs, compromised health, mobility issues, discrimination and/or access issues related to making career decisions, and limited choices at every level of daily living. Isolation is deepened by exclusion from equal opportunity and from social occasions. Spirituality can enable you to understand the place you are in as you explore and mark the boundaries of where you are in your journey. In grief, one is often in the desert or the wilderness. Here one can re-envision isolation and loneliness as a gift which leads to deep, inner healing.

Anger and Forgiving God

We rarely talk about being angry at God. Many people feel anger is wrong or sinful so their spiritual development grinds to a stand still. Unexpressed anger cuts us off from God/Self and prevents inner healing. Acceptance of what is or of what can be is prevented.

The search for identity in women with disabilities is a quest to resolve the inner conflict between spirit and flesh, between idealized self-image and physical reality, between being a sojourner or a victim. It is the conflict of being seen and treated as a child when you are an adult; of being judged as saint or sinner, special or condemned, chosen or ignored. Until these conflicts are resolved internally, you are not able to convince others that you are a companion on the same journey, an equal, and made in the image of God. Resolving these conflicts requires accepting the feelings, fantasies, needs, attitudes, and fears that are a part of our personalities. We are many things besides being disabled, some of these are positive, and some need working on. Keen (1970) notes that:

When...forbidden emotions are recognized as a part of the self, the energy which had been used to keep them out of awareness and to prevent them from being acted upon is released and becomes available for other purposes. Anger owned and symbolically acted upon may be domesticated and turned to productive uses (p. 64).

We are all wounded, some with visible wounds associated with various disabling conditions, others with invisible wounds of the heart or soul. Spirituality cannot develop and grow unless our woundedness and limitation are acknowledged and brought before our Creator/God. It is in the midst of the anger and struggle that we become able to accept living in an imperfect and fragmented world. As we wrestle with our finiteness and limitations, we encounter the One who gives us strength to live with, rather than suffer from our reality.

The pain of living with a disability can be like a hurricane raging inside of us. The wind and rain pound, battering the soul, flooding the gates to freedom. To carry this anger alone inside is to suffer, and perhaps to cause suffering around us. It is im-

portant to vent this anger in safe ways. Counselors can provide safe places, and can encourage clients to express their grief and/or anger to and at the one whom they call God. They need to know it is alright to question and wrestle with God about the meaning and purpose of their lives.

I was never afraid to rage at God. I knew God would absorb my anger and the healing I wanted would come only after the raging storm. I just was not able to "let go" of my anger so that I could actually vent my rage. The "letting go" happened when the pain drove me to cry out to God to take my disability from me.

I was very angry about having cerebral palsy and angry with the attitudes of others toward me. I screamed all of this at God and cried for several hours before falling asleep on my living room floor. In the morning I awoke feeling very still within. It was very clear to me that I had "wrestled with God/Self" in the night and had been changed by the experience. I began to see my "woundedness" as a part of the whole of who I am.

In the darkness of the soul journey, we are confronted with those realities which are ours alone. Alone with our fears and doubts, we are left to face the agonizing struggle. Counselors working with persons on this journey must help them to pull the shadows of doubt, shame, and fear into the light. Seen in a new light, these feelings can be turned into new insights and new understandings of who we are, where we have been, and where we are being called to. It is only when we touch the woundedness of our lives that we are able to move toward healing...and toward Becoming. To Be who one is to recognize and acknowledge one's limitations in order to be used by God/Self.

We can accept the limitation and suffering of disabling conditions as given and celebrate life in the midst of it, or we can be victims who suffer with, as opposed to living with. We have a choice in accepting or rejecting life as it comes to us. We can choose how or if we will get on with the business of living when the unexpected and unwanted occurs in our lives. Few of us "like" what happens. Our choice is in how we react to disability or limitation, and arises out of our willingness to Be who we are and Becoming all we are meant to Be.

An encounter with God requires a personal relationship with God/Self, where we are able to talk about FORGIVING GOD/SELF. We cannot accept forgiveness from God/Self or one another unless we are also able to give forgiveness. In forgiving God/Self, we acknowledge living in an imperfect world, while entering more deeply into the mystery of God. We do not know all the reasons why things happen.

When we forgive God for our disabilities or limitations, we become free to integrate those parts of ourselves which we have been ashamed or unwilling to accept. We accept them as part of God's creation and not as mistakes or punishment. In accepting ourselves we achieve wholeness and find new freedom.

Forgiveness in the spiritual journey is an on-going process rather than a pronouncement of something done. Forgiveness requires activity on our part, a reflecting on what has happened to us, and then naming it, and working toward letting it go. If we have been injured by severity or indifference, by being loved too little, too much, or unwisely, we become free of these wounds only when we recognize them, name them, and forgive both God and the persons responsible, including ourselves, for inflicting

them (Keen, 1970). Forgiveness allows us to accept what is past and cleanses away those feelings which poison us. We can then free ourselves of self-destructive, self-defeating tendencies.

Finding Meaning in the Pain

Looking at the pain within can be a "dark night of the soul" experience (Kavanaugh & Rodriguez, 1979). With these times comes more pain and grief, struggle, fear, and confusion. It is only in facing the pain that we see it for what it is; when we call it by name it loses its power. Pain can turn into negative anger which becomes violent and destructive; or pain can enlarge us as we allow it to transform us. Pain can be like "the refiner's fire" which turns dross into gold. It can become a creative force which makes a difference in the world around us.

God absorbs and transforms pain into a life-giving power. We first have to surrender the self in order for the redeeming power of God's love to heal all pain. The spiritual journey ultimately is about death of the old self and birth of the integrated Self. When we finally know ourselves to be broken and shattered, we no longer struggle against the life-giving power which calls us forth. It is in the shattering that we discover the freedom to be all we are called to Be.

In Bernstein's symphony Mass, we hear these words: "shattered glass shines more brightly..." There are many sides to shattered glass, exposing all to the light, and reflecting a brilliance of color. I believe we can allow the broken shards of life to continue piercing us so that we bleed to death, or we can reflect the complexity and beauty of God/Self in our brokenness and glisten in the darkness of this world.

As we emerge from the darkness of the abyss, we begin to see our gifts. We are able then to reach forward and do the best we can with what we have, and then to reach back in order to help others with their understanding and acceptance of disability in us and in themselves.

Healing and the Presence of Disability

In order to love ourselves, we first have to accept ourselves as we are, with all our particular limitations, difficulties, gifts, and quirks. Keen (1970) notes that, "We can only accept other people if we have first freed ourselves from everything that oppresses and estranges us, and from everything that makes us small and ugly and worthless in our own eyes" (p. 137).

My own spiritual journey meant learning to understand cerebral palsy and integrating and accepting my limitations, while also discovering my gifts and abilities. Psychotherapy and Spiritual Direction enabled me to understand my grief, anger, and frustrations. As I moved into and through the pain, I began to see my gifts, to grow spiritually and become more fully who I am. I learned that I am in the image of God, created with abilities and potentialities. This meant finding new and positive images of who I am, yet integrating my experiences of disability. This process was the beginning of re-defining myself as a woman who is a priest, a mother, a student, and a serious cook, who happens to be disabled. Disability is no longer my defining characteristic; it is not who I am.

The spiritual journey required me to integrate the experience of living with a disability into my priesthood. I had to bring

cerebral palsy with me, not as an unwanted appendage, but as part of the wholeness of who I am. God called me, as I am, without excuse or apology, and not as who I might have been, or how I wished to be. It is through loving oneself, through living fully with that which cannot be changed, that one becomes empowered to change that which can and must be changed from within.

There are many, many women who live with disability, and that should be the message of a lived out hope. Faith lived out may be most visible in persons with disabilities who endure the struggles, accept the challenges, and continue to face life in all its ambiguity. It is faith which allows us to live with the reality of our lives.

Unfortunately there are many people, who like the college prayer group, interpret faith as the prerequisite for removing the disability, which is entirely different than being healed. Their prayers place the burden of being "healed" on the person with the disability. Healing is expected to change the person from one who has a disability into one who does not. Physical healing is not what most persons with disabilities desire. Rather it is spiritual and emotional healing--acceptance, respect, and opportunity.

Healing comes when persons with disabilities adapt to the environment and to their limitations, and live full and meaningful lives. Healing is living with our limitations where necessary, while also being challenged to accept them when possible. It is claiming our faith that enables us to live with the reality of brokenness and imperfection. To be healed is to live in faith and hope, recognizing and believing that new life can come out of suffering and loss.

Healing occurs when family, friends, Church/Synagogue and community affirm and accept our presence by removing the barriers, recognizing our abilities, and receiving our gifts. Healing comes when all of us accept the reality of the disability as part of this life. To be healed is to accept the unacceptable, knowing in faith that God is present in the midst of suffering, loss, and the unexplainable.

Healing provides spiritual well-being yet leaves us to face the setbacks and struggles which limitation inevitably brings. At times we will encounter the desert and become depressed and discouraged. These times are part of the healing journey. Healing is an on-going process and we must be patient; so must those who walk with us.

Companions On the Way

Spirituality calls women with disabilities to live life fully and creatively. How we do that depends upon our being reconciled to ourselves as we are. Living in the present comes out of an awareness that all of our life is sacred. If we live fully in the present, we have accepted ourselves for who we are, and greet each moment in time with our full presence. We sanctify both time and space by our Being-who-we-are in the world. This is life lived in hope..and expectation. Anything less is to enter into the despair of a life in which there is no meaning and no purpose.

Counselors who walk with us on our journey toward God/Self and healing are not required to give us answers. Your presence

requires the ability to be silent in the face of the unexplainable. The ways of God are a mystery. You and I have to be able to stand in the center of that mystery, sometimes in silence, sometimes angry, but together. To do that, each of us must be able to touch our own woundedness and know God/Self there. Until we can do that, we can not be fully present with other's on their journey. To be present is to hear and receive the stories of women with disabilities and be changed by them. As we tell our stories, we are empowered to Be who we are as women...who happen to be disabled.

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A Theology of Anger When Living with Disability

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Abstract. People with disabilities who actively and vocally challenge the barriers and attitudes in a non-disabled society are often labeled "angry." This article examines why anger is necessary and how it empowers people to seek justice and equality in their efforts to live a full and active life. The first section reviews the psychology of anger and discusses how anger can become destructive when the losses and needs of people with disabilities are repeatedly ignored. The second section discusses expressing anger at God and forgiving God as important aspects of the faith journey. One's ability to question God is in direct relationship to one's relationship with God. The reasons for forgiving God are also explored as forgiveness is an important element in every healthy and deepening relationship.

Expressing one's anger is an important step toward spiritual and psychological growth. However, we do not usually think of expressing our anger at or with God. Many people still think it is wrong. Yet we cannot be in relationship with God if we are unable to express our deepest feelings. Anger is a powerful emotion that can wreak destruction in our lives, or it can become a raw energy that fuels our quest for justice and equality. A theology of anger enables us to question God, wrestling with God as it were, in the quest to find meaning and purpose when living with a disability.

It is...the autonomy of humanity over against God that accounts for one of the most remarkable features of the Hebrew Bible, the possibility that people can argue with God and win. (Levenson, 1988)

The angriest character in the Old Testament is God. The anger of God was expressed as a partner in a covenantal relationship and directed at those who turned away from God. It was an anger born of love and justice for the people of God. This is the difference between

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anger that is good and anger that is deadly. The first is connected with seeking justice, the second with punishment of others and of ourselves.

Anger is the antithesis of inertia and death because it is an electrifying *aliveness*. It goes through the body like a jet of freezing water; it fills the veins with purpose; it alerts the lazy eye and ear; the torpid lungs grow rich with easy breath. (Gordon, 1993, p. 3)

It is our ability to experience anger which allows us to experience love, joy, and deep caring for life. Anger is the energy which promotes justice and pushes us toward growth. Anger is a fact of life, woven into the fabric of daily living. It can be healthy and life-changing, or it can be destructive and death-making. Anger that is denied, repressed or unresolved can cause devastation to our health and well-being. This kind of anger changes nothing and causes love to lose all power (Campbell, 1986).

The anger of people with disabilities is rarely understood or accepted as valid or necessary. Our anger is ignored, denied, or silenced by those who tell us how we should feel and behave. This is one of the many ways which others use power over us. Failure to behave according to standards determined by others is one more way of labeling and stigmatizing us in order to dis-empower us further.

The non-acceptance of who we are as people with disabilities—who are sometimes angry—is death-making to our souls. Labeling us for our anger serves to isolate us and further deny the fullness of our humanity, leaving us frustrated...and angry. This may cause us to be locked into a vicious cycle that leads to destructive behaviors, depression and hopelessness. All of this, in turn, makes us even less acceptable to the world of non-disabled people.

When the anger of people with disabilities is denied, we are prevented from being part of a community. Anger is a **protest** against being treated as less than equal. Anger **expressed** is a way of asking to be taken seriously. Anger **heard** is being taken seriously. Anger is a choice we make when faced with the struggles of living. It is a chosen reaction to humiliation (Rohrer & Sutherland, 1981). For people living with a disability, it may be the only appropriate choice in the face of negative attitudes and the barriers of discrimination. However, anger may also be a way of manipulating life, a learned pattern of behavior used to avoid further loss and pain.

How we use the power of anger is also a matter of choice and responsibility (Campbell, 1981). It is not necessary, nor is it always a good thing, to "vent anger" every time we experience it. There has to be a balance, which we find by placing our anger within the context of who we are, our moral values and the choices we prefer. Expressing anger every time we feel threatened or frustrated may not be who we are or how we behave in the world.

This is not the same as denying or repressing anger, however. The denial of anger can cause physical and emotional health problems, and the fear of being angry can make these destructive consequences worse. However, expressing that one feels angry is not the same as giving anger free reign to trample on our relationships.

Learning to understand our anger helps us to control our behavior and make responsible choices in how we behave toward ourselves and others. It also helps us to see that how others respond to our anger is their problem and they must deal with their feelings. The exception to this is when our anger is abusive and destructive. We have a responsibility to "be angry but sin not" (Ephesians 4:26).

In order to examine the role of anger in the lives of people with disabilities, we will first review the psychology of anger in relationship to psychological and spiritual growth. Next, we will discuss the Biblical paradigms for expressing anger to God and why doing so is necessary if one is to have a relationship with God.

The Meaning of Anger

Whenever we are prevented from achieving our goals and desires, we are frustrated and have a need to change the situation. The emotional response to frustration is anger. There is "a distinction between feelings of anger and the emotion of anger" (Campbell, 1986, p. 25). A response to a threat or to frustration causes bodily change, thus we "feel angry." The "emotion of anger is a state of mind of a more complex nature in which we have associated those feelings with various perceptions, thoughts and...fantasies" (Campbell, 1986, p. 25).

Anger as an emotion is expressed in a variety of ways: teasing, practical jokes, sarcasm, prejudice, gossip, domination, suicide, rape, tickling, arguing, shooting, killing, and destroying. Anger as an element of passive behavior is expressed in: depression, guilt, withdrawal, the "super-sweet" personality, pouting, silence, and moodiness (Rohrer & Sutherland, 1981).

Anger can be destructive if we do not understand our emotions and feelings as people living with disabilities. "Accepting" one's disability is not the same as "liking" it. I have no choice in accepting or not accepting my disability. I do have a choice in liking or disliking the disability itself. Note that I am referring to liking or disliking "the disability" and not my person. Destructive anger occurs whenever we feel the following: we feel powerless over other people and circumstances; we do not feel self-sufficient; we have a diminished feeling of importance; or we feel frustrated in the face of what cannot be achieved (Rohrer & Sutherland, 1981).

Sources of Anger

1) Anger is a component of the grief cycle, experienced whenever there is loss. Disability creates loss, usually for a life-time. 2) In addition to our actual limitations,

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society imposes additional limitations on us through the lack of equal access to life at every level (e.g. medical, financial, employment, education, recreation, socializing, community, worship). 3) If we feel we lack power, we may substitute anger for feelings of weakness. 4) When we fear our own desires and needs, we retreat into anger as a way of restoring a sense of self-sufficiency (Rohrer & Sutherland, 1981). For example, if we deny our need for assistance, we may tell people that we do not need them or anybody else! The truth is that we do, but our *fear* of having needs is too frightening so we retreat into anger. 5) We may use anger to keep from feeling unimportant. I see this as a two-edged sword for persons with disabilities. On the one hand we may be treated as less than equal, our human and civil rights often denied. In these instances, the energy of anger may be necessary to protect our rights and dignity and to bring needed change. On the other hand, there are many people with disabilities who use their anger to demand importance in situations that do not warrant their being treated as more special than the next person. 6) Anger is often used to hang on to the illusion of perfection. Rather than admit to any personal inadequacy, people sometimes place the blame outside of themselves. The illusion of perfection in people with disabilities may be lived out as a denial of one's limitations. We may try to live without asking for needed access, reasonable accommodation, or the assistance which would make life easier. We may expend enormous energy trying to cope as if nothing were different, when in fact something is. Since this is not being honest or truthful about our reality, we are feeding both the illusion and our anger. 7) Anger is often the reaction to physical, emotional, psychological and spiritual abuse of vulnerable persons. Sobsey (1994, p. 35) says "...people with disabilities are often repeatedly and chronically abused...the relative risk may be five or more times higher than the risk for the general population." Additional research suggests that 90-95% of women with disabilities are repeatedly abused but seldom receive the needed help to either end the abuse or recover from its effects (Lane, 1994).

Identifying Anger

"Body language" tells others if we are angry. If we sit with arms folded across our chest, bouncing our feet, or are frowning, our body is conveying what our words may not be saying. Our bodies also tell us if we are angry, through headaches, colitis, ulcers, hypertension, skin rashes, and chronic fatigue.

Unacknowledged and unresolved anger causes physiological changes even if we are unaware of them. Our bodies experience anger in chemical changes which affect the autoimmune system. Many physical illnesses have been attributed to "bottled up" anger. However, it is important to say here that anger is inseparable from other emotions. Many illnesses are the result of "unresolved conflicts associated with a range of emotions, of which anger would be one" (Tavris, 1982, p. 117). It is not the emotion, but our *fear* of the emotion which causes us habitually to avoid acknowledging them and thus to become ill. Our actions or behavior also convey our anger—swearing, arguing, walking away

abruptly, and using the silent treatment. These are abusive behaviors, indicating that one's anger has become destructive.

Various situations affect the intensity of one's anger: 1) The mood at the moment—loss of security, feelings of inadequacy, and poor body-image lower one's threshold for anger. 2) Issues involved with abuse, Post-Traumatic Stress Disorder, or depression. 3) Other stresses in your life—the greater the areas of frustration, confusion and loss, the less one is able to adapt to additional stress.

One measurement of emotional stress in a changing situation is the depth of anxiety, fear, anger and guilt. Stress...increases the more we feel that the change is out of our control (anxiety), that there is nothing anyone can do about it (fear), that someone else could have changed the situation and didn't (anger), or that we could have changed the situation and didn't (guilt). (Linn & Linn, 1978, p. 39)

4) How you interpret the situation: we see things through the filter of our self-image. 5) Our needs and desires of the moment: if we are ignored or not heard, overworked, unloved, or lacking security; unmet needs affect our mood. 6) One's ego strength at the moment: our ego strength is based on our opinion of ourselves—are we okay in our own eyes? 7) The status of one's body chemistry: fatigue and illness cause psychological stress and anger. What we eat, the medicines we take, and how we care for our bodies in general affect our emotions. For example, excesses of sugar, alcohol, caffeine and drugs rob our bodies of the essentials which affect the nervous system. Disability adds an additional stress to each of these situations. If one's hierarchy of needs (as defined by Maslow) is also compromised, these situations are further burdened.

In deciding to identify the sources of our anger from prejudice, discrimination, denial of our rights, losses or abuse, we have three choices: "to remain silent, to leave, or to confront" (Christ, 1987, p. 29). Confrontation has a high price, but these struggles are often necessary in order to eliminate the barriers which we face and which exclude us from full participation in life.

Anger and Loss

We experience pain and vulnerability whenever we experience loss. People with disabilities usually experience continuing loss. There is the loss of idealized self-images and hopes; the loss of abilities, of dreams and expectations, of limbs or senses; the loss of opportunities, friends, and lovers. Each time we come up against an occasion which reminds us of a loss, we experience the loss again.

Anger in times of overwhelming grief can cause many physical reactions, leaving us

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with an ever greater sense of helplessness and loss of control (Campbell, 1986). If we endure the pain of a severe loss, we may enter a chronically depressed state in which we withdraw in order to protect ourselves from further loss. As the years pass, the loss will create a powerful screen of defensiveness (Campbell, 1986). We will need to recover our anger in order to heal and live again with feeling and hope.

We can group many of the losses we feel into four categories.

1. Power: power is a means of being free to make our own choices. It is the opposite of feeling weak or powerless. Power comes from how we see ourselves. However, persons with disabilities are often **dis-empowered** by service systems and political structures which deny them access to economic and medical opportunities. Anger is often necessary to maintain our freedom and autonomy. Our *loss* is felt in the frustration of being dis-empowered and denied the benefits others take for granted. For example,

The demeaning and increasingly fruitless nature of the application and renewal process for Social Security and other entitlements can be one of the most anger-provoking barriers experienced by [persons with disabilities].... So [we] find [ourselves] doubly frustrated and angry both at the system itself and others who refuse to understand [what we are put through]. (Thompson, 1985, p. 84)

Helplessness reminds one of one's powerlessness. Anger can be a screen to hide feelings of helplessness. Anger can also be an appropriate reaction to our inability to defend ourselves from the violations of abuse and exploitation. Both of these point to the power differential which creates an on-going *loss* for people with disabilities. Being treated as a child is a familiar experience for people with disabilities. Others make decisions for you regardless of your wishes and desires, thereby dis-respecting your need for autonomy and your independence as a person. This *loss* of independence and autonomy is another frustration of goals and desires.

2. Self-sufficiency: many people assume that people with disabilities are inadequate or unable to do many tasks or jobs. This is yet another *loss*, a frustration of hopes and desires. The appropriate response is anger which will educate others and seek change. It means being assertive and demanding one's equal rights.

3. Wanting to be important: the less secure we are about ourselves, the more we need to be important to others. If our importance is threatened, we become angry. A secure sense of self is made difficult when there are so many losses. Until we know that we are accepted by another, loved by another, and heard by another—we will continue to be angry. Our sense of importance comes from *being understood*.

4. Loss of self-esteem: low self-esteem originates in our being ignored and not being

heard. It is often assumed that people with disabilities do not have the same feelings as others, or that somehow our feelings are of less importance. "Loss of self-esteem comes when our feelings are not important enough to be heard" (Rohrer & Sutherland, 1981, p. 69). When our feelings are dismissed or we are told we should not feel what we feel, *who we are* is denied. The real work of healing lies in others' *listening* to our stories, feelings, desires and fears. Until our feelings are acknowledged, we have not been acknowledged as persons.

Many of us become angry when we are not heard. All too often we are told not to express our anger because non-disabled people simply cannot handle it (Thompson, 1985). It is alright for people to be angry about every issue from gay rights to the environment; but it is not alright to be angry because others refuse to hear us or refuse to accept that many of our problems result from barriers others continue to erect (Thompson, 1985).

Each loss prevents one from having a sense of autonomy or power over her/his own life. Anger is the attempt to retrieve choice, freedom, autonomy, equality, and respect for our adulthood. The problem lies in how we use the anger associated with these losses and how we become empowered.

Anger and Depression

Anger is also a *response* to the losses we experience and is part of the on-going grief cycle in people with disabilities. Some depressions are reactions to crisis in which there has been a failure to express anger. If you cannot express anger, you cannot move through it, nor can you move through the grief cycle. You remain stuck in a cycle of loss, frustration and depression. Excessive or prolonged grief leads to depression, "an unhealthy condition that has gone beyond the bounds of normal mood changes and situational reactions" (Berg & McCartney, 1981, p. 3). We feel so hopeless, lonely, deprived or frustrated that we seek to escape the pain by withdrawing inside ourselves.

Freud saw depression as anger turned inward, "creating guilt, depression and the urge to self-destruction" (Campbell, 1986, p. 55). However, this is not the case with the universal experiences of loss and vulnerability. "...anger and depression are not mirror images of one another. Depression is not simply...*anger turned inward*" (Martin, 1986, p. 32). Both anger and depression may be learned coping strategies [cf. Seligman's work on learned helplessness]. Learned patterns of behavior may go back to childhood when something needed was not provided. The scars of deprivation cause us to defend ourselves against the fear of abandonment. Anger, anxiety and depression are closely connected and feed one another. Anger may not even be a possibility here as there is an established pattern of guilt and withdrawal (Campbell, 1986). We withdraw from danger by blaming self. Guilt and self-blame are often the result of loss. This creates a vicious cycle of seeing ourselves as worthless and erodes our self-image. One gets sucked into a black hole of helplessness and meaninglessness.

Even if we learn how to use anger creatively to address issues of injustice and to bring

about change, we can experience depression from burnout. There is a "disability fatigue," an inescapable burden which comes from living with a disability *and* needing to fight for equal opportunity, educate, explain, demand rights, and never having a rest from the effects of the disability itself. This fatigue can cause us to become very frustrated; when there is no outlet for the frustration, the fatigue settles in on us like a heavy weight, exacerbating our sense of helplessness. Frustration can cause one to give up hope or turn to violence (McClosky, 1986).

Suffering is one more of the frustrations we do not know what to do with. The root cause of most anger at God has to do with our trying to find meaning in the problem of suffering. If we are to find meaning in our frustrations and anger, we need to come before God and with glaring honesty name the anger about our suffering and disability. Until we put the pain of our anger before God, it cannot be healed. Repressing anger in a relationship causes the relationship to die. We cannot be present to God without being honest about our feelings. If our anger is repressed from God, then God cannot know us in the fullness of our being. In order to understand the significance of expressing one's anger to God, we will examine the meaning of a covenantal relationship with God.

Discussing anger within a relationship with God raises questions about God's anger. However, it is not the purpose or intent of this paper to discuss God's anger, which is appropriately a question of Biblical hermeneutics. The Old Testament has many examples of God's anger at the people of God. My personal understanding of this issue is that when we turn away from God through negligence, disobedience or sin, God is angry, but in creative ways which are meant to call us back to God (especially found in the Psalms). Moltmann (*The Crucified God*, 1974, p. 272) says the wrath of God is injured love, which is not inflicted, but is a divine suffering of evil. However, the wrath of God, as seen in the Old Testament, is a current topic of debate among many feminist theologians who see it as a form of patriarchal abuse. I suspect the theology of a wrathful God will have to be deconstructed before it can be reconstructed into an understanding which will be helpful.

Anger at God

Part of our faith journey and the healing of our anger lies in our ability to question God. What God do we worship if we are afraid to challenge God with our questions of why? Do we follow a God born of our own fear or a God of love who leads us from self-hatred into acceptance? One's relationship with God may be broken out of fear of expressing anger. Yelling at God will help re-establish the relationship. It may be that we only pray when shaking our fist at God.

The establishment of both the Old and the New Covenant created a relationship between God and the people of God.¹ A covenant formulates a dialectical theology in which there can be a dialogue of questions and answers. One can both argue with God and yet obey God. Both are spiritual acts; discovering when each is appropriate in the life of faith requires discernment.

What Have You Done Today?

The point of this is to show that when we have a relationship with God, dialogue is expected and warranted. At the same time, we can acknowledge that the ways of God are a mystery; there is paradox. Our "answers" may be in the silence—in the mystery—or in discerning what it is that is being asked of us. Answers require questions, and many of our questions are rooted in the anger of our limited understanding. The same devastating questions which we ask of each other must be asked of God. At the same time, to question is to affirm.

Suffering is a radical challenge to the meaning of human existence. The problem of suffering raises the questions about good and evil, and the source of evil. Much of our anger at God may come in the form of asking hard questions, for which there may be no answers. Most of the questions have to be asked in order for us to struggle toward the answer—which will be different for each of us. We find God in our questioning, not in ready-made answers from those who know nothing of suffering. We discover God in seeking to question the meaning of life, the meaning of suffering, and the meaning of evil. Questioning is costly: it can be as painful as the suffering itself.

Paradigms of Expressing Anger at God

Job seemed to be familiar with the meaning of covenant as described above. He says: "But I would speak to the Almighty, and I desire to argue my case against God" (Job 13:3). Job's anger at God comes out of his internal conflict with God, thus "Job feels free to call upon God for an advocate against God" (Garrison, 1982, p. 169). Job recognizes the total opposites within God which create a dialectical tension. Further, this encounter with God shows that "if it is God who gives and who takes away, the believer is irresistibly pushed again and again toward God" (Garrison, 1982, p. 169).

Job angrily challenged God to explain the cause of his suffering. He did not really expect an answer, nor did he get one. "The God who responds to Job with a magnificent description of his power and creativity and who angrily rebukes his comforters for their lack of understanding, is a God whom Job can continue to obey" (Campbell, 1986, p. 86). This is a God of creation and order, not chaos and destruction. God's anger can be seen as a love with creative purposes. In challenging God, Job came face to face with God and entered into God's mystery, in which we see that there are no answers for now. Yet, like Job, we can go on in faith, trusting that the God of Love will never abandon us.

There is great liberation in expressing anger at God because we are acknowledging the reality and the depths of pain and suffering. The book of Job and many of the Psalms express this realistic anger. "If anger is the other side of love, then it must at times be a feature of a living faith..." (Campbell, 1986, p. 49). We are not offending God but we are expressing our sense of betrayal from the One whom we trusted as loving us. Campbell (1986, p. 77) says that "...such anger is best understood as the cry of someone who will not despair of God...." We come face to face with the dark side of God, yet continue to trust in God's mercy by virtue of our crying out. Campbell writes that "Anger is the

undefeated messenger of hope" (Campbell, 1986, p. 78). I suggest that those who fear expressing anger at God live in a state of hopelessness, unable to move though the anger toward liberation.

There are no answers as to how one finds the way to God. There are only pointers, which is the message to be found in Job. In humility we have to acknowledge the greatness of God, which is beyond our mortal comprehension. It is the intervention of God which opens Job's eyes. In other words, only as we invite God into relationship with us does God dialogue with our suffering and our questions of meaning.

The anger of Jesus in his final hours is reminiscent of Job. Jesus is tested beyond what is fair and reasonable as he speaks these bitter words of anger and despair: "My God, my God, why have you forsaken me?" (Matthew 27:45).² With these words, Jesus enters into the depths of the mystery which is God. Campbell, (1986, p. 48) argued: "The road to Calvary, entered out of love and passion for the truth, leads to a darkness where all that is left is anger against God...., a final and terrible defeat of faith, before the words of trust can be uttered: *Into your hands I commend my spirit* (Luke 23:46) and the words of acceptance, *It is finished* (John 19:30)."

It is in this abandonment experienced by Jesus that God enters fully into the depths of human suffering and experiences the absence of God. The abandonment and the silence of God are characteristics of God's non-intervention, where in our estrangement from God, we experience the nearness of God (Rosse, 1987). It is here that we are surrounded by the love of God. When we enter into a deeper relationship with God, we come to know an unconditional love and acceptance, which can empower us to love and accept ourselves as we are. As we accept our life *as it is* before God, we open ourselves to God and to our own deepest self (Rosse, 1987).

God *suffers* with us, and certainly that is the message of the Cross. The New Testament makes it very clear that God does not ever will suffering for us, nor does God send suffering to test us.³ Often scriptures are misinterpreted and God becomes a sadist. Scriptures indicate that God *permits* evil and suffering (cf. the Psalms; Job; Ecclesiastes 6:2; Matthew 5:45; I John 5:19). Perhaps our anger at God is because God's power was self-limited when we were given freedom to choose between good and evil. It is not always easy to live with the consequences of freedom.

There can be no doubt as to the incomprehensibility of the ways of God. God does not exist for us, but we exist for God, to reveal God at work in the world. Certainly the mature life of faith requires that we obey God. Arguing with God could be regarded as a refusal to obey. However, if we live in covenant with our God, then we have the freedom and the responsibility first to argue—and then to *listen*. Expressing our anger at God involves enormous risk. Our questions will inevitably lead us deeper into the life of faith, where the answers (which are often in the *silence*) may require of us far more than we anticipated.

Forgiving God

We have said that expressing anger at God is part of being in relationship with God. One cannot be in a relationship where there is no forgiveness. Further, it is not a covenantal relationship if forgiveness is offered by only one partner.

In the play *J. B.* by Archibald MacLeish, Job's response is to forgive God for not making a better world. It is a response born of love, which is a gift.

Man depends on God for all things, God depends on man for one. Without man's love, God does not exist as God, only as creator, and love is the one thing no one, not even God..., can command. It is a free gift or it is nothing. And it is more itself, most free, when it is offered in spite of suffering, of injustice, and of death (MacLeish, "God has need of Man" in Glatzer, 1969, p. 285).

Glatzer considers this to be a humanist rendering of what was originally conceived to be an issue of faith. I note this only to show that I am aware of the criticism. However, I believe the points made about covenantal and dialectical theology point to a *relationship* with God. Relationships require that we either are indifferent or we love the other. Anger arises because we care deeply, we love. I therefore see love as the reason and the source of our ability to forgive God.

Rabbi Kushner carries MacLeish a bit further when he speaks about forgiving God:

Are you capable of forgiving and loving God even when you have found out that [God] is not perfect, even when [God] has let you down and disappointed you by permitting bad luck and sickness and cruelty in [God's] world, and permitting some of those things to happen to you? Can you learn to love and forgive [God] despite [God's] limitations, as Job does, and as you once learned to forgive and love your parents even though they were not wise, as strong, as perfect as you needed them to be?

And if you can do these things, will you be able to recognize that ability to forgive and the ability to love are the weapons God has given to us to enable us to live fully, bravely, and meaningfully in this less-than-perfect world? (Kushner, 1981, p. 148).

To talk about forgiving God may seem to imply blame. God's reply to Job makes it clear

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that the ways of God are mysterious to us, and to blame God would be arrogance and blasphemy. However, holding God accountable for what is allowed is to hold God accountable for God's love in the relationship.

Acceptance of God's will without love is not enough. The only answer against injustice is *love*. To forgive God is to require that we be treated fairly, which is to obey the commandment to love ourselves as we love God (Glatzer, 1969). Thus, when we forgive God for the injustices of the world, we speak out of love for God and love for ourselves as created in the image of God.

Just as anger is necessary in the face of societies' non-acceptance of people with disabilities, forgiveness is required to *let go* of the pain which caused the anger. In the splendid film, *My Left Foot*, Christy Brown never internalized the appalling messages of society or the Church. He recognized accurately how people—unconsciously but insensitively—manipulated him, often overpowering him in order to control him. Christy was deeply wounded by the lifelong struggle against prejudice. He ached with the sense of being excluded. His infuriation, his rage, forced people to deal with him. Like the current generation of persons with disabilities, Christy asserts that prejudice is a far greater problem than any impairment. He reflects our demands for dignity, self-determination, and equal access to society, the Church, and life (*Disabilities Study Quarterly*, Fall 1990, p. 23-25).

Christy's anger is often interpreted by others as a deadly power, unleashed unfairly and certainly in ways that made others very uncomfortable. "...the heavy topsoil of repressed injustice breeds anger better than any other medium" (Gordon, 1993, p. 31). The only way to stop this anger-turned-to-rage is by forgiveness. How difficult it is to forgive those who have killed our soul and thwarted our goals and desires for equality. However, we recover our soul and our life only when we forgive and in forgiving, *let go* of the hurt inflicted on us. In the silence and emptiness which follow, we put to rest anger turned deadly. This is justice too, for life is restored in us and we begin to experience "the peace which passes all understanding."

Anger that has turned deadly may have severed one's relationship with God. Hating God is much healthier than turning hatred in upon ourselves. It takes courage and a *knowledge* of God. Hating yourself is simply hating God in disguise because you lack courage to do otherwise. Expressing this strong feeling allows us to be honest and break down the barriers between us and God.

Forgive God for the pain and suffering which you feel is unfair and deep. We are not suggesting that you forgive God for not getting your own way in life. No one does. Nor should we forgive God for what we bring upon ourselves...addictions, bad habits, irresponsible living. Rather, forgive God for those things which cannot be changed or over which we have no control.

Once we have forgiven God, we are changed in ways which open us to accepting the realities of life which cannot be changed. Life is not perfect—it comes with pain and

suffering. It also comes with things which give us happiness and meaning. We come to understand that God suffers with us and know that we are not abandoned. We know God forgives those who have brought pain and destruction into our lives. We accept that the love of God forgives us for the pain and destruction we cause others or ourselves.

Anger as a Creative Power

Beverly Harrison (1981, p. 50) writes that "Anger directly expressed is a mode of taking the other seriously." Too often it is we who are not taken seriously, so it is difficult for our anger to be *heard* and understood as necessary for our inclusion. It is imperative for us to find creative and meaningful ways of dealing with the threats and frustrations of living with a disability. Our anger must become a constructive tool for communicating clearly and truthfully what we need and what we feel.

"The gospel of anger" can be found in the anger of Jesus, who sided with the rejected of society and who spoke out fearlessly against the authorities. Jesus had no patience with those whose piety overlooked justice and mercy. His anger was to speak truth to falsehood and hypocrisy. The gospel of anger is about truth, love and justice (Campbell, 1986). This is anger which identifies and articulates clearly what is needed. It speaks out of love and seeks to bring change where it is needed.

Much of the injustice we face is created and sustained by political structures. It is difficult to address an entire system in an effort to create change and effect justice. Personal communication usually has no effect, and political communication by persons with disabilities has brought too little too late for too few. We can use our anger in positive ways to insist upon change by seeking love and not destruction. This is the hard path as it makes no concessions to injustice and requires a spiritual discipline which will keep us from becoming the oppressor.

When anger is because of oppression and social injustice, we usually feel alienated from others. However, failure to express our anger at the injustices which threaten the quality of our lives results in apathy and diminishment of who we are (Campbell, 1986). People tend to feel angry and guilty when the oppressed "spill their guts." It requires courage and boldness to confront with honesty and clarity the injustices which undermine our lives. This is another place where expressing our anger to God can protect us from apathy.

Once we come to understand our anger and move through it, we can begin to synthesize it with other aspects of who we are: 1) We may combine it with intelligence and reasoning so that we develop a sharp mind. 2) Anger may motivate our ambition and we will achieve our goals. 3) Anger may stir us to work for justice where there is injustice. 4) Anger may drive us to work tirelessly on behalf of others who suffer (Rohrer & Sutherland, 1981). 5) We can turn anger into compassion through support groups which break down our sense of isolation (McCloskey, 1986).

All that has been outlined and discussed demonstrates the many vicious cycles which "tend to turn inward and downward, perpetuating and often deepening the anger felt by [people] with disabilities.... This anger grows strong as the cycles continue and it is not going to disappear either quickly or easily" (Thompson, 1985, p. 84). Healing begins as we who live with disabilities recognize our anger and give credibility to it. It is what we feel; it is based on what we *have* experienced. Our losses are real. Our reality is not changed by the latest euphemism or any other denial of our experiences, feelings and emotions. It is normal to be affected by loss, grief, and the injustices which frustrate our achievable goals. "No one should be asked to accept discrimination from anyone" (Thompson, 1985, p. 85). Our anger is rational and justified.

Anger is a basic, human experience, and vital to the process of the inner transformation which leads to our wholeness (Martin, 1986). Campbell (1986, p. 65) writes that "...love is better served when anger is neither feared nor denied, but is given its place in our lives." We must learn to cope creatively with accepting the reality of our disabilities and the limitations which they impose on our lives. We can choose to remain angry over what has been lost or never realized, or we can find joy and grace in what has been given and in what can be. We can focus on our weaknesses or we can develop our strengths into their fullest potential. Perhaps the words of William Sloan Coffin (1989) are the best reminders of the positive role anger can play in our lives: "Anger keeps you from tolerating the intolerable."

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End Notes

1. cf. Exodus 6:7; Jeremiah 7:23; 11:4; 30:22 31:31; Ezekial 36:28; Luke 22:20; I Corinthians 11:25; II Corinthians 3:6; Hebrews 8:8; 9:15; 12:24.
2. New Revised Standard Version.
3. The expression "the will of God" occurs 15 times in the New Testament, 8 times in the Pauline corpus. The "will of God" is linked to suffering in only 3 of those instances. It occurs once in the Old Testament in Tobit (12:18) in the context of healing.

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*Description of Workshops for Churches
and Staff Development*

DISABILITY AWARENESS: AN EMPOWERING MINISTRY

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BIBLICAL, THEOLOGICAL AND SPIRITUAL ISSUES OF DISABILITY

This workshop is for seminarians, clergy, or staff and is designed for Training and Development or as a Continuing Education course. It is also appropriate for any church engaged in ministry with people with disabilities or chronic illnesses.

- Theological Issues in Disability and Religion
 - language reflects theology
 - “victim theology:” disability represents demon possession; suffering is God’s will
 - compassion vs. Pity
 - faith and healing
 - what is healing and what does it mean when disability remains
 - the disabled God and the suffering of God

- Spiritual Issues when living with Disability
 - discrimination, exclusion, oppression and injustice
 - understanding the grief cycle, depression,
 - anger at God
 - forgiving God
 - what is acceptance? Who needs to accept disability?
 - integrating the experience of suffering as a condition of life

Handouts Include:

The Spiritual Resources of People with Disabilities
Forgiving God
Anger as Creative Power
A Healthy Religious Community Takes Disability in Stride
Issues Which Prevent us From Addressing Spiritual Needs
The Grief Cycle
Clergy with Disabilities Speak Out
Bibliography for Spirituality and Disability

PASTORAL CARE AND COUNSELING FOR PEOPLE WITH DISABILITIES:

This workshop is designed to meet the particular needs of the host group and would include the discussions above. In addition, we cover the following topics:

- The Psychology of Disability
 - acceptance vs. liking or disliking one’s disability/illness
 - understanding frustration and anger as appropriate responses to barriers
 - understanding learned helplessness, negative self image as societal messages
 - redefining negative expectations for you and the person with a disability
 - exploring advocacy and knowing what support systems are available
 - helping people with disabilities affirm their abilities

- The Psycho-spiritual Aspects of Disability
 - self-identification or labeled
 - maintaining role expectations or seeking liberation
 - abuse of people with disabilities: listening and responding
 - finding meaning when living with disability or illness

Numerous handouts from the two lists given in this brochure are used.

DEVELOPING A MINISTRY WITH PEOPLE WITH DISABILITIES AND THEIR FAMILIES

This workshop (one day) or seminar (two days) is designed to help parishes become welcoming and accessible communities.

- Where are people with disabilities and who are they?
- How negative attitudes, and inaccessible buildings and programs exclude people.
- How language reflects our theology.
- Overcoming our own fears of limitation and difference.
- Living with disability versus suffering from disability: how we can teach the Church.
- The healthy church takes disability in stride.
 - How to begin a ministry.
 - How to become inclusive and accessible.
 - Educating the parish.
 - Reaching out to invisible people.

Numerous handouts from the two lists in this brochure are used.

RETREAT OR WORKSHOP FOR PEOPLE WITH DISABILITIES OR CHRONIC ILLNESSES

This material can be arranged to suit the needs and time availability of the host group. It can be a retreat, designed with periods of rest, worship, and reflection or it can be a workshop. All events must be planned with attention to accessibility, careful use of language in all media materials announcing the event (no euphemisms), and careful selection of other participants (e.g. many non-disabled people involved in disability work are not sensitive to the politics of oppression involved with language, theology, and spirituality).

- Psycho-spiritual aspects of living with disability or chronic illness
 - depression, the grief cycle, anger, rage, and acceptance –yours and theirs
 - strategies for understanding each, moving through and beyond them
 - finding healthy ways of dealing with stress, addiction, isolation
 - identifying the spiritual and theological issues of disability
- How do we define ourselves; what is our body image
 - who are we
 - language and oppression: the politics of disability
 - sexuality and spirituality
 - embodiment vs dis-embodiment

- Anger at God
 - creative anger that seeks justice
 - destructive anger
 - forgiving God, self, and others
 - finding meaning in suffering; suffering is not the will of God; God suffers with us

- Healing
 - what is healing
 - what does it mean for us when we live with disability or illness
 - ^ where is God in my experience
 - integrating the wounds of life
 - learning who we are; learning to tell out stories
 - transformation

Handouts include:

Learning My Story
 A Few Definitions of Healing
 Definition of Spirituality
 Bibliography for Spirituality and Sexuality
 Bibliography for Disability and Spirituality
 Listening, Hearing, and Responding to God's Word
 Healing and Spirituality Questions for Reflection
 Some Rules for Living
 Living Into A Spirituality
 Relieving Stress, Restoring Balance
 Finding Acceptance of Ourselves and Our Disabilities
 Self-Discipline for Healing and Wholeness
 Responsibility to God and to Self
 The Grief Cycle
 Forgiveness and Forgiveness Revisited
 Strategies for Healing Inner Pain

BIOGRAPHICAL SKETCH

The Rev. Dr. Nancy Lane received the Ph.D. in Religion and Psychology from The Union Institute, Cincinnati, Ohio. She was a Visiting Scholar at Oxford University, England, where she studied the meaning of healing and suffering. Dr. Lane received a B.A. in Religion from Wells College, Aurora, N.Y. and the Master of Divinity from Colgate Rochester Divinity School, Rochester, N.Y. Ordained in the Episcopal Church in 1984, she served as a diocesan staff officer and Director of the Office of AccessAbility for the Diocese of Central New York. Dr. Lane later became the Executive Director of Disability Awareness: An Empowering Ministry. She is known as a national and international speaker on issues of accessibility and disability in the Church and the community, and has delivered papers before the World Council of Churches Congress in the Netherlands, the W.C.C. Consultation on Religion and Disability in Uruguay, and the International Congress on Pastoral Care and Counseling in Australia. She has lectured at numerous colleges, seminaries, and conferences within the ecumenical community and for many secular organizations, including medical schools.

Dr. Lane is also a Jungian-based psychologist, with expertise in treating women with disabilities, battered women and women suffering from Post Traumatic Stress Disorder (PTSD). Dr. Lane has also written a number of articles on the *spirituality of living with disability* and is author of a book on *the spiritual and theological implications of the abuse of power toward women with disabilities*, to be published soon.

A HEALING MINISTRY

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INTRODUCTION TO OUR WORKSHOPS ON HEALING

A survey of the American Academy of Family Physicians has found that doctors are looking more closely at the link between faith and healing. Ninety-nine percent of doctors believe there is an important relationship between the spirit and the flesh (AP, 6/97). Our workshops on **Spirituality and Healing** and **Explorations in the Healing of Addictions** explore the relationship between our spiritual health and faith in God and our physical and psychological well-being. This holistic approach reflects Jesus' ministry of healing, which was always concerned with the whole person and their transformation.

The workshop on **The Christian Healing Ministry in the Church** is designed solely for churches involved in a healing ministry. The other three workshops are concerned with personal healing.

Our workshops use *psychology* (understanding the power of the mind the effects of consciousness and unconsciousness), *theology* (how we understand God at work in our lives) and *spirituality* (how we are connected to God and Self) to understand how healing is meant to *transform* our lives.

The Rev. Nancy Lane received the Ph.D. in Religion and Psychology from the Union Institute, Cincinnati, Ohio, and was a Visiting Scholar at Oxford University, England, where she studied the meaning of suffering and healing. Dr. Lane received a B.A. in Religion from Wells College and the Master of Divinity from Bexley Hall at Colgate Rochester Divinity School. Ordained in the Episcopal Church in 1983, she served as a diocesan staff officer for several years. Dr. Lane is known as a national and international speaker and has lectured at numerous colleges, seminaries and conferences. She is retreat leader and author of a number of articles on spirituality and healing.

*Dr. Lane is trained in Jungian psychotherapy and in Spiritual Direction. She is currently practicing a Ministry of Healing, based on the principles of integrative and holistic healing of **bodymind** and spirit, using sacred psychology, prayer therapy, and laying on of hands for those who request it.*

DESCRIPTION OF WORKSHOP MODULES

I. HEALING AND SPIRITUALITY

Science has made enormous strides in recent years with the discovery of an indivisible *bodymind*. Just as the mind is not in one place, so the soul is not to be found in any one place; it is now thought to be throughout the body. The implications of this are that whatever is in the soul is in the *bodymind*. Understanding how these three aspects affect our health, growth and well-being will evolve rapidly in coming years. Scientific studies of prayer have also demonstrated that prayer and belief have a direct impact on disease processes, health, and the entire healing process. The results of these studies suggest that the medical model of health care (a disease-based model) will be replaced by a wellness model.

Jesus was a healer of body, mind, and soul. Jesus saw wholeness as the well-being of the total person: psychological, spiritual, physical. There was no separation of body and soul because Jesus understood them as bound together in a living unity. Jesus understood that whenever our psychological and spiritual life was out of balance, the body responded in the effort to communicate this to us.

The great spiritual teachers have always regarded psychology as significant to spirituality because of its role in the integration and transformation process. Transformation requires us to enter into a healing process, where and spirituality work together to set us free to become the person God has created us to be. Depth psychology has taught us that attitudes, perceptions, and behavior are influenced by feelings, which affect how our faith matures. We cannot respond authentically to a faith commitment without facing and examining our feelings and knowing how they affect our lives.

This seminar examines the healing process within the context of Jesus life, ministry, death and resurrection. We learn what these mean for our own spiritual journey and how the death and resurrection process require attention to our psychological life-- including our sexuality, awareness of our embodiment, the role of depression and anger in the spiritual journey, coming to know fully who one is and where you have been, where you are, and knowing where God calls you now.

The following format of material is designed for a 2 ½ day teaching seminar for continuing education programs. It is assumed that participants will have a working knowledge of biblical studies, theology and some familiarity of the writings in classical spirituality. This is an intensive seminar of lectures, Q & A with discussion, and extensive handouts. The workshop can be designed to fit the host's schedule but cannot be shortened in this format.

The cost for this seminar is \$1,500.00 plus all travel expenses. The host is responsible for photocopying all handouts.

Introduction: The Healing Ministry of Jesus

- The Role of Faith: Living what we believe
- The Authority of Jesus to Heal
- Death and Resurrection in the Healing Process
- Forgiveness and Reconciliation
- Listening, hearing and responding to God's Word and inner messages of healing

Understanding the *Bodymind* connection

- Defining Spirituality
- Defining Healing
- Understanding Embodiment
- The Bodymind and disease
- How spirituality affects our *Bodymind*
- Sexuality and Spirituality

Prayer and Healing

- Scientific evidence that prayer changes reality
- How belief shapes reality
- The role of prayer in healing
- What is Prayer?

The Spiritual Dimensions of Depression

- Darkness, Abandonment and Prayer
- Spirituality & Self-image
- Healing Depression

A Theology of Anger

Anger and Love
Anger at God in the Covenantal Relationship
Paradigms for expressing Anger at God
Forgiving God

Forgiveness and Healing

Accepting God's love and loving oneself
Confession and repentance in the healing process
Letting Go

Healing

Who Am I?
Learning and telling one's story
Acceptance

Handouts include:

A Few Definitions of Healing
Defining Spirituality
Identifying Spiritual Needs
Transformation
Blocks to Healing

Relieving Stress: Restoring Balance
Spirituality & Sexuality: Definitions
Touch
Body Image
Women & Abuse
Sexuality and Spirituality
Spirituality & Sexuality: Bibliography

Self-Discipline for Healing Depression
Some Rules for Living
Forgiveness
Forgiveness Re-visited
The Future of Prayer
Prayer and Faith
Images of God

Self-Image
Learning How to be Yourself
Finding Acceptance of Yourself
Living into a Spirituality

II. HEALING AND SPIRITUALITY

This material is condensed for a one day workshop that runs from 8:30 a.m. - 4:00 p.m. This format is designed for people interested in holistic healing and a deeper knowledge of the role of prayer and faith in the healing process. Originally designed for people who work in the caring professions, this is an intensive workshop for anyone wanting to further their knowledge and understanding of healing.

The cost of this one-day workshop is \$700.00 plus all travel expenses. The host is responsible for photocopying all of the handouts.

Introduction: Understanding Healing within a holistic Christian Context

The Role of Faith: Living what we believe
Death and Resurrection in the Healing Process
The Meaning of Healing (vs. Curing)
Listening , hearing and responding to God's healing Word

Understanding the *Bodymind* connection

Defining Spirituality
Defining Healing
The Bodymind and disease
How spirituality affects our *Bodymind*
Sexuality and Spirituality

The Spiritual Dimensions of Depression

Darkness, Abandonment and Prayer
Spirituality & Self-image
Healing Depression

A Theology of Anger

Anger and Love
Anger at God
Forgiving Self, Forgiving Others
Forgiving God
Confession and repentance in the healing process
Letting Go

Prayer and Healing

What is Prayer?
How belief shapes reality
Scientific evidence that prayer changes reality
The role of prayer in healing

Handouts included are the same as for Workshop I.

III. THE CHRISTIAN HEALING MINISTRY IN THE CHURCH

This workshop is designed as a "Healing 101" course to introduce clergy and interested lay persons to the healing ministry in the church. The content of the course is listed below. As designed, this is a day-long event. You may discuss the contents with me to design a course to fit the needs, interests, and level of understanding for your church.

The cost of this workshop for one-day is \$700.00 plus any travel expenses. The host church is responsible for photocopying the handouts, which will be provided in advance.

I. THE HISTORY OF CHRISTIAN HEALING

Origins and Development

**Pre-Christian history of healing
Healing in the O. T.**

**Healing in the N. T.
The Healing Ministry of Jesus
Science, Medicine and Healing**

II. TOWARDS A THEOLOGY OF HEALING
Principles of Christian Healing in Brief

**Forgiveness
Eucharist
Laying on of Hands
Anointing**

III. HEALING AS SHARED MINISTRY
"The Priesthood of All Believer"

IV. TOWARDS A PRACTICE OF HEALING
The Place of Healing Services in the Life of the Church
(A more detailed application of the following)

**Laying on of Hands
Anointing**
History of anointing
Scriptural basis for anointing
Theology of anointing
Practical aspects of anointing

**The Holy Eucharist as service of healing
The healing service**
How to plan for Healing Services in your congregation

V. EXPECTATIONS IN HEALING
An Attempt to be Realistic

VI. HEALING IN YOUR CHURCH
The Next Step

**Beginning the Healing Ministry
Steps to Engage In
Healing Prayer Groups
Life of Prayer
Ways of Praying for Healing
Listening
Discernment
Spiritual Direction**

Handouts for this workshop include the following:

Introduction to The Healing Service of Laying on of Hands
Getting Started in the Christian Healing Ministry
The Church's Ministry of Healing: Integrating the ministry of healing into the life of the Church
Beginning the Healing Ministry
Forgiveness
Forgiveness Re-visited

Listening, Hearing and Responding to God's Healing Word
The Future of Prayer
Ways of Praying for Healing
Issues of Faith Healing for Persons with Disabilities
Personal Preparation for the Healing Ministry
Guidelines for the Spiritual Journey

IV. EXPLORATIONS IN THE HEALING OF ADDICTIONS

This workshop is for people already in recovery who seek to understand and change any compulsive behavior which affects the quality of their lives and relationships. The benefits of this workshop are directly related to engagement with the material and exercises and a commitment to healing one's life.

This format is designed to be covered in 1 ½ hour sessions over the course of ten weeks. The following materials, with suggested written exercises, are provided for participants as part of the cost of the program. Other readings will be suggested for personal use. Participants will be asked to keep a journal and to engage with the materials. A commitment to one's continued healing is assumed for participation in these groups. A minimum of six and a maximum of ten people per group is required. Groups may meet in your church or my office.

The cost for this workshop is \$10.00 per week per person, plus \$8.00 for materials. The full fee is required even if a class is missed.

I. THE HEALING JOURNEY: HEALING ADDICTIONS

- * Definition of addiction
- * Attachment
- * Addictive Behaviors
- * Characteristics of Addiction
- * Signs of War: Battling Addiction
- * The role of spirituality in freedom from addiction

II. PSYCHO-SPIRITUAL DYNAMICS OF ADDICTION:

- * Mind: The psychological nature of addiction
- * Body: The neurological nature of addiction
- * Transformation
- * Quenching our thirst for wholeness
 - ^ Self-Hate and Self-Esteem
 - ^ Depression

III. EXPLORATIONS IN THE SPIRITUALITY OF EMBODIMENT, SEXUALITY AND ACCEPTANCE

- * Defining Sex and Sexuality
- * Dis-embodiment
- * Body Alienation and Body Image
- * Embodiment
- * Healing Body Image
- * Accepting ourselves as we are
- * Relieving Stress, Restoring Balance

IV. UNDERSTANDING THE SPIRITUAL JOURNEY

- * Longing for meaning and purpose
- * Grief
- * Defining the spiritual journey as healing journey
- * Learning to let go
- * Where have you been and where are you going?
 - * Knowing who you are and why
 - * Discovering your potential
 - * Discovering what is important to you
 - * Discovering Your Gifts and Inner Resources
 - * Being Who You Want to Be

V. ANGER AT GOD

- * Anger and love are connected
- * Pain and anger: destructive or the source of healing?
- * The meaning of anger
- * Anger at God
- * Models for expressing anger at God
- * Understanding anger as a power for good

VI. STRATEGIES FOR HEALING INNER PAIN

- * Feeding and nurturing our spirituality
- * Learning to accept and love oneself
- * Coming to know and love God/Self
- * Discernment: healing addictions and finding a new life

VII. FORGIVENESS

- * What needs forgiving in our lives?
- * Who needs forgiving?
- * Do we forgive others?
- * Do we accept forgiveness?
- * Do we live as though we know we are forgiven?
 - ^ Or are we stuck in guilt and shame?

VIII. WHERE HAVE YOU BEEN AND WHERE ARE YOU GOING? **One must learn (and tell) their story.**

- * Knowing who you are and why: Discovering your potential.
- * Discovering Your Values: What is important to you?
- * Discovering Your Resources: What do you have that you know you can count on?
- * Being Who You Want to Be: What do you need to do to change?
- * Integrating New Behavior into Your Life

IX. MAPS FOR THE JOURNEY:

- * Where do you want to go?
- * What are you called from and what are you called to?
- * How to get there
- * Taking action on your decisions
- * Guides for the journey

BIBLICAL, THEOLOGICAL AND SPIRITUAL ISSUES OF DISABILITY

This workshop is for seminarians, clergy, or staff and is designed for Training and Development or as a Continuing Education course. It is also appropriate for any church engaged in ministry with people with disabilities or chronic illnesses.

- Theological Issues in Disability and Religion
 - language reflects theology
 - "victim theology:" disability represents demon possession; suffering is God's will
 - compassion vs. Pity
 - faith and healing
 - what is healing and what does it mean when disability remains
 - the disabled God and the suffering of God
- Spiritual Issues when living with Disability
 - discrimination, exclusion, oppression and injustice
 - understanding the grief cycle, depression,
 - anger at God
 - forgiving God
 - what is acceptance? Who needs to accept disability?
 - integrating the experience of suffering as a condition of life

Handouts Include:

The Spiritual Resources of People with Disabilities
Forgiving God
Anger as Creative Power
A Healthy Religious Community Takes Disability in Stride
Issues Which Prevent us From Addressing Spiritual Needs
The Grief Cycle
Clergy with Disabilities Speak Out
Bibliography for Spirituality and Disability

PASTORAL CARE AND COUNSELING FOR PEOPLE WITH DISABILITIES:

This workshop is designed to meet the particular needs of the host group and would include the discussions above. In addition, we cover the following topics:

- The Psychology of Disability
 - acceptance vs. liking or disliking one's disability/illness
 - understanding frustration and anger as appropriate responses to barriers
 - understanding learned helplessness, negative self image as societal messages
 - redefining negative expectations for you and the person with a disability
 - exploring advocacy and knowing what support systems are available
 - helping people with disabilities affirm their abilities
- The Psycho-spiritual Aspects of Disability
 - self-identification or labeled
 - maintaining role expectations or seeking liberation
 - abuse of people with disabilities: listening and responding

finding meaning when living with disability or illness

Numerous handouts from the two lists of same are used.

DEVELOPING A MINISTRY WITH PEOPLE WITH DISABILITIES AND THEIR FAMILIES

This workshop (one day) or seminar (two days) is designed to help parishes become welcoming and accessible communities.

- Where are people with disabilities and who are they?
- How negative attitudes, and inaccessible buildings and programs exclude people.
- How language reflects our theology.
- Overcoming our own fears of limitation and difference.
- Living with disability versus suffering from disability: how we can teach the Church.
- The healthy church takes disability in stride.
 - How to begin a ministry.
 - How to become inclusive and accessible.
 - Educating the parish.
 - Reaching out to invisible people.

Numerous handouts from the two lists of same are used.

RETREAT OR WORKSHOP FOR PEOPLE WITH DISABILITIES OR CHRONIC ILLNESSES

This material can be arranged to suit the needs and time availability of the host group. It can be a retreat, designed with periods of rest, worship, and reflection or it can be a workshop. All events must be planned with attention to accessibility, careful use of language in all media materials announcing the event (no euphemisms), and careful selection of other participants (e.g. many non-disabled people involved in disability work are not sensitive to the politics of oppression involved with language, theology, and spirituality).

- Psycho-spiritual aspects of living with disability or chronic illness
 - depression, the grief cycle, anger, rage, and acceptance –yours and theirs
 - strategies for understanding each, moving through and beyond them
 - finding healthy ways of dealing with stress, addiction, isolation
 - identifying the spiritual and theological issues of disability
- How do we define ourselves; what is our body image
 - who are we
 - language and oppression: the politics of disability
 - sexuality and spirituality
 - embodiment vs dis-embodiment
- Anger at God
 - creative anger that seeks justice
 - destructive anger
 - forgiving God, self, and others
 - finding meaning in suffering; suffering is not the will of God; God suffers with us
- Healing
 - what is healing
 - what does it mean for us when we live with disability or illness

^ where is God in my experience
integrating the wounds of life
learning who we are; learning to tell out stories
transformation

Handouts include:

Learning My Story
A Few Definitions of Healing
Definition of Spirituality
Bibliography for Spirituality and Sexuality
Bibliography for Disability and Spirituality
Listening, Hearing, and Responding to God's Word
Healing and Spirituality Questions for Reflection
Some Rules for Living
Living Into A Spirituality
Relieving Stress, Restoring Balance
Finding Acceptance of Ourselves and Our Disabilities
Self-Discipline for Healing and Wholeness
Responsibility to God and to Self
The Grief Cycle
Forgiveness and Forgiveness Revisited
Strategies for Healing Inner Pain



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