



Addressing Accessibility Within the Church: Perspectives of People with Disabilities

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Abstract

People with disabilities often lack full access to corporate worship and participation in their faith communities. Yet many church leaders experience uncertainty about the steps they should take to remove barriers and widen the welcome for members of their community who are impacted by disability. This study examined the recommendations of people with disabilities regarding how churches should pursue greater accessibility. We interviewed 37 Christians who were members of a local church in Tennessee and who experienced various disabilities (i.e., visual impairments, intellectual disability, autism, physical disabilities, hearing impairments). Their guidance coalesced around nine primary actions: advocating, reflecting, asking, researching, equipping, embracing, proacting, including, and praying. We address key implications for churches striving to be inclusive of people with and without disabilities, as well as offer recommendations for future research.

Keywords Accessibility · Inclusion · Worship · Disability · Christianity

Introduction

People with disabilities have a presence in every community throughout every country. Indeed, nearly one in four Americans (Taylor, 2018) and more than one billion people around the world report having a disability (World Health Organization, 2021). Moreover, most people will experience disability at some point in their lives—whether at birth or acquired later on, whether temporary or permanent, whether visible or hidden. The ubiquity and prevalence of disability raises a

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pressing question for Christians committed to inviting, welcoming, and loving their neighbors: Can individuals impacted by disability access church?

Research examining the religious experiences of people with disabilities suggests a mixed answer to this question (see review by Carter, in press). For example, studies find that involvement in a local faith community holds a prominent place in the lives of many people with disabilities (e.g., Carter & Boehm, 2019; Hodge & Reynolds, 2018). At the same time, research also indicates that overall church attendance is substantially lower among people with disabilities than it is for people without disabilities (e.g., National Organization on Disability, 2010; Whitehead, 2018). Qualitative studies examining the personal experiences of individuals with disabilities and their families within their churches feature examples of extravagant welcome as well as experiences of extreme wounding (Liu et al., 2014; Jacober, 2018). In short, some churches seem to be very intentional about removing barriers to full participation, while many others have yet to consider or address their accessibility.

Although most church leaders would likely affirm the importance of being an accessible faith community, they may be uncertain about how to enact this commitment within their own congregation (e.g., McNair & Sanchez, 2008; Thompson et al., 2019). In a survey of North American theological schools, Annandale and Carter (2014) found that the topic of disability had received scant attention in most seminaries—both within coursework and field experiences. Indeed, only 29% of school leaders felt that graduates of their seminary were adequately prepared to integrate individuals with disabilities into all aspects of church life. Similarly, Stewart-Ginsburg and colleagues (2020) found that most religious leaders (68%) reported they had never received training on how to support children with disabilities within their congregation. A paucity of previous experience or education related to the inclusion of people with disabilities may lead some churches to overlook this issue or feel reluctant to address it.

Congregational leaders could benefit from receiving guidance regarding how they might pursue greater accessibility within their church (e.g., Ault et al., 2021; Herzog, 2017; McMahan-Panthor & Bornman, 2021). For churches already attuned to this need, an abundance of books and conferences are now available to inform their initial steps (e.g., Carter, 2007; Hubach, 2020). Similarly, theological work addressing disability and inclusion has also grown in recent years (e.g., Brock, 2019; Macaskill, 2019). Although these avenues represent practical sources of advice for church leaders, it is always critical that the perspectives of people with disabilities be sought when addressing accessibility. The maxim “nothing about us without us” captures well the assertion that people with disabilities are usually in the best position to address what would—and would not—facilitate their full and meaningful participation (Barton, 2021). Indeed, people with disabilities know first-hand which postures and practices can support or hinder their involvement in all aspects of a worship service (e.g., Hobbs et al., 2016; Carter et al., 2022). As such, their insights into needed changes should be sought out and prioritized.

The purpose of this qualitative study was to solicit the recommendations of people with disabilities regarding how to promote greater accessibility within the church and in worship. We sought the perspectives of individuals who were actively involved in a local congregation and who considered their faith to be important

aspect of their lives. We anticipated their insights on this issue could provide practical guidance to churches wondering what steps they should take to widen their welcome.

Method

Participants

Thirty-seven adults with disabilities participated in this study (see Table 1). To be included, participants must have (a) had a disability, (b) attended a local church, (c) been at least 18 years old, and (d) lived in Tennessee. Ages of participants ranged from 20 to 67 ($M=36.7$). Most were female (62%) and 16% were non-White. Their primary disabilities were visual impairment ($n=10$), intellectual disability ($n=8$), autism ($n=7$), physical disability ($n=7$), and hearing impairment ($n=5$). One quarter (24.3%) of participants also reported having additional disabilities.

Participants attended churches representing 14 different denominations, including Catholic, Church of Christ, Church of God in Christ, Church of the Nazarene, Disciples of Christ, Episcopal, Greek Orthodox, Missionary Baptist, Mount Zion, Non-denominational, Presbyterian, Southern Baptist, and Quaker. Their current churches ranged widely in size and their length of attendance ranged from 2 months to 48 years ($M=9$ years). Most participants attended worship services weekly (62.1%) or several times per week (13.5%); the rest attended less often. We asked participants to rate five statements related to their faith (Plante et al., 2002), the percent which agreed or strongly agreed were as follows: 100% affirmed “I look to my faith as providing meaning and purpose in my life,” 100% affirmed “I enjoy being around others who share my faith,” 89.2% affirmed “My faith impacts many of my decisions,” 91.2% affirmed “I pray daily,” and 94.6% affirmed “I consider myself to be active in my faith or congregation.”

Recruitment

After receiving Institutional Review Board approval (#191848), we partnered with an array of local disability organizations and programs to disseminate study announcements widely throughout the central region of the state. These groups included area chapters of disability-specific organizations (e.g., Arc, Autism society, Brain Injury Association, Down Syndrome Association, Epilepsy Foundation, Mental Health Alliance), therapeutic programs, regional Centers for Independent Living, employment and residential providers, special recreation programs, and a university center on disability. All had direct connections to individuals with disabilities.

We provided multiple materials for distribution, including a print flyer, email invitation, newsletter blurbs, and an example social media posting. All materials described the purpose of the study, its inclusion criteria, the nature of the involvement (i.e., hour-long interview), and the honorarium (\$50USD). Each partnering group distributed the announcements in ways they felt would reach their

Table 1 Participant demographic characteristics

| Variable | All participants (n = 37) | Visual impairment (n = 10) | Intellectual disability (n = 8) | Autism (n = 7) | Physical disability (n = 7) | Hearing impairment (n = 5) |
|---|------------------------------|-------------------------------|------------------------------------|-------------------|--------------------------------|-------------------------------|
| Age ^a | 36.7 (14.1) | 42.6 (13.9) | 23.8 (2.8) | 32.6 (12.4) | 42.1 (11.8) | 44.4 (14.1) |
| Sex ^b | | | | | | |
| Male | 14 (37.8%) | 3 (30.0%) | 3 (37.5%) | 3 (42.9%) | 2 (28.6%) | 3 (60.0%) |
| Female | 23 (62.2%) | 7 (70.0%) | 5 (62.5%) | 4 (57.1%) | 5 (71.4%) | 2 (40.0%) |
| Race/ethnicity ^b | | | | | | |
| European American | 31 (83.7%) | 8 (80.0%) | 7 (87.5%) | 6 (85.7%) | 6 (85.7%) | 4 (80.0%) |
| African American | 5 (13.5%) | 2 (20.0%) | 1 (12.5%) | 1 (14.3%) | 0 (0%) | 1 (20.0%) |
| Other | 1 (2.7%) | 0 (0%) | 0 (0%) | 0 (0%) | 1 (14.3%) | 0 (0%) |
| Highest level of education ^b | | | | | | |
| High school or less | 3 (8.1%) | 0 (0.0%) | 2 (25.0%) | 1 (14.3%) | 0 (0%) | 0 (0%) |
| Some college | 12 (32.4%) | 1 (10.0%) | 6 (75.0%) | 2 (28.6%) | 1 (14.3%) | 2 (40.0%) |
| Four-year college degree | 10 (27.0%) | 4 (40.0%) | 0 (0%) | 3 (42.9%) | 1 (14.3%) | 2 (40.0%) |
| Graduate degree | 12 (32.4%) | 5 (50.0%) | 0 (0%) | 1 (14.3%) | 5 (71.4%) | 1 (20.0%) |
| Congregation size ^b | | | | | | |
| Less than 100 people | 5 (13.5%) | 2 (20.0%) | 1 (12.5%) | 0 (0%) | 1 (14.3%) | 2 (40.0%) |
| 100 to 299 people | 9 (24.3%) | 4 (40.0%) | 0 (0%) | 4 (57.1%) | 0 (0%) | 0 (0%) |
| 300 to 499 people | 5 (13.5%) | 1 (10.0%) | 2 (2.05%) | 0 (0%) | 2 (28.6%) | 0 (0%) |
| 500 to 999 people | 6 (16.2%) | 0 (0%) | 2 (25.0%) | 1 (14.3%) | 3 (42.9%) | 0 (0%) |
| More than 999 people | 9 (24.3%) | 3 (30.0%) | 0 (0%) | 2 (28.6%) | 1 (14.3%) | 3 (60.0%) |
| I don't know | 3 (8.1%) | 0 (0%) | 3 (37.5%) | 0 (0%) | 0 (0%) | 0 (0%) |
| Church membership-length ^a | 9.0 (10.3) | 6.5 (6.6) | 9.4 (7.7) | 10.6 (10.5) | 13.6 (16.1) | 5.0 (5.3) |
| Church attendance ^b | | | | | | |
| Several times weekly | 5 (13.5%) | 1 (10.0%) | 3 (37.5%) | 1 (14.3%) | 0 (0%) | 0 (0%) |
| Weekly | 23 (62.1%) | 5 (50.0%) | 3 (37.5%) | 6 (85.7%) | 5 (71.4%) | 4 (80.0%) |
| Several times a month | 3 (8.1%) | 2 (20.0%) | 0 (0%) | 0 (0%) | 0 (0%) | 1 (20.0%) |

Table 1 (continued)

| Variable | All participants (<i>n</i> = 37) | Visual impairment (<i>n</i> = 10) | Intellectual disability (<i>n</i> = 8) | Autism (<i>n</i> = 7) | Physical disability (<i>n</i> = 7) | Hearing impairment (<i>n</i> = 5) |
|----------------------|--------------------------------------|---------------------------------------|--|---------------------------|--|---------------------------------------|
| Once a month | 1 (2.7%) | 0 (0%) | 1 (12.5%) | 0 (0%) | 0 (0%) | 0 (0%) |
| Several times a year | 3 (8.1%) | 2 (20.0%) | 0 (0%) | 0 (0%) | 1 (14.3%) | 0 (0%) |
| Once or twice a year | 2 (5.4%) | 0 (0%) | 1 (12.5%) | 0 (0%) | 1 (14.3%) | 0 (0%) |

^a*M* (*SD*) ^b*n* (%)

stakeholders, while still preserving the privacy of their lists. Interested persons were directed to a website where they completed a short screening survey to confirm their eligibility. A member of the research team then reached out to provide additional information, answer questions, and schedule the interview. All participants provided informed consent.

Data Collection

We conducted individual, semi-structured interviews with each participant (protocol available by request). Interviews lasted an average of 50 min (range, 20–80 min). Upon completion of the interview, the interviewer completed a reflection by noting any significant aspects of the interview. All interviews were audio recorded.

Because the overarching project explored the participation of individuals with disabilities in worship and their experiences of accessibility within the church, the interview questions addressed the church they attended, the nature of their involvement, their experiences in worship, their views regarding accessibility, and their own experiences of belonging. In addition, questions addressed their primary recommendations for churches (e.g., *What ideas or advice do you have for how church leaders could design worship in more accessible ways? How should they invite input and feedback from individuals within (or beyond) their church on how to do this well? What advice do you have for other individuals with disabilities on advocating effectively within their church? What do you feel is most important for worship leaders to know about including people with disabilities fully and meaningfully in the church?*)? However, recommendations for increasing accessibility were peppered throughout most of the interviews. We used follow-up questions and probes for clarification, elaboration, and to obtain more detail.

Each interview was facilitated by a member of our project team, which included one faculty member and four graduate students whose work addressed disability from different disciplines (i.e., religion, special education, physical therapy, audiology). We conducted in-person interviews in locations determined by each of the participants (e.g., home, church, coffee shops); one interview took place over Zoom. In three interviews (i.e., two participants with intellectual disability and one with visual impairments), one or more parents also attended the interview at the participant's request. However, all questions were directed to the individual with disabilities as parents occasionally provided input or clarification. One participant with complex communication needs submitted written responses.

Data Analysis

We adopted a team-based approach to analysis that involved four project staff: a faculty member and graduate student who conducted the interviews, as well as an undergraduate and graduate student who only contributed to coding. We used thematic analysis (Patton, 2015) to identify a core set of shared recommendations for how churches could work toward greater accessibility. Our analysis relied on the constant comparison method, in which coders frequently compared

code applications within and across transcripts to ensure consistent coding, generate new codes, or revise definitions of codes (Strauss & Corbin, 2008). All interviews were transcribed using a professional transcription service. Transcripts were checked, de-identified, and imported into Dedoose, a program used to code transcripts and generate tables for analyses. The entire team coded the first four transcripts and met three times to discuss coded passages relevant to our research question. The remaining 33 transcripts were coded in pairs. Coding partners rotated after coding between 2–4 transcripts.

During the first stage of analysis, team members identified passages within transcripts that addressed the research question and assigned open codes to passages. Codes were applied to passages within the transcripts that ranged from short phrases to several paragraphs. Open codes were short quotes or phrases that summarized suggestions offered by participants. Second, we used the open codes to identify themes and develop a coding framework. Team members met to revise and reach a consensus on an initial coding framework. Open codes were merged into revised axial codes. The members examined all the axial code applications to ensure consistent application of the coding framework. A team discussion was held to reach consensus on code applications and revise definitions of codes. Finally, we applied the axial codes to the remaining transcripts. After the transcripts were coded, a final team discussion was held to reach a consensus on code applications and finalize revisions to the axial codes.

We took several steps to address the trustworthiness of our findings. First, we used purposeful sampling to ensure each participant had experiences and insights related to accessibility within the church. At the same time, we involved participants with a range of disabilities, demographics, denominational backgrounds, and church sizes to enhance the transferability of our results. Second, we adopted a team-based, collaborative approach to attenuate any individual biases by using a consensus approach to bring multiple perspectives to each step of our analyses. Third, we kept a detailed audit trail for all interviews (dates, times, locations, attendees) and data analyses (processes, codebook iterations, consensus meetings).

Findings

Nine primary themes emerged from the experiences and recommendations of the 37 participants with disabilities: advocating, reflecting, asking, researching, equipping, embracing, proacting, including, and praying (see Fig. 1). Table 2 displays the extent to which each theme was raised across these interviews (i.e., percentage of participants addressing each recommendation). In the following sections, we discuss each area of action and present quotes illustrating the reasons for each recommendation and suggested responses. For each participant quote, we indicate the age and primary disability (i.e., A, H, I, P, V; see Table 2) of the participant in parentheses.

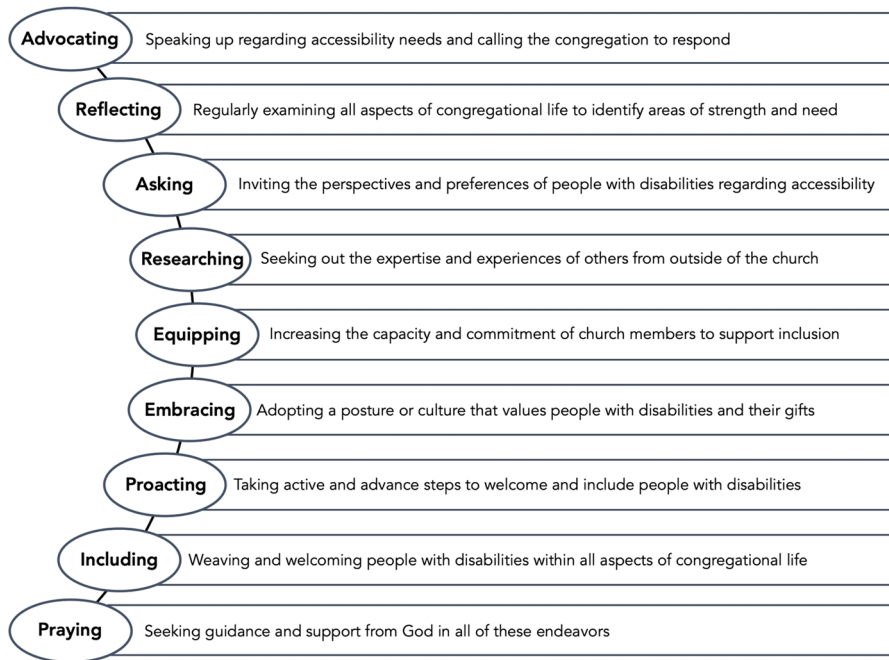


Fig. 1 Key recommendations for advancing accessibility within churches

Table 2 Percentage of participants offering each recommendation for increasing the accessibility of worship

| Recommendation | All participants (%) (n = 37) | Visual impairment (%) (V; n = 10) | Intellectual disability (%) (I; n = 8) | Autism (%) (A; n = 7) | Physical disability (%) (P; n = 7) | Hearing impairment (%) (H; n = 5) |
|----------------|----------------------------------|--------------------------------------|---|--------------------------|---------------------------------------|--------------------------------------|
| Advocating | 89.2 | 90.0 | 50.0 | 100.0 | 100.0 | 100.0 |
| Reflecting | 48.6 | 60.0 | 0.0 | 85.7 | 57.1 | 40.0 |
| Asking | 64.9 | 80.0 | 12.5 | 85.7 | 71.4 | 60.0 |
| Researching | 24.3 | 50.0 | 0.0 | 14.3 | 14.3 | 20.0 |
| Equipping | 24.3 | 40.0 | 0.0 | 0.0 | 14.3 | 60.0 |
| Embracing | 48.6 | 40.0 | 12.5 | 71.4 | 71.4 | 40.0 |
| Proacting | 27.0 | 50.0 | 0.0 | 14.3 | 42.9 | 20.0 |
| Including | 29.7 | 20.0 | 50.0 | 42.9 | 0.0 | 40.0 |
| Praying | 16.2 | 0.0 | 25.0 | 28.6 | 0.0 | 20.0 |

Advocating

Participants spoke frequently and fervently about the role that people with disabilities could and should play in advocating for greater accessibility within their church. They encouraged other individuals with disabilities to “state what your needs are”

(Ayana, 40V), “make sure that people know” (Charles, 65H), “bring it to their fore-front” (Jada, 48V), or “talk to someone” (Julia, 21I). Several participants acknowledged that self-advocacy could be difficult (“It’s kind of a hard thing for me to speak up in church.” Aaron, 45V) and some expressed a certain reluctance (“I’m hesitant to ask for more.” Kelsey, 23V; “I don’t really like advocating for myself.” Ashley, 33P). Yet, they challenged others to be courageous (“Don’t be afraid to speak up.” Paige, 30I; “Be more bold than I have been!” Elise, 65V). In the absence of advocacy, churches leaders would remain unaware of prevailing needs and other potential actions. To counter any apathy or inaction in this area, Amy (34V) made a simple proposal:

Speak up. And make your needs known. Because if you don’t, they’re not going to get met. And as it says in the Word—seek and you shall find, knock and the door will be opened unto you. So I believe that’s very applicable for church attending [people] with disabilities.

When discussing the role that individuals with disabilities played in advancing accessibility within their churches, many emphasized that speaking up was both a necessity and a responsibility. As Andrew (26A) explained, “it’s my responsibility to make something happen.” Jada (48V) explained that advocacy is needed to break longstanding oversight or indifference, “You have to bring it to people’s attention who may not realize, ‘Oh, I didn’t know that was an issue. I’m so sorry. Let me work on that.’” Nicole (33P) felt that congregants were generally willing to step up and help once they know there is a need: “People are more willing to help than you realize. You just have to actually stand up and say something.” Likewise, Brittany (30P) captured the importance of advocacy as a means of driving change within a church:

Worship isn’t accessible unless someone does something. So it’s got to start with someone. So don’t be afraid to have those conversations. Reach out to those people within leadership that are the people that make decisions and stuff.

Many participants acknowledged that advocacy can be difficult. As Ashley (33P) explained, “I think a lot of it is just me having to bring it to someone’s attention, which isn’t always fun.” Several participants described their own hesitancy in self-advocacy (“I feel like advocating for myself is something I’m still stepping into,” Andrew, 26A; “Part of that is up to us too to make our needs known. Sometimes, I’m good about that and sometimes I’m not.” Elise, 65V). Indeed, Aaron (45V) described the tension he feels around advocating for himself at church, “You know this is a place where I don’t really want to fight for access because it’s kind of my safe zone.”

Despite these challenges, participants offered advice to encourage individuals with disabilities in advocating. A call to not be afraid to speak up emerged from several participants, including Ayana (40V) who advised, “Don’t be afraid to speak up and state what your needs are, and be clear in what you desire to happen.” Some participants mentioned that advocating for the sake of others often felt easier than advocating for themselves. Ashley (33P) suggested:

Don't look at it as self-advocacy. Look at it as advocacy for the Body. Because, I don't know, I'm not very big into self-advocacy because I think that Christ asked us to put ourselves last. But he does call us to advocate for one another.

Elise (65V) offered a similar viewpoint:

Sometimes I'm like, "Well, I wouldn't expect them to do this and that and the other for one person." But I might not be just one person. Might be a lot more people than me. So, I think a lot of it's on our end to let things be known.

On the whole, participants emphasized that the voices of individuals with disabilities are a critical way that churches become aware of needs and then take steps to make changes. Paige (30I) provided a final piece of encouragement regarding advocacy, "Don't be afraid to speak up for yourself. Use your story—it's power. God gave you a voice, so use it!"

Reflecting

Many participants ($n = 18$) emphasized the necessity of regular reflection focused on all aspects of a church's accessibility. In the absence of intentional and ongoing consideration, churches may be prone to overlook existing barriers to participation or miss opportunities to expand access even further. Several participants suggested overarching questions that might frame this collective process reflection: "What can we do better?" (Olivia, 25A) or "How does the church best address the needs of people with whatever disability?" (Sierra, 35A). For example, Emma (21A) elaborated on how her own church might undertake this task:

I think it looks like having an open conversation with your church about who's welcome here. And— if they're welcome here—how do we make sure they know that so that they can show up?

Although some participants certainly encouraged individual reflection, they most often framed this process as a corporate endeavor spearheaded by a named team ("I think that's important—to have sort of a core of people at a church, almost like a little committee." Aaron, 45V) or undertaken as an entire congregation ("We need to have a bigger discussion about just disabilities in general in church, and how the church can be more welcoming." Sierra, 35A). Whatever the approach, the emphasis was on foregrounding consideration of accessibility by ensuring it is part of ongoing discussions within the church.

Multiple participants stressed the value of establishing a core group—described variously as a "advisory committee" or "accessibility team"—that is charged with thinking deeply about issues impacting local accessibility and identifying remedies or responses. This group would attend both to whether individual church members could participate in desired ways ("A small committee that can make sure Johnny is being able to access all this." Aaron, 45V) and whether the access of anyone experiencing disability is being hindered ("We have set up a special group of leaders specifically for [those with] special needs." Charles,

65H). Such a named group would also represent an identifiable venue though which other congregants could “bring attention to any issues,” offer “recommendations,” and suggest ways to “meet the needs of certain people.” As Andrew (26A) noted, it would also ensure, “More than one person can be speaking up for people [with disabilities] to have more opportunity.” Participants felt strongly that this group should have some formal standing or recognition within the organizational structure of the church. When asked how this would work, Ruth (55P) explained:

I don’t think saying informally, “Oh, come to me and let me know if you have any suggestions”—I don’t think that would be very effective. I think forming an advisory committee on disability that would be a part of the church’s regular structure.

When churches have a designated group that is intentional about identifying and addressing barriers to worship, the prospect of churchwide change may be all the more likely.

Other participants encouraged churchwide reflection—whether as a first step or an adjunct to the work of a more formal group. This ongoing process of “open” and “continued conversation” about accessibility might broadly shape the attitudes and postures a church holds related to disability (“When we say things like, ‘I want the church to be more accessible.’ What does that mean?” Liz, 34P). Or it could focus on resolving barriers encountered by current members (“How can we make sure to get [our members with disabilities] involved?” “How can we best plug her into our church?” Aaron, 45V; “Evelyn can’t get to her class. What are we going to do about this? How are we going to fix it?” Ashley, 33P). Some suggested using “focus groups,” “roundtable discussions with stakeholders,” or “surveys” as avenues for soliciting this input. Regardless, these conversations need to engage the entire congregation, including members with *and* without disabilities. As Nicole (33P) explained:

I really think it has to be a two-sided conversation—the people [who have] disabilities and the parishioners who don’t. Because if you change everything just to be perfect for people who have a disability of some kind, then, eventually, for someone who doesn’t have a disability, it’s going to make it harder to function, too. It’s got to be a joint conversation, because then the parishioners without disabilities can understand where the other parishioners are coming from.

Cora (59A) added, “I think they need to really look at this as another social justice issue and have conversations... and encourage people to tell stories. And make sure that that is a safe space.” All of the calls for intentional reflection recognized that every church will have unique opportunities and needs in this area of accessibility. Thus, as Sierra (35P) noted, the required response is also “going to be different for each church.”

Participants also raised the need for pastors to initiate or lead this reflection with their congregation. Emma (21A) described what she hoped this would look like:

That totally starts with standing on stage in the pulpit, whatever the front of your church looks like, and from a place of authority saying, “I don’t know everything. And you as congregants have valuable perspective on what this church experience is like. And I’m going to make office hours, or coffee hours, or where I am hanging out here—and I want you to come talk to me.”... I think that’s just intentional humility and welcoming input on the part of the pastor, and then making a time and space for it.

However, not everyone was optimistic that churches would readily undertake this sort of reflection. Participants also expressed concerns that a church’s attitudes or postures may inhibit their willingness to reflect (“I think some churches seem so rigid that they wouldn’t be open to that conversation of that.” Anna, 41V; “I don’t think that the powers that be see a need to have these conversations on a larger level yet.” Cora, 59A). Emma (21A) expressed the way she anticipated her church might respond:

I think if I went to them and said, “There are things you could do to make this environment more accessible to people like me,” it would be tougher to get through. Partially because getting *anything* changed in such a big church is a big thing. [But] also, because I think they see themselves as doing a lot already and don’t see the need.

As Liz (34P) noted, “I would like to be more secure in the knowledge that people are thinking about these kinds of things besides me.”

Asking

Many participants ($n = 24$) emphasized the importance of seeking out the perspectives and preferences of people with disabilities regarding accessibility within the church. Participants characterized asking as a direct (“they could ask me,” Evelyn, 50H) and ongoing inquiry (“always trying to get feedback,” Rachel, 39H). As Jacob (38V) illustrated, accessibility requires individualization: “Every disability has a different set of circumstances, set of problems, and set of complaints. There again, it’s not a one size fits all thing.” The act of asking allows worship leaders to solicit a wide range of needs among individuals with disabilities and possible ways to address those needs. As Ayana (40V) put it:

Just don’t be afraid to reach out and get their input, because they know how to better—the best way to serve them, and the best way to accommodate them—better than anyone, so just ask the question, “How can we do this better?” And listen.

Moreover, participants emphasized the importance of eliciting a multitude of perspectives. As Emma (21A) emphasized, “the critical thing to understand is that [my suggestion] is one perspective, and churches just need to be willing to have the conversations with each individual about what they need.”

The initiative of church leaders to reach out about participants’ needs was sometimes described as lacking (“no one’s ever approached me and I’m not really

sure how to have that conversation.” Liz, 34P). When churches did not take the initiative to ask for input from congregant members with disabilities, participants described feeling “not heard,” “sad,” “shunned,” “like their needs are not being met,” and “disenfranchised.” Participants identified assumptions of congregations as a barrier to conversations about their needs (“They have expectations of what they think the obstacles are.” Cora, 59A; “They don’t know what they don’t know and they can’t just guess at things.” Nicole, 33P).

Participants suggested multiple ways a church could approach individuals with disabilities to elicit their perspectives about accessibility. Strategies for eliciting perspectives included “surveys,” “email,” “dialogue,” and intentional “small groups” to discuss accessibility. Participants also emphasized the importance of making electronic forms of feedback accessible. When discussing church leaders’ approach to asking, participants emphasized the value of postures such as being “open to conversations,” being “caring,” being “patient,” having “humility,” and having persistence. Moreover, relationships play an important role in driving conversation about accessibility needs. For example, Kelsey (23V) illustrated the importance of relationships in these conversations:

And so I feel like having a good relationship where you feel comfortable with sharing [your needs]. So then if that’s already kind of established, then if something does come up and there’s a problem, instead of feeling like you have to leave, then you can talk about it and be like, “How can we brainstorm this?”

Researching

The need to seek out the expertise or experiences of agencies and churches to improve accessibility was raised by nine participants. As Ewan (46H) emphasized, “If you want to start anything or provide anything [for people with disabilities], do the research!” A multitude of ways for conducting research were offered by participants, including: holding a “focus group,” having “round-table discussion(s),” consulting through “community outreach,” reaching out on “social media,” contacting “disability organizations,” seeking out “training,” “asking other churches,” “taking a class to learn about disabilities,” and “asking people with disabilities” about their experiences. Paige (30I) suggested that doing this research helps churches “diversify what they already know about people with disabilities” and “broaden their knowledge.” Ewan (46H) posited that one of the reasons churches lack accessibility is due to the “fear of the unknown.” But, as Emma (21A) pointed out, “the whole point of the Bible is that we’re not perfect.” She encouraged church leaders not to be fearful in their pursuit of a more accessible church:

If you’re constantly trying to do the right thing, consulting the people who have the knowledge you don’t, praying over your efforts that they would be successful and would welcome people—then over time you will be able to get there.

Participants also suggested that an important feature of researching is seeking out multiple perspectives (“If they don’t give you enough feedback, try somebody else that has a disability.” Ewan, 46H).

Equipping

Nine participants recommended churches pursue training or consultation as a way of equipping the congregation with the capacity and commitment to pursue inclusion. They suggested that churches develop “classes,” “programs,” “ministry teams,” and direct lines of “communication” to educate congregation leaders and members. Elise (65V) felt her congregation needed to develop a better understanding of people with disabilities, “I guess the most important thing is to get to know people, and that’s not always easy... education is part of that.” Brittany (30P) pointed out that church leaders must become aware of the needs of congregation members with disabilities:

For them to be aware of those disabilities... Just being aware of those things and reaching out and asking, "Hey, what do we need to do?" ... it would be nice for leaders to already have some education.

Participants also suggested that churches should find ways to educate the broader congregation. This would help ensure there were “people around the church that are trained to be sensitive to issues that come up” (Elise, 65V). Some, like Amy (34V), even suggested that members with disabilities might benefit from occasional training, “Maybe we need to have a ministry team that goes and shows them [how to use technology]”).

Embracing

Participants ($n = 18$) discussed the need for churches to embrace people with disabilities—to adopt a posture or culture that values people with disabilities and their full participation. Embracing was characterized as being “welcoming,” “more accepting,” “open-minded,” and less “judgmental” to the ideas, abilities, and change that people with disabilities bring to the congregation. Olivia (25A) challenged churches to “really live into the ‘all means all’ philosophy. Don’t be afraid to challenge the status quo, and also make it a more equitable environment, where people want to come.” The act of embracing people with disabilities should come out of the inherent equality of individuals with disabilities as people. As Ruth (55P) explained, “People with disabilities are regular people. They should not be singled out in ways that stigmatize, but should be accepted and included in worship in the regular course of things.” Paige (30I) discussed what it means to disregard assumptions about and embrace people with disabilities:

There again, it’s all about having an open mind. I think today we live in a society where we are so defined by what our labels are, and I think that it needs

to be shifted. We are ready for a shift in our society, in general, just on how people with disabilities are viewed. Whether it's from an aspect of worship—whether it's personally, professionally, spiritually—just meeting them where they are and getting to know them as a person first, before they judge their disability, I think is key.

Many participants encouraged church leaders to lead their congregations to embrace people with disabilities by “being sensitive to... people’s needs,” “starting a conversation,” “intentional humility and welcoming input,” and “creat[ing] a safe space.” Ashley (33P) spoke to the importance of church leaders’ humility: “What I’m thankful for our leaders is, realizing what they don’t know and not being afraid to pretend like they do.”

Proacting

Ten participants also called on church leadership to take active and anticipatory steps toward welcoming and including people with disabilities before they ever arrive. The term “proacting,” which suggests committing to both forethought and advance preparation, contrasts with efforts that were often characterized as “reacting.” Participants indicated that churches with a proactive approach to accessibility should “reach out” and “invite” discussions of accessibility, be “prepared ahead of time” to meet accessibility needs as they arise, and have “plans of action” for addressing potential accessibility issues. Proacting goes beyond adopting a posture of welcoming and openness to including people with disabilities. Instead, churches should take the initiative to seek out and meet the needs of people with disabilities in their congregation, as well as invite and anticipate the needs of people with disabilities outside their congregation. The value of proacting and the consequences of reacting was illustrated by Anna (41V):

And even though I can understand a reactive mode like, ‘Oh, here’s somebody hard of hearing. How can we incorporate them better?’ You’ve got to think about how many people just aren’t even going, because they know it’s not going to be accessible.

Participants described three primary ways in which churches can be proactive: inviting people with disabilities, preparing accommodations in advance, and developing a plan of action. However, participants described different strategies and implication of each means of proacting. First, the ability to be proactive is predicated on the knowledge and awareness of needs. As Hugh (62P) stated, “[Accessibility] depends on the pastors that are there that notice... we need to make more ways for them to invite other disabled people to come.” Thus, there was close connection between *proacting*, *asking*, and *researching*.

Second, participants also discussed preparing materials in ways that all church members can access them. A reoccurring example involved posting sermons online to allow flexible access of materials. Participants also mentioned having “braille scriptures,” “having the best technology options,” “ramps,” and “wheel chairs” available to meet needs as they arise. Moreover, they emphasized publicizing the

availability of these accommodations. Emma (21A) suggested advertising accommodations “in the sermon.” Anna (41V) indicated that “people are going to hear about” raising awareness of accommodations and then “they’re going to start wanting to attend.” Third, participants described making “plans of action” and thinking about ways to address accessibility in various aspects of worship in advance of services. Participants said that these anticipatory actions could help prevent situations that lead to isolation or insult.

Including

Eleven participants discussed the importance of actively inviting and weaving people with disabilities in all aspects of the church. Including ensuring that congregants feel “welcomed” and “comfortable,” helping them to be “involved,” “plug[ged] in,” and supporting them to “participate more fully” in their church. Some participants spoke generally about the need to include people with disabilities more fully in the church. Sierra (35A) said, “our church leadership should be also looking out at their congregants to see how can we best plug [them] into our church?” Andrew (26A) explained:

Including everyone is everything! It’s important. I would 100% highly recommend people doing that, for everyone, disability or no disability, but especially people with intellectual disabilities. They need to be included in everything, to be a part of the journey of the whole ride. That’s really important!

Tyler (23I) described his own hopes for his experience in church: “What I want to do is to hang out with people...I want to make new friends.”

Some participants emphasized the importance of including people with disabilities within the whole congregation, rather than separating them into selected or segregated activities. Charles (65H) explained why he felt that including people with disabilities was important: “If you group them all together, someone doesn’t have equal access.” Ewan (46H) explained the value for people with and without disabilities in fully including people with disabilities in congregations:

As much as possible, allow the person who has a disability to be able to blend in with everybody else. Because most churches, businesses and things, they think that we need to keep all the people with disabilities in one section. They need to be way over here out of sight so they’re not a distraction. They need to understand that these individuals actually can add to the service. And it helps them to assimilate into the congregation when you meet people around you and stuff. Otherwise, they’re just meeting each other and it stays a little bubble. Pop that bubble and make it spread out.

Participants also discussed formal structures and supports for including people with disabilities throughout their churches. Aaron (45V) explained why it is beneficial to have a designated team whose focus is on supporting and including people with disabilities:

That's important to have sort of a core of people at a church, almost like a little committee or whatever, say, "Hey, you know we've got these people with disabilities. How can we make sure to get them involved?" And that way the burden is not totally on the person to try and intrude on people."

Emma (21A) suggested a "church mentorship program" to pair newer and older members of the church together. She explained, "That would be a social support for people with any type of social or communication disability. And would just be a good thing for people meeting and talking." Jada (48V) emphasized the value in including people with disabilities in leadership roles within the church, "In *every* church, they should have folks with various disabilities lead because I think it gives them a whole new perspective on the humanity of who we are."

Praying

Prayer was highlighted by six participants as the foundation for spurring and guiding change within the church. Participants addressed the role of prayer three different ways. First, they described how a commitment to prayer can guide a church's movements. As Emma (21A) explained:

Jesus is not like, 'Oh, man. I thought you we going to be perfect. I thought you were going to do this perfectly.' [The point of the Bible is] that if you're constantly trying to do the right thing, consulting the people who have the knowledge you don't, praying over your efforts that they would be successful and would welcome people, that over time you are able to get there.

Second, participants suggested praying as a way of supporting and encouraging individuals with disabilities in the church. As Malik (24I) shared, "Pray for [people who need access] and help them. [That] the Lord will bless them, whatever is going on." Multiple participants indicated that as their churches were working to increase access, they found comfort and strength when church leaders offered prayer on their behalf. Finally, participants noted the importance of prayer as they faced exclusion or isolation. For example, Ewan (46H) described how his personal reliance on prayer helped him when his accessibility needs were rejected by his church:

I would just say don't have the expectation that every church is going to be receptive. [You] just have to look and pray until you find a church that's open to the message.

Discussion

Scores of denominational statements and resolutions call upon faith communities to remove barriers to full participation and strive toward greater inclusion (Carter, 2007). Yet many church leaders remain uncertain or hesitant about the steps they should take to ensure that worship, education, fellowship, and outreach activities are accessible to everyone in their congregation (Ault et al., 2021; Stewart-Ginsburg

et al., 2020). Drawing upon their own lived experiences of inclusion and exclusion, 37 Christians with disabilities offered recommendations for critical actions churches should take. Their insights and advice have important implications for how church leaders might work to widen their welcome by pursuing greater accessibility.

First, the voices of people with disabilities should be prominent in all efforts to refine local congregational practices. All of the participants emphasized the importance of hearing directly from people with disabilities on this issue—explicitly in the actions of *advocating* and *asking*, and implicitly in the actions of *reflecting* and *researching*. In advocating, individuals could call new attention to those postures or practices of a congregation that inadvertently impeded the involvement of people with disabilities—both for themselves and others. Taking on such initiative can serve as a much-needed catalyst for addressing barriers that had otherwise gone overlooked. In asking, participants recommended churches be more proactive in seeking out the perspectives of their members with disabilities, both as a way of avoiding assumptions and valuing their experiences. Taken together, advocating and asking ensures the viewpoints and experiences of those impacted by disabilities are recognized and respected.

Second, churches should engage in intentional and ongoing reflection. The persistence of both subtle and substantial barriers of awareness, attitude, architecture, and access were raised throughout this interview project (Carter et al., 2022). Indeed, the presence of similar barriers have long been highlighted in the literature (Griffin et al., 2012; Hughes, 1995). The nature of these barriers, however, will look somewhat different from one congregation to the next. The action of *reflecting* was recommended as a way of identifying specific needs and opportunities that presently exist within a particular church. Determining the most relevant and pressing next steps was said to be best undertaken through a process of careful and corporate reflection.

Several avenues for approaching this reflection process have been suggested in the literature. For example, Carter and colleagues (2017) described a practical process for hosting “community conversations” in which a cross section of congregation and community members are invited to a series of small-group discussions focused on how a church can be more welcoming and supportive. Likewise, a variety of accessibility checklists are available to guide congregational teams in considering how salient aspects of their facilities and practices either inhibit or enhance the participation of people with disabilities (e.g., Disability Concerns, 2021; Penton, 2008). Hearing from a wide variety of people who see their church from a variety of vantage points can help ensure that existing barriers are not missed.

Third, church and ministry leaders may benefit from additional guidance on how to address the accessibility needs identified through the first four actions recommended by participants. Seeking out the expertise of others within and beyond the church was suggested as one effective way of *researching* meaningful responses. For example, most congregations are likely to have one or more members who work in the field of disability (e.g., educators, therapists, health care providers) or have personal experience through family or friends. Likewise, most communities have multiple disability organizations and advocacy groups (e.g., Center for Independent

Living, Arc, Autism society) that could be asked for guidance and resources related to increasing accessibility. Such groups often share a commitment to advancing community inclusion (Gaventa, 2018). Attention can then turn to *equipping* ministry leaders and congregation members with information and ideas that build their commitment and capacity to *including* people with disabilities in all aspects of the life of the church (Collins & Ault, 2010).

Fourth, prevailing attitudes within a church can directly impact accessibility. Indeed, several studies have found that awareness and acceptance of disability can be lacking within churches (Ault et al., 2013; Carter et al., 2016). The individuals we interviewed emphasized the necessity of adopting postures that value inclusion and affirm people with disabilities as indispensable members of the body. In terms of actions, this entailed both *embracing* people with disabilities who are already part of the congregation and actively anticipating the arrival and involvement of those who are not yet present (*proacting*). However, the avenues through which these mindsets could best be cultivated received less specificity in the interviews. It may be that such postures can be shaped in part through sermons, targeted trainings, awareness activities, and inclusive programming (Carter, 2007; Gaventa, 2016; Stewart-Ginsburg, 2021).

Study Limitations and Research Recommendations

Several limitations to this study suggest areas for future research. First, disability is experienced in widely varied ways. Although we intentionally involved individuals with a range of disabilities, the recommendations of 37 participants from one state cannot fully reflect the experiences of the millions of Christians with disabilities involved in local churches around the country. The questions posed in this study should also be extended to individuals with additional disabilities (e.g., mental health conditions, acquired brain injury, neurological disorders) who are part of diverse worshipping communities (e.g., different denominations, cultures, and locales).

Second, we only spoke with participants who were still active in a local church, rather than those who had recently or long-ago left. The experiences and advice of individuals who no longer attend a faith community because of inaccessibility or inhospitality could generate additional insights into how churches should move forward. Future studies should expand recruitment to include individuals who are and are not active in a religious community.

Third, we did not involve any participants who lacked a reliable means of communication. Prior literature reviews have highlighted this gap and pointed to the need for creative ways to understand their experiences and solicit their perspectives (Hills et al., 2016). Fourth, families of children with disabilities can also be impacted by inaccessibility within their church (e.g., Ault et al., 2013; Jacober, 2010). Additional research is needed to examine the recommendations of parents and older siblings regarding the practices and postures that would support the presence and participation of entire families.

Conclusion

Although people with disabilities are incredibly diverse with regard to their strengths, needs, and backgrounds, they often share in common the experience of encountering barriers to access and acceptance within their local communities. Too often, this also includes their religious communities. As illustrated in this study, the experiences and recommendations of people with disabilities can be instrumental in helping congregations learn how to break these barriers and become more inclusive. Their call for more advocating, reflecting, asking, researching, equipping, embracing, proacting, including, and praying emerges from their experiences of both exclusion and embrace within the church. We hope their insights will be drawn upon by faith communities across the USA and around the world as they strive to become communities of full participation and belonging for those impacted by disability.

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References

- Annandale, N. H., & Carter, E. W. (2014). Disability and theological education: A North American study. *Theological Education*, 48(2), 83–102.
- Ault, M. J., Collins, B. C., & Carter, E. W. (2013). Congregational participation and supports for children and adults with disabilities: Parent perceptions. *Intellectual and Developmental Disabilities*, 51(12), 48–61. <https://doi.org/10.1352/1934-9556-51.01.048>
- Ault, M. J., Slocum, V., Collins, B. C., Leahy, M. M., & Miller, V. P. (2021). Perceptions of faith leaders on the inclusion and participation of individuals with disabilities in their communities. *Journal of Religion and Disability*. <https://doi.org/10.1080/23312521.2021.1932691>
- Barton, S. J. (2021). Re-membering methodology in theologies of disability. *Journal of Religion and Disability*. <https://doi.org/10.1080/23312521.2021.1988883>
- Brock, B. (2019). *Wondrously wounded: Theology, disability, and the body of Christ*. Baylor University Press.
- Carter, E. W. (2007). *Including people with disabilities in faith communities: A guide for service providers, families, and congregations*. Brookes.

- Carter, E. W. (in press). Research on disability and congregational inclusion: What we know and where we might go. *Journal of Religion and Disability*. <https://doi.org/10.1080/23312521.2022.2035297>
- Carter, E. W., & Boehm, T. L. (2019). Religious and spiritual expressions of youth with intellectual and developmental disabilities. *Research and Practice for Persons with Severe Disabilities*, 44(1), 37–52. <https://doi.org/10.1177/1540796919828082>
- Carter, E. W., Boehm, T. L., Annandale, N. H., & Taylor, C. (2016). Supporting congregational inclusion for children and youth with disabilities and their families. *Exceptional Children*, 82(3), 372–389. <https://doi.org/10.1177/0014402915598773>
- Carter, E. W., Bumble, J. L., Griffin, B., & Curcio, M. P. (2017). Community conversations on faith and disability: Identifying new practices, postures, and partners for congregations. *Pastoral Psychology*, 66(5), 575–594. <https://doi.org/10.1007/s11089-017-0770-4>
- Carter, E. W., Tuttle, M., Spann, E., Ling, C., & Jones, T. B. (2022). *Toward accessible worship: The experiences and insights of Christians with disabilities*. Manuscript submitted for publication.
- Collins, B. C., & Ault, M. J. (2010). Including persons with disabilities in the religious community: Program models implemented by two churches. *Journal of Religion, Disability, and Health*, 14(2), 113–131. <https://doi.org/10.1080/15228961003622195>
- Disability Concerns. (2021). *Everybody belongs, serving together: Inclusive church ministry with people with disabilities* (3rd ed.). Author.
- Gaventa, W. C. (2016). Preaching disability: The whole of Christ's body in word and practice. *Review & Expositor*, 113(2), 225–242. <https://doi.org/10.1177/0034637316641022>
- Gaventa, W. C. (2018). *Disability and spirituality: Recovering wholeness*. Baylor University Press.
- Griffin, M. M., Kane, L. W., Taylor, C., Francis, S. H., & Hodapp, R. M. (2010). Characteristics of inclusive faith communities: A preliminary survey of inclusive practices in the United States. *Journal of Applied Research in Intellectual Disabilities*, 25(4), 383–391. <https://doi.org/10.1111/j.1468-3148.2011.00675.x>
- Herzog, A. A. (2017). *The social contexts of disability ministry: A primer for pastors, seminarians, and lay leaders*. Wipf and Stock.
- Hills, K., Clapton, J., & Dorsett, P. (2016). Towards an understanding of spirituality in the context of nonverbal autism: A scoping review. *Journal of Religion and Disability*, 20(4), 265–290. <https://doi.org/10.1080/23312521.2016.1244501>
- Hobbs, R., Fogo, J., & Bonham, C. E. (2016). Individuals with disabilities: Critical factors that facilitate integration in Christian religious communities. *Journal of Rehabilitation*, 82(1), 36–46. <https://www.proquest.com/docview/1781170352>
- Hodge, D. R., & Reynolds, C. (2018). Spirituality among people with disabilities: A nationally representative study of spiritual and religious profiles. *Health & Social Work*, 44(2), 75–86. <https://doi.org/10.1093/hsw/hly035>
- Hubach, S. O. (2020). *Same lake, different boat: Coming alongside people touched by disability*. P&R Publishing.
- Hughes, D. K. (1995). The accessibility of faith communities and their places of worship. *Journal of Religion in Disability & Rehabilitation*, 2(3), 51–59. https://doi.org/10.1300/J445V02N03_05
- Jacober, A. E. (2010). Youth ministry, religious education, and adolescents with disabilities: Insights from parents and guardians. *Journal of Religion, Disability, and Health*, 14(2), 167–181. <https://doi.org/10.1080/15228961003622310>
- Liu, E. X., Carter, E. W., Boehm, T. L., Annandale, N., & Taylor, C. (2014). In their own words: The place of faith in the lives of young people with intellectual disability and autism. *Intellectual and Developmental Disabilities*, 52, 388–404. <https://doi.org/10.1352/1934-9556-52.5.388>
- Macaskill, G. (2019). *Autism and the church: Bible, theology, and community*. Baylor University Press.
- McMahon-Panther, G., & Bornman, J. (2021). The perceptions of persons with disabilities, primary caregivers and church leaders regarding barriers and facilitators to participation in a Methodist congregation. *Journal of Religion and Disability*. <https://doi.org/10.1080/23312521.2020.1859040>
- McNair, J., & Sanchez, M. (2008). Christian social constructions of disability: Church leaders. *Journal of Religion, Disability, & Health*, 11(4), 35–50. https://doi.org/10.1300/J095v11n04_04
- National Organization on Disability. (2010). *Kessler Foundation/NOD survey of Americans with disabilities*. Author.
- Patton, M. (2015). *Qualitative research and evaluation methods*. SAGE Publishing.

- Penton, J. (2008). *Widening the eye of the needle: Access to church buildings for people with disabilities* (3rd ed.). Church House.
- Plante, T. G., Vallaey, C. L., Sherman, A. C., & Wallston, K. A. (2002). The development of a brief version of the santa clara strength of religious faith questionnaire. *Pastoral Psychology, 50*(5), 359–368. <https://doi.org/10.1023/A:1014413720710>
- Stewart-Ginsburg, J. H. (2021). *Effects of asynchronous professional development for religious leaders on knowledge and confidence implementing inclusive language and learning*. [Dissertation]. University of North Carolina.
- Stewart-Ginsburg, J. H., Baughan, C. C., Smith, J., & Collins, B. C. (2020). Sanctuaries, “special needs”, and service: Religious leader perceptions on including children with disability. *Journal of Religion and Disability, 24*(4), 413–430. <https://doi.org/10.1080/23312521.2020.1776188>
- Strauss, A., & Corbin, J. (1990). *Basics of qualitative research*. SAGE Publishing.
- Taylor, D. M. (2018). *Americans with disabilities: 2014*. U.S. Census Bureau. Retrieved from <https://www.census.gov/library/publications/2018/demo/p70-152.html>
- Thompson, J. D., Delavega, E., Lockhard, C. W., Thompson, S. T., & Hirono, T. (2019). Children with autism and congregations: Leaders’ assessments of knowledge, programming, and potentialities. *Social Work & Christianity, 46*(4), 39–66. doi: <https://doi.org/10.34043/swc.v46i4.102>
- Whitehead, A. (2018). Religion and disability: Variation in religious service attendance rates for children with chronic health conditions. *Journal for the Scientific Study of Religion, 57*(2), 377–395. <https://doi.org/10.1111/jssr.12521>
- World Health Organization. (2021). *Disability and health*. Author. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/disability-and-health>

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