

Article

Listening to the Powerless: Experiences of People with Severe Intellectual Disabilities in an Evangelical Church

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Abstract: The experiences of people with severe intellectual disabilities (SID) in local churches are rarely studied, and their voices are not being heard in the research and religious communities. This study is an attempt to narrow the gap. Through a research method that combined person-centred care and action research, this study looks to explore the experiences of three persons with SID in a Hong Kong evangelical church, and give an account of the cultural and religious forces that have marginalized them. Findings show that it is not merely feasible but also necessary for church caregivers to listen to these powerless individuals if they want to be liberated from destructive stereotypical images of SID, broaden their basis of religious epistemology, and transform their spiritual care practices. However, the study reveals that there are some remaining barriers. It is found that the problematic evangelical style of spirituality has made Christians without disabilities misconceive individuals with SID as either inferior in the matter of faith or even incapable of coming to faith. Three corresponding types of pastoral responses that have kept persons with SID at the margins of the faith community are identified and discussed in this paper. The research results implies that evangelical Christian communities need nothing less than a critical examination of the logic of coming to faith if they want to remove such religious prejudice against persons with SID in future.

Keywords: action research; person-centred care; severe intellectual disabilities; evangelical spirituality

1. Introduction

The fact that they cannot speak for themselves without intensive support has made individuals with severe intellectual disabilities (SID) become one the most powerless groups in the population. The main issue that this paper addresses is that people with severe intellectual disabilities are not being heard in the research and religious communities. The purpose of this paper is twofold. Firstly, it shows a method that would make possible for researchers, family members, and church caregivers to better understand the religious experiences of people with severe intellectual disabilities. Secondly, it intends to provide an in-depth reflection on the cultural and religious forces that would marginalize this group in a Chinese evangelical church. The first two sections of this paper will focus on the first aim, while the second aim is to be addressed in the last two sections.

For individuals with SID, the status of their participation in local churches is sometimes ambiguous and problematic. It is only in the last two decades that Hong Kong Protestant churches have begun to pay attention to the problematic situation that the Christian message is largely inaccessible to people with learning disabilities. There are initiatives to integrate rehabilitative and social service with spiritual care in some faith-based organizations (Kwan 2009). However, lack of awareness and sensitivity to the spiritual needs of people with learning disabilities has been a major barrier to the promotion of this ministry amongst local churches (Kwan 2009). The efficacy of evangelistic works amongst people with learning disabilities is enshrined within issues such as whether the person

concerned is capable of belief and whether it is a waste of time and resources trying to get an abstract religious message across. The more severe the learning disability that a person has, the more uncertain his/her personal faith. The following quotation from a principal of a school for children with SID in Hong Kong is telling. Mr. Law notes how the common evangelical expectation of “believing in Jesus” creates hurdles for children with severe learning disabilities. He says,

Believing in Jesus involves a complicated self-reflective and cognitive process. Seekers of faith have to understand the meaning of sin [...] Next, they have to know that it is God who liberates them from the bondage of sin by the sacrifice of the Lord Jesus on the cross [...] Also, they need to affirm that they can be Christians simply and only by trusting God. For people with intellectual disabilities, particularly those with severe intellectual disability, this succinct summary of the meaning of the Gospel is still too complicated and abstract.

(Kwan 2009, p. 239)

The above view presupposes knowing God is understood as a cognitive and intellectual human activity and the acquisition of certain information is considered a prerequisite of personal salvation. Apparently, unresolved tensions are present in this kind of view. For instance, how can grace be free if one has to do something or have the ability to know certain things before receiving it? It also contradicts Jesus’ welcoming gesture to little children: “Let the little children come to me, and do not hinder them, for the kingdom of heaven belongs to such as these” (Matthew 19:14 New International Version).

2. Researching the Spiritual Experiences of People with Severe Learning Disabilities

Spiritual or religious experiences of individuals with severe intellectual disabilities in the context of local church has been a rare empirical research topic. An impetus of the development of this long neglected field was the growing interest in studying spirituality and/or religiosity, firstly within social and health services, then in persons with learning disabilities that were able to speak verbally (Gaventa 2006; Shogren and Rye 2005; Turner et al. 2004; Vogel and Reiter 2003; Minton and Dodder 2003; McIntire 2001; Webb-Mitchell 1993), and finally amongst non-verbal individuals with profound and severe disabilities. The research project presented below has combined and revised a number of innovative research methods that have emerged in the last two decades.

Since 2001, seminal studies that involved people with high communication needs and profound learning disabilities have been undertaken by John Swinton and his associates, who are affiliated to the University of Aberdeen’s Centre for Spirituality, Health and Disability (CSHAD). The first attempt was Swinton’s reflection on the experience of providing pastoral support to a man with profound learning disabilities in 2001 (Swinton 2001). A few years later, a study of spirituality among people with learning disabilities was undertaken by the CSHAD, which involved the participation of several individuals in the United Kingdom with profound and complex disabilities (Swinton 2004). To understand the spiritual life of these individuals with high communication needs, a mixed method approach consisting of direct observation, interviews, and a focus group was adopted. To facilitate their participation, both verbal and non-verbal modes of communication were adopted in data collection. An interpreter and moderator (someone who knew the participant well) was present during interviews (Swinton and Powrie 2004; Swinton 2004; Swinton and Mowat 2016a). The above two studies showed that the spirituality of people with profound learning disabilities was researchable if appropriate methods were in place. However, although these findings did have important implications for the practices of religious communities, religious practices were not the focus of these studies.

Together with families and social care workers of individuals with profound disabilities, a few church practitioners were involved in a study by the CSHAD in 2011 (Swinton et al. 2011a, 2011b; Swinton and Mowat 2016b). It was the first project to combine participatory action research, person centred planning, practical theology, and spiritual mapping in the study of the spiritual lives of people with profound disabilities (Swinton et al. 2011a; Swinton and Mowat 2016b). It involved seven subjects

with a range of difficulties in the area of verbal language mastery. In this research study, each disabled subject and his/her immediate circle of carers (including ministers, friends, care workers and families) worked collaboratively to devise a customized and personalized spiritual action plan, to implement each of them, and to evaluate their impacts. Swinton et al. (2011a) modified making action plans (MAPS), a person-centred planning (PCP) approach (O'Brien et al. 2010), to become a spiritual mapping that consisted of six steps.

The first step of a person-centred approach (PCA) to spiritual care was the identification of key personnel to form a circle-of-support around each subject with SID. The second step focused on working out a spiritual action plan by using the technique of MAPS. Ideas emerging from the MAPS meetings were channelled and used to formulate a spiritual action plan in the third step. Reflective facilitation as the fourth step was about the support provided by the researcher to individual participants of the circle of care. The fifth step was the gathering of participants of the circle-of-support to review the process and revisit some of the previous thoughts about the spirituality of the individual with profound learning disabilities. An enhanced spiritual action plan (step six) was formulated at the end of the review meeting, leading to the next cycle of action, reflection, and transformation (Swinton et al. 2011a; Swinton and Mowat 2016b).

Findings of the above innovative combined method of action research and spiritual mapping indicated how a personal relationship in a community setting was a crucial constituent in the spiritual experience of persons with complex disability (Swinton et al. 2011a; Swinton and Mowat 2016b). Without further detailing this research, it would suffice to say that the researchers arrived at the conclusion that the communal nature of spirituality refers not only to the dependence of this group on others in communicating their spiritual needs, but also that spirituality is a fundamental human desire for belonging. This is so for people with and without disability alike. In contrast to certain conventional understandings of spirituality as a purely personal matter that relates to cognitive belief, the findings of this study indicated that spirituality is “something that belongs to a community” and could be “without words” (Swinton et al. 2011a; Swinton and Mowat 2016b).

3. Methodology

The present study replicated the research method of the CSHAD's 2011 study to explore the religious experiences of three persons with SID in an evangelical church of Hong Kong from September 2011 to October 2012. To enhance the research cycling process and adapt to the context of the study church, two modifications were made. Firstly, instead of a single action research cycle design, three action cycles were involved in the research process in order to enable co-researchers and the co-subject to have an itinerary that involved visiting different phases of the action cycle. Secondly, two cross-cases reflective sessions for participants of the same faith community were organized to enable co-researchers to have further exchange and reflection of their common experience in the same organization (Shea 2014, pp. 44–45). The qualitative study was scrutinized and approved by the College Research Ethics and Governance Committee at the University of Aberdeen, Scotland.

3.1. Selection of the Research Site and Participants

The selection of the primary research site was careful and very deliberate. It is a tenet of the action research approach that “naturalistic settings are best studied and researched by those participants experiencing the problem” (McKernan 1991, p. 5). However, natural settings that fitted the concern of this study are few in Hong Kong. This is because persons with severe cognitive impairment are hardly visible in Protestant churches of Hong Kong. Even if some are present within a congregation, their spiritual lives may not be taken seriously by church practitioners. Hence, it is hard to find an ecclesial community that possesses first-hand experience of the topic. It is even harder to find one that is aware of the issue and concerned about it.

Therefore, representativeness of the sample did not determine the decision regarding case selection. Instead, this project followed the suggestion of Robert E. Stake, that in case selection where studying a particular phenomenon is theoretically possible but has a few accessible cases in real life:

My choice would be to take that case from which we feel we can learn the most. That may mean taking the one that we can spend the most time with. Potential for learning is different and sometimes superior criterion to representativeness. Often it is better to learn a lot from an atypical case than a little from a magnificently typical case. (Stake 1994, p. 243)

The study church was selected because it is a church in which church practitioners have rich experience with the research topic, share the immediate concern associated with it, see themselves as stakeholders in any attempt to tackle and solve the problem, and, most important of all, are looking for positive changes.

The study church is a natural setting from which we can learn the most through participatory enquiry. Firstly, it is the first local church in Hong Kong purposely built with wheelchair users in mind and with the core ministry dedicated to people with disabilities. By September 2011, two-thirds of those who attending the Sunday worship service were wheelchair users. The majority of them were residing in care homes. Every Sunday, the church provides and orchestrates a complex transport and escort service for care home residents in order to enable them to join the worship service. Christian education programmes are organized at care homes during weekdays. Secondly, despite its long-term commitment to the inclusive church vision, ministering to and with people with SID is beyond the comfort zone of church practitioners. They experienced difficulties in handling the baptismal request of two individuals with SID. This meant that the central concern of this project was also viewed by church practitioners as their key issue. It implied that their readiness to collaborate with the researcher in pursuing a deeper understanding of the situation was relatively higher. Participants from this church meet an important prerequisite if a participatory enquiry is to be of high quality, that is, evidence of readiness and willingness to change (Bradley and Reason 2006). Further discussion of the process of selecting the study church as well as its evangelical background and context can be found in the author's doctoral thesis (Shea 2014, pp. 58–65).

A total of 19 persons took part in the spiritual MAPS process, with different degree of involvement. They consisted of: (1) individuals with SID (3 persons), (2) their allies (10 persons) who formed the circles-of-support for each of them, and (3) their informants (6 persons).

Two men and one woman with known SID joined the MAPS. They had attended the study church's religious programs for periods ranging from 10 months to six years. At the time of the research, Martin (aged 39) was few years younger than Charles (aged 42). They do not speak but vocalize to draw people's attention. Both receive constant care service in different care homes. Martin likes to move around by wheelchair. Charles is mobile, cheerful, and outgoing. He is able to recognize people and places. He has a hearing impairment. Unlike Martin and Charles, Terry lives with her family in a private apartment. She was 52 years old at the time of the study. She is mobile, sociable and active. Though her speech is sometimes hard to follow, she is able to communicate in short and simple phrases. For Charles and Terry, their family caretakers are Christians and they had sought assistance from pastors of the study church to enable a baptism for their disabled family members. Terry joined the study church in early 2011 and was baptized in September 2011, while Charles' religious faith remained unknown during the research period. Although Martin's guardian is not Christian, she supported Martin to take part in the church religious program and the research study.

The second group of participants are allies. A total of 15 allies were identified for the three focus persons and 10 of them accepted to be their allies. They comprised Charles' mother (Teresa), Terry's sister (Mary), pastors of the study church (P1, P2, P3 and P4), a pastor of a collaborative church (P5), and lay members of the study church (L2, L3, and L4). The fundamental criterion for the selection of allies was to identify those whom the focus person could count on and call upon regarding his or her spiritual health. Allies were recruited mainly from within the study church as the prime focus is the

investigation of church practices, and from the family members of individuals with SID. The omission of care home staff members was a prudent adaptation to the context of social service organizations with a non-religious background, in which spiritual support was not considered to be a significant part of their care service.

The last type of participants is the informant. Informants are family members, church caregivers and care home staff members who are familiar with participants with SID but who are for some reason unavailable to become their allies. They facilitated the MAPS process by providing information about the history, stories, talents, dreams, and nightmares of the disabled participants. In addition to Martin's parent and a lay member of the study church (L1), two staff members from each care home (S3, S4, Y3 and Y4) were interviewed in September 2011 or February/March 2012.

3.2. Research Method and Process

Similar to the CSHAD's 2011 study, this study used action research (AR) approach (Coghlan and Brannick 2010) as the conceptual framework to integrate the spiritual mapping in the cycling process. The action research cycle was comprised of a pre-step (context and purpose) and four steps: constructing, planning action, taking action, and evaluating action, as shown in Figure 1, which is adapted from Coghlan and Brannick (2010, p. 8).

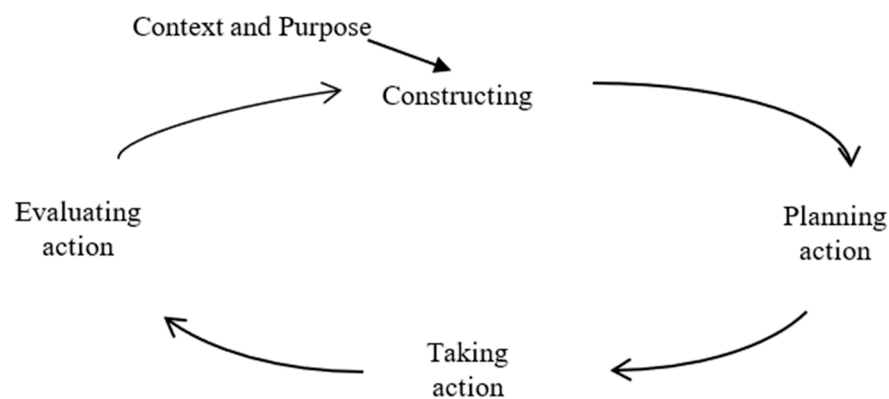


Figure 1. The action research cycle.

The pre-step is a framing of the context and purpose of the action research project. It sets the boundary of the project and identifies its objective and purpose. The first step of constructing is a collaborative effort amongst co-researchers, which aims to construct the meaning of the issues to be explored and changed in the subsequent action plan. It intends to work out a tentative practical and theological foundation of action. The second step involves the devising of action plans, which is followed by separated phases of implementation and evaluation.

The combined action research and spiritual mapping framework is presented in Figure 2. It consists of multiple action cycles operating concurrently throughout the period from September 2011 to October 2012. It can be divided into three phases; each consists of an AR cycle and some spiritual mapping steps.

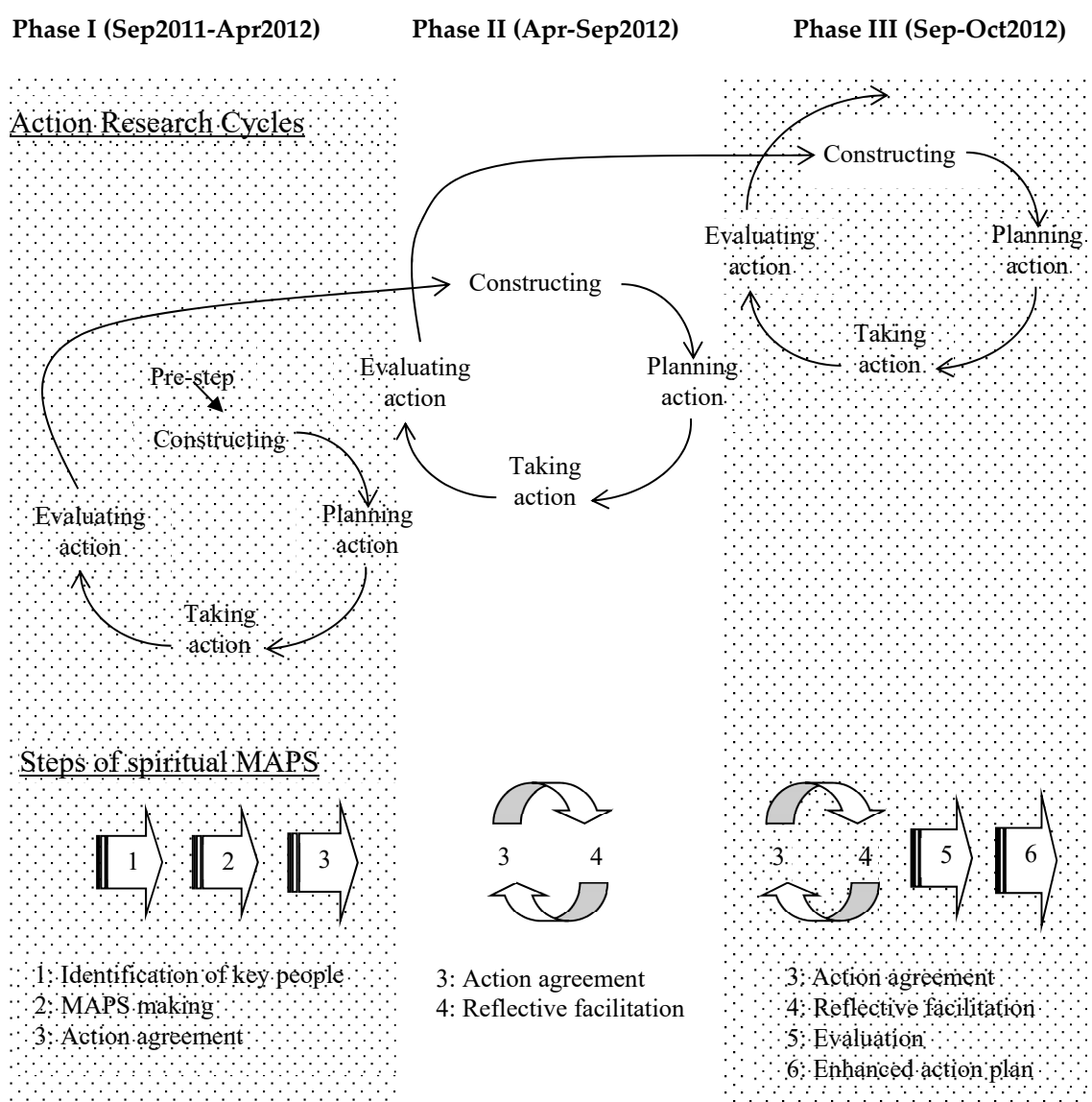


Figure 2. The combined action research and spiritual mapping framework.

In phase one (September 2011–April 2012), the first AR cycle set the stage for spiritual mapping by framing the purpose and context of the project. Targets in this phase included: constructing the issue collaboratively with the church practitioners; planning the spiritual mapping by identifying key persons; and taking collective action to formulate the spiritual mapping action plan. The first AR cycle reached completion with a collaborative evaluation, which was done among church participants with the purpose of understanding how this planning action had affected the co-researchers' understanding of the issues relating to their spiritual care practices.

Two church participants meetings were held in February and April. Each meeting lasted for 1.5 to 2 h. In the first meeting, participants discussed the difficulties, problems and issues they encountered when providing spiritual care for people with SID in church programmes. Objectives of the study and the process of spiritual MAPS were introduced and discussed. Two months later, the second meeting was held. Participants were invited to comment on the spiritual action plans of three support teams. Minutes of each meeting were sent and endorsed by participants a week after the meeting.

During the course of March/April 2012 a total of six MAPS making meeting sessions were held to devise spiritual profile and care plans for the three focus persons. Each session lasted for about two hours. The framework of MAPS developed by O'Brien et al. (2010) was adapted to the purpose

of providing spiritual care in the context of a local church. In the first session, allies contributed data on the history, dreams nightmares, and gifts/talents of the focus person. Views collected from informants were reported by the researcher. In the second session the meaning of the spiritual life and the conditions necessary to facilitate the spirituality of the focus person were discussed before devising an action agreement. A graphic facilitator was present in each meeting. Figure 3 presents the major components of the MAPS. After the meeting, a summary was given to participants for checking and comments.

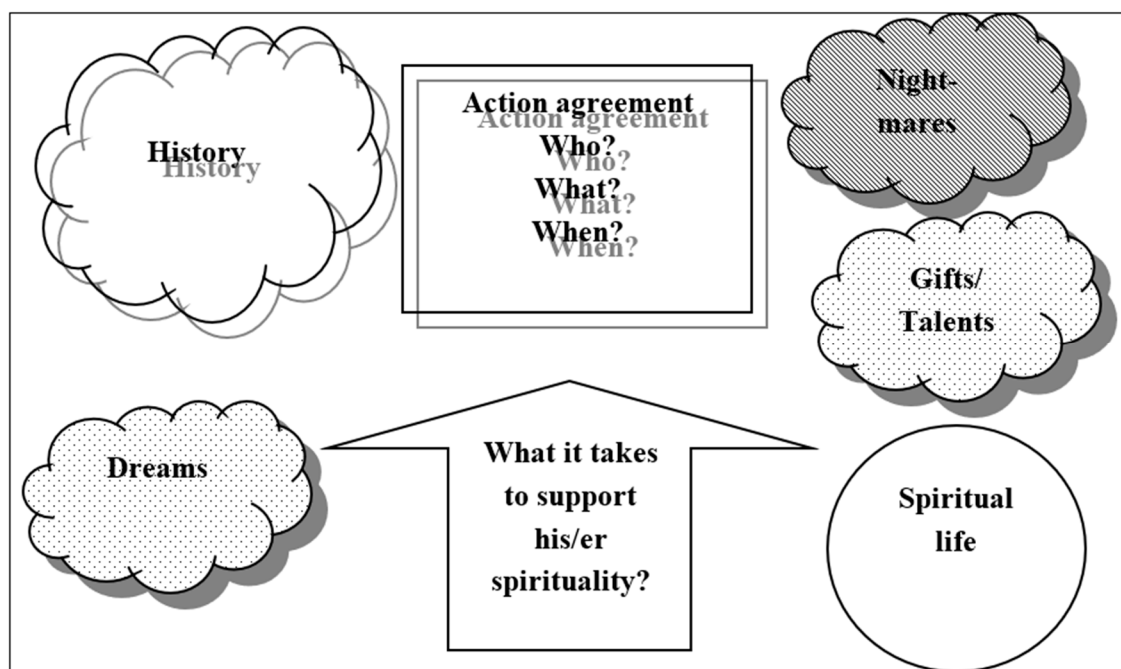


Figure 3. Key components of the spiritual MAPS.

A graphic spiritual profile of each focus person was made together with an action agreement to guide the actions of the support team over the next following five months.

In phase two (April–September 2012), the second AR cycle overlapped with the spiritual mapping cycles of action and reflection. During the plan implementation process, forms of support rendered included: keeping contact with participants; encouraging dialogue around experience; documenting and recording the process; and sharing what the researcher thought was happening. In practice, allies were invited to keep a learning log (Swinton and Mowat 2016b). These included the following elements:

- Date of events
- What did the person with SID do, or what activity did he/she engage in?
- What did you learn in relation to whatever worked well?
- What did you learn in relation to whatever did not work?
- What would you do differently next time round?

The learning log was designed to facilitate the learning cycles of action and reflection for co-researchers. The researcher coordinated a monthly return of the logs, and clarified and discussed with individual participants of what had happened. A mid-term group report was prepared for each participant, to provide an overview of the ideas and practices that had emerged and been developed after the three months of trial. Feedback on the report was collected and further deliberation encouraged.

In the last phase (September–October 2012), the spiritual mapping cycles of action and reflection continued in the same manner as the preceding phase until October 2012, when a summative evaluation was undertaken for each support team. Enhanced action plans were developed. Three MAPS evaluation

meetings were held in September/October 2012. Each meeting lasted for 1.5 to 2 h. The method of “cards on the table” (Swinton and Mowat 2016b) (a tool for facilitating discussion that is found to be effective in collecting stories, promoting discussion, and building consensus in a group) was used to facilitate participants’ recollection of and reflection on their research experience in the previous 8 months. The core question guiding the discussion was “What have you learned from the project?”.

In short, data was collected over a 13-month period from September 2011 to October 2012. A range of methods (including research diary, direct observation, learning logs, interviews, focus groups, critical conversation and documents analysis) was utilized.

4. Results

Findings of this study affirmed that the combined action research and spiritual mapping approach was an appropriate method to achieve the two purposes of this paper. Firstly, it was able to assist researchers, families, and church religious educators to engage meaningfully with the lives of people with SID; and secondly, it facilitated an in-depth reflection on cultural/religious forces that had marginalized people with SID in a local Protestant church. The first function was evident in the positive impacts of spiritual mapping on church practitioners, while the second one was manifested in the barriers identified upon the MAPS completion.

4.1. *Spiritual Mapping’s Positive Impacts on Church Practice*

Three positive impacts of spiritual mapping on church practice were found across the three cases. They included: (1) liberation from a stereotypical image of SID; (2) a broadened understanding of religious epistemology; and (3) an increased sensitivity towards problematic practices and readiness to change.

4.1.1. Liberation from Stereotypical Image of SID

The first significant impact of spiritual mapping has been the liberation, at least partly, of not always or entirely in whole, the church educators from the stereotypical images of SID they previously held. This is particularly significant in the cases of Martin and Charles whose communication is mainly non-verbal. A pattern of story–counterstory–redescription (Swinton et al. 2011b) is evident in such changes. Allies’ perceptions of the three subjects with SID were distorted by unhelpful labels commonly found in cultural narratives about disability. Stigmatizing tags such as “living in his own world” (P1, interview 23 September 2011; P2, interview 23 September 2011; P4, interview 27 September 2011; L2, interview 30 September 2011), “not responsive to others” (P1, interview 23 September 2011), and “knows nothing” (P5, meeting April 5, 2012) were uncritically adopted as references that informed the care practice of the church. Traces of “malignant social psychology” as identified by Tom Kitwood, including labelling, ignoring, and invalidation, were observable in the church practices prior to the MAPS exercise (Kitwood 1997, pp. 46–47). It must be clarified that here that the term “malignant” refers not to the intention of the care givers but to the cultural forces that tend to suppress the true stories of people with disability. Kitwood likens the impact of malignant social psychology to that of a “low-level back-ground radiation” (Kitwood 1997, p. 89). Similar to the general public, church practitioners are exposed to this same “radiation”.

Counter-stories collected from informants who were in close contact with Martin, Terry, and Charles enabled church allies to revise their narratives about the subjects. They liberated allies from previously-held bias and prejudices that originated from the “radiation” of malignant social psychology directed against people with disability. A lay ally of Martin humbly confessed, “He is not what I thought earlier on—a person who knows nothing. He thinks [his behaviour is purposive]” (L2, meeting 9 March 2012). Other allies were surprised by Martin’s positive impact on people living and working in the care home. They appreciated him as “a little angel” [a kind and lovable person] (P1, meeting 21 April 2012) who was able to “enrich others’ life” (P4, meeting 9 March 2012).

For the first time, church educators were aware of the importance of knowing the focus persons with SID on their own terms and the value of understanding their unique personal history and personality in spiritual care. The case of Martin has helped a pastor to discover that “we are able to discover the bountiful life of persons [in terms of human possibilities] who are easily forgotten or ignored” if due attention is given (P2, meeting 20 April 2012). The pastor confessed in the MAPS meeting,

For individuals whom we dislike [because of their inappropriate behaviours], we are accustomed to thinking that the best we can do is to leave them alone. Yet, it is not the right pastoral attitude. Instead, we should think more about their situation. I find Martin’s case helpful for me in this regard. (P2, meeting 9 March 2012)

Corresponding changes of their conceptions of God’s love to persons with SID were evident. Instead of seeing God’s love act as post-mortem, lofty, invisible, and otherworldly, church carers recognize how God’s love is directed to a person in concrete ways. A pastor said the MAPS making process reminded her of the fact that “Jesus cares for each of us and forgets nobody”. She recalled how Jesus drew near socially marginalized individuals, paying them due attention, and listening to them (P1, meeting 9 March 2012).

The great impact on allies of listening to the person’s story portrayed above indicates the socially constructive nature of personhood and selfhood, particularly for individuals with high communication needs. It is helpful for [Swinton et al. \(2011b\)](#) to point out that the formation of selfhood involves an ongoing and dynamic process of negotiation amongst a “complex matrix of narratives and counter-narratives”. People with profound disabilities are relatively “limited in their ability to narrate their own stories” because of the constraints inherent in the conventional context of communication (p. 6). They easily become victims of constructions of their stories for which they have no ownership. In this study, the spiritual MAPS proved to be a useful tool for releasing church allies from a false cultural image of SID.

4.1.2. A Broadened Basis of Religious Epistemology

The second significant impact of spiritual mapping is a shift in the respondents’ epistemology of religious knowledge. Transmission of biblical knowledge is traditionally a primary objective of spiritual care in the church. A significant impact of MAPS is a broadened imagination of religious epistemology, which is more sensitive and accommodating regarding the use of a non-conceptual, affective, embodied, and relational mode of knowing the Gospel.

In February 2012, the church respondents were introduced to [Webb-Mitchell’s \(1993\)](#) diverse ways of knowing God in *God’s Plays Piano, Too*, and they found it helpful (meeting 24 February 2012). During the MAPS making sessions, respondents agreed to fine-tune their instructional approach by incorporating multi-sensory materials and interactive methods into their teaching. In April 2012, a consensus was reached that, in order to verify an individual’s state of being in faith, what is needed is an alternative approach that takes account of the disability factor (meeting 21 April 2012). When the project came to a close at the end of September, the allies had discovered that Martin was responsive to body touch, and that this could be a possible means in the future to express God’s love of him. In the final meeting, 27 September 2012, the support team explored the interface of touch and preaching.

P4: Considering the situation of Martin, I have to adjust myself. I always stress on teaching [the biblical truth] and the knowledge transmission. Perhaps they don’t need this.

Author: The key is how to teach the truth

P1: to simplify it . . .

P4: to present it in a simple and purified manner, to adjust it to their level of understanding, to be with them.

As the above conversation shows, team members did not think of the material of biblical teachings as being emptied in the spiritual care for Martin. Instead, the truth content of those teachings is first of all internalized by the instructor, and then presented in a simple and purified form that is adjusted to Martin's cognitive level. The power of touching to express love and acceptance is testified by a pastor. She said, "When I touch their [care home residents'] shoulder and hands, they feel being loved and accepted ... Body touch is sometimes more powerful than a sophisticated sermon in the pastoral caring of this wounded community" (P1, meeting 27 September 2012).

Amos Yong helpfully conceptualizes the types of change that the respondents experienced. He points out that epistemology in the philosophy of religion has been absorbed in "the debate between advocates of a pre-theoretical (mystical) religious experience on the one side and proponents of a religious experience that is linguistically and textually mediated on the other" (Yong 2011, p. 171). He observes that the experiences of people with severe or profound intellectual disabilities have actually drawn scholarly attention to a more basic but neglected way of knowing, one that is affective, embodied and relational. This pre-rational mode of knowing is, in fact continuously operative "at the background of all human knowing" (p. 170) and as such, basic to all kinds of knowledge acquisition. Through paying attention to Martin's experiences, the respondents' epistemological basis of religious knowledge has been broadened.

In the course of the action research process, there emerged a significantly different mode of Christian education. Allies of Terry found her, to their surprise, to be their teacher of spiritual truth. The researcher's sudden awareness of the radical sense of neighbourly love through Terry is an example. One day, when the researcher was practicing intercession with Terry, they heard shouts of some neighbours next door, which, of course, attracted Terry's attention. The researcher was annoyed by Terry's inattention to the religious practice. In her heart, she blamed Terry. A few days later, however, a radical change of perspective occurred when the researcher read the story of the Good Samaritan who had mercy and paid undivided attention to a stranger in need of help (Luke 10:30–35). The story threw new light on the researcher's interpretation of Terry's attention to people living next door. The researcher realized that "it was me, not her, who chose to ignore them. It was ridiculous for me to ask her to pay attention to the need of people far away rather than those nearby". She noted, "She has showed me the meaning of neighbourly love in accordance with the Scripture" (Researcher, memo 30 June 2012).

A similar radical shift of perspective happened to a lay educator L4. Terry liked the senior pastor so much that she had the impulse to run toward the pastor and to throw herself into the pastor's arms. However, Terry's behaviour would sometimes appear socially inappropriate, especially when the pastor was in the middle of another conversation. L4 acquired a new insight into Terry's seemingly socially inappropriate behaviour when reading the story of a nameless woman who anointed Jesus at Bethany with expensive perfume, in Mark 14:1–26. L4 remarked:

Somehow it struck me that Terry's attachment to the pastor is a "beautiful thing" [Mark 14:6]. I realize that, as a pastor, she also needs, at least occasionally, the kind of recognition and feeling that she is needed by her flock. (L4, email 1 July 2012)

In fact, it is counter-intuitive and also at odds with the social norm for L4 to interpret Terry's behaviour as "a beautiful thing", for it is common to read it to be inappropriate for a person to "barge in" when the other person is in the middle of another conversation.

The learning experience of Terry's two allies is unsought and unanticipated. Their negative attitudes towards Terry's behavioural patterns were unexpectedly put under the judgment of God's Word and were subsequently healed. Their experiences are similar to the example given by Brock (2011) to illustrate the discovery of the Spirit's gift-giving in the human relational space. Brock was once disappointed on account of Adam, his eldest son, who had severe cognitive impairment. Typically, children love presents brought by their parents, but Adam was different. Brock says, Adam "never even noticed them" (Brock 2011, p. 370). This father was sad to find that his son was not able to enjoy receiving

presents like other children. The lesson Brock took time to learn was “to experience the relationship that exists with this other member of the body [of Christ] as it actually is” (Brock 2011, p. 370). He came to realize a pneumatological reality that was different from his expectation of how a father–son relationship works according to cultural protocols. The reality revealed before him was the purity of relationship that is given in the body of Christ.

The allies’ experience of the subjects as their teachers could usefully be set alongside with Hans Reinders’ notion of “seeing within the Christian church” (Reinders 2008, p. 329), which is in contrast to the dominant ways of “seeing” people with disabilities (Reinders 2008, p. 328f.). Reinders specifies that the lesson for assistants to learn is “to see oneself in truth” (Reinders 2008, p. 339). The reversal of the giving and receiving sides in the process has made this learning particularly challenging for people who want to prove themselves useful and competent. Such learning might involve the humbling of oneself, the admitting of one’s brokenness, and the remorse of one’s self-righteousness. Having said that, it should be clarified that it does not mean that Terry neither needs to learn socially appropriate behaviour nor requires assistance in her interpersonal relationships. The allies’ sudden realization of new ways of seeing Terry’s behavioural patterns should not serve to disguise or deny their inappropriateness where norms for social behaviour are concerned. Instead, the new perspective illuminates the complexity of human vulnerability and sees it in the light of the promise of reconciliation in the body of Christ. Instead of casting away the prevailing cultural interpretations of propriety, the idea of “seeing within the Christian church” helps to subdue these values under the promise, and thus the possibility, of reconciliation in Christ. Unfortunately, it is a rare occurrence for the able-bodied members of the study congregation to see and receive their disabled counterparts as teachers.

4.1.3. Readiness to Change

The process of MAPS making has deepened the respondents’ understanding of the inadequacies associated with their previous teaching practices, and there is also at least some evidence of a heightened readiness to change. Moving beyond a narrow religious epistemology, the church workers have begun to be aware of the need to involve more lay members in the teaching ministry. There are more than 100 residents from five care homes who receive spiritual support from the study church, and the primary delivery system of this support is through regular Christian educational programmes. These are run mainly by the church paid staff, including three pastors and an executive officer. Only two lay members were involved in these programmes as assistant instructors. As pastoral resources are thinly spread, it is commonplace for individual staff to have run a programme single-handedly. Given that the group size could be over 15, individualized attention is not at all feasible. A pastor frankly admitted that teaching such a large group is an exhausting job. He says,

The tiny room was packed with so many wheelchair users, around fifteen, that I could not walk through. It was exhausting to entertain such a large group. Previously, I thought it was alright for me to go there and run a programme. Now, I realize how inadequate is my work to meet the requirement of knowing each participant. (P3, meeting 27 September 2012)

The pastor simply has no spare capacity for getting to know each participant, let alone for promoting the development of personal relationships.

Moreover, the staff tend to find their hands constantly full with no opportunity to slow down and review their practices. One happy unplanned outcome of the MAPS meetings was that these meetings gave those who attended the rare opportunity to reflect on their practices, and to re-engage those who used to be difficult to reach in the mission field. Discussion within the MAPS meetings tended to raise the staff’s expectation of their pastoral roles and helped to rekindle their desire for change and innovation. During the evaluation meeting, a pastor expressed the intention of carrying out a comprehensive review of the religious educational program (P1, meeting 27 September 2012), and the other pastor voiced the need to have collective reflection of their pastoral work in the future (P3, meeting 27 September 2012). The staff intend to mobilize lay members into taking part in the care

home groups, as they saw the importance of stable and supportive friendship in promoting spiritual growth and development (P3, meeting 27 September 2012).

One pastor appealed to non-disabled members of the church to step forward as spiritual companions to those living in care homes. (P1, meeting 30 September 2012) Nevertheless, a couple of questions need to be raised prior to mobilizing the lay members: What has held them back in the past from this kind of participation? Additionally, why is it that members with disabilities seldom make interested spiritual partners for those without disabilities?

To sum up the impact of the MAPS exercise on the respondents, we could say that MAPS had the positive effect of very largely neutralizing the malignant social psychology directed against people with SID. It creates space for church co-workers to listen to the stories of people who have no voice of their own. It also enabled the allies to take the experiences of the subjects seriously, especially in their thinking in relation to spiritual formation. As such, MAPS broadened the allies' understanding of the basis of religious epistemology. Finally, it also increases respondents' awareness of the inadequacy of the old practice of spiritual care and has heightened their readiness to change. However, they are at the same time aware that it is not easy to mobilize able-bodied members to commit themselves to actively supporting the spiritual wellbeing of their counterparts with disabilities, by for examples, readily agreeing to participate in groups alongside them. The findings of the action research study throw light on the deep seated dichotomy of we-versus-they within this faith community. The task requires nothing less than a comprehensive examination of the underlying theologies that steer the practice of spiritual care. These theological ideas are deeply engrained in the conception of spirituality and "coming to faith".

4.2. Further Barriers Uncovered

Following the above assessment of the impact of spiritual mapping on church practices, this section seeks to address further barriers that the MAPS exercise uncovered in the research process. The main barriers identified are the problematic evangelical style of spirituality and the subsequent conceptions of faith and SID.

4.2.1. Unique Spirituality—Devotion to the Bible and Individualistic Piety

A prominent feature of the church Christian educational practice is a conception of Christian spirituality that is marked by a keen focus on the use of the Bible as a medium of developing faith, and an individualistic view of Christian piety. From the respondents' use of terms such as "spiritual" and "spiritual care" in the interviews of autumn 2011, it is found that "spirituality" is a term that is used to refer to a normative state of being a Christian who has a good and right relationship with God. A pastor regarded the aim of his spiritual care as "helping" the "eternal life" of people with disabilities (P3, interview 20 September 2011). It means helping people to trust and obey God. In a similar breath, the first thing that the other pastor would do in her ministry of spiritual care is to assist the care home residents "to become Christians through sharing with them the essence of the biblical truth and religious faith" (P2, interview 23 September 2011). Another pastor aspired for a "spiritual insight" that would enable her "to tell the difference between persons who has a better spirituality—having a good relationship with God—and those who has not reached that stage" (P1, interview 23 September 2011). In general, the purpose of spiritual care of the pastor team is to help the subject to know and to believe in God. This contextual meaning of spirituality points immediately to the notion of faith, a doctrinal term for the subjective realization of revelation (Webster 1993). We can say that to enable a person to come to faith is the primary driving force of spiritual care in this community, which is in fact identical to that in the territory-wide movement of evangelization of people with learning disabilities (Kwan 2009).

The nature of this contextual understanding of spirituality is individualistic and presupposes the Christian Scripture as its basis. Specifically spirituality in this context is something derived from, and continuously nurtured by, one's pious reading of Scripture. Devotion to the Bible is the main

characteristic of respondents' spiritual care practice. It is a "must" for a lay research respondent to "use God's words to fulfil believers' [spiritual] needs" (L1, interview 19 September 2011). "Biblical teaching" is expected to be able to help care home believers "resolve daily problems" (P4, interview 27 September 2011). "Nothing but the Bible" is considered "worth mentioning in the care home programmes" (L4, interview 30 September 2011). Church practitioners believed that the Spirit works in the human memory and uses fragments of Scripture to give individual Christians the assurance of divine love. For instances, a pastor hoped that care home Christians are able to "recall bible teachings they learned in times of trouble" (P4, interview 27 September 2011). In several conversations with care home residents, the other noticed that they tend to affirm the goodness of God by appealing to fragment of biblical texts or lyrics of hymns, this tends to convince her that the Spirit would use these fragments of text as means to bring about transformation in people's life (P1, interview 23 September 2011).

The second characteristic of respondents' understanding of spirituality is an individualistic piety. Terry's allies regarded the ideal state of spiritual life for her to be that of finding and holding on to a private, inner, and an exclusive trust in God. Mary, Terry's main carer, once asked the question, "What is spiritual growth?" out of her frustration, what she actually meant was, "I really don't know" (Mary, meeting 14 October 2012). There was an insurmountable gap between the expected and actual outcome of Terry's spirituality. Things seemed to turn from bad to worse. Her biblical knowledge remained poor and she had no grasp either of a sermon's content and message, nor could she make anything of the materials studied in the cell group. She did not consult the Bible at home. Mary's concern and frustration shed light on the situation in the wider evangelical context. Coming from this backdrop is a particular kind of hermeneutics of spirituality and Christian education, which impacted on the church practice. They make the spiritual life of individuals such as Terry (who cannot make sense of the literary Bible) appears to be inferior or under-developed.

However, a practical problem of such a conception of faith is that it might encourage complacency over the marginalization of individuals like Terry in the faith community. From the perspective of a private Christian faith, her desire to be listened to and valued would all too easily be interpreted as a kind of spiritual weakness. Also, the positive impact of friendship on one's spirituality, for examples in enabling a person to experience God's love, would be easily brushed aside and be seen as short-lived, without long-term significance to one's spirituality. The theological inadequacy of such private Christian faith should be challenged.

4.2.2. Three Conceptions of the Relationship between Faith and SID

To handle problems involved in evangelizing persons with SID, together with the subsequent challenges of religious instruction, different pastoral responses could be observed from respondents' practices. Such practices presuppose three different conceptions regarding the relationship between faith and SID. Characteristics of these conceptions are shown in Table 1 below:

Table 1. Three conceptions of the relationship between faith and severe intellectual disabilities (SID).

	Relationship between Faith and SID		
	Agnosticism	Supernaturalism	Pedagogy
Perception of the subject's ability to know God	None	Supernaturally enabled	low
Perception of the subject's response to God	None	Invisible, without outward expression	Visible
Perceived function of religious instruction	None	Unknown	Significant
Understanding of the subject's spirituality	Unknown or a saved non-believer	Believer without an outward expression of faith	Believer requiring intensive educational support

The first conception is characterized by agnosticism with regard to the relationship between faith and SID. Pastors holding this position tend to leave the question of salvation to post-mortem divine

judgment. Persons with SID are thought to have no ability to know and develop a relationship with God during their lifetime. Religious instruction is expected to have no impact on them: the view that they do not stand to benefit from it. Conceptions of their spirituality or relationship with God are entirely otherworldly. Regarding Martin's relationship with God and particularly his salvation, a pastor said, "I do not worry too much that he will not be saved. I think his situation is like the issue of salvation of infants who died prematurely" (P2, interview 23 September 2011). As for Martin's post-mortem existence, a lay respondent considered it not opened to speculation and was not sure whether theories of infant salvation could apply in Martin's case for "he has lived for many years. No one knows the condition of his inner world [whether or not he has sins]. It depends on God's judgement ... It is better for us to refrain from giving any comment on this matter" (L1, interview 19 September 2011).

Irrespective of whether one has an agnostic or an optimistic view regarding the likely destiny of people with SID, common to both sides is an attitude that there is not much for the church to do regarding the spiritual life of people with SID. Their relationships with God during their earthly existence could neither be clearly discerned and established nor articulated. As such, no path of spiritual development and growth could be suggested for them.

The second type of response is characterized by its use of supernaturalism in relating faith and SID. Similar to the first type of response, respondents holding this position tend also to consider the research subjects as lacking natural capacities to form a knowledge of God or to consciously develop a personal relationship with Christ. Yet there is a nuanced difference between these two types: the latter type (taking into account divine activity in the here and now) would suggest that persons with SID are able to know God through extraordinary means of grace, by virtue of the power of the Holy Spirit. Their faith acts are thought to be invisible to fellow Christians and yet they are known to God. For instance, when thinking about Martin's relationship with God, a pastor appealed to the freedom of God's revelatory work and believed, "God can access his inner world in ways that I don't know" (P4, interview 27 September 2011). A pastor ally of Charles said "I don't know how much he [Charles] understands my instruction, God knows. Perhaps he understands a lot but simply cannot express it" (P3, interview 20 September 2011).

According to the first type of response, the possibility of knowing God is absent from the life of people with SID, while in the second type God's knowability for person with SID is spiritualized as a divine secret. Embedded in both positions is a religious conviction that the subjects are persons who could emit no observable act of acknowledging the divine reality. Having severe cognitive impairment means that either the subject forms no knowledge of God, or that even if such knowledge were to be supernaturally infused, still they have no capacity to communicate their experience in intelligible ways.

A logical consequence of the first two models is a kind of pastoral inactivism. When one's spirituality is being seen as otherworldly or a matter of supernatural divine illumination, one's need of pastoral care and attention could be reduced to a minimal level. Such persons are not expected to derive much benefit from church proclamation and teaching. The belief in God's power and mysterious ways is misconstrued in such a way that can lead in the mission field to pastoral apathy towards intellectually disabled persons. Before MAPS, Martin had been a victim of such apathy for years. Pastoral responses to Martin were largely in the form of dutiful greetings and occasional behavioural management. His presence in the church group was not taken seriously by anyone. A serving team member said, "I do not take Martin as a target of instruction" (L1, interview 19 September 2011). His care worker did not think he would benefit from the activity as "he cannot express faith" (S4, interview 5 March 2012). Programme participants took the same view. A resident member commented that Martin "does not understand [instruction]" (observation 17 February 2012).

Apart from practical problems associated with them, the first two types of responses suffered from certain doctrinal weaknesses. Common to both is the presumption that people with SID lack the capacity to know and to believe in God. However, is such claim theologically adequate? It suffices to highlight two points here.

First, in the agnostic response, the subjects are being denied access to faith as well as to the subjective realization of revelation. Such an assumption risks misconstruing the condition of cognitive impairment as a factor that actually determines divine revelation and illumination. By suspending faith and postponing the question of salvation beyond the threshold of death, this type of pastoral response in effect causes damage to the doctrine of creation. The acts and freedom of the Creator are actually constrained by immanent conditions of the creatures that He created. Second, it is a danger in assuming that the illumination of the Spirit is formless, individualistic, undetectable, and separated from the church insofar as it risks suggesting a docetic view of the divine Word.

The third type of pastoral response is distinct from the foregoing two as it does not entail pastoral inactivism. Conversely, it emphasizes the importance of teaching as a contributor to the spiritual life of individuals with SID. Spiritual care in this third model is equivalent to special educational support. For instance, Terry is thought to possess the potential to learn about God. As Terry's story unfolded, the support team strived hard to improve her level of biblical knowledge prior to her baptism, and such effort did not diminish even afterwards. However, this pastoral response appears to open up the risk of yet another practical problem—the isolation of the subject within the faith community, as evidenced in the case of Terry. Church members were seen to ignore Terry. Her pastor ally observed that some people exchanged greetings with Terry in the church, yet conversation seldom followed. No significant development in interpersonal relationship was observed during the period when Terry joined the Bible study group. Church members rarely talked to Terry directly (P2, learning log of June/July 2012). Without Mary's facilitation, Terry seemed to be cut off from the community and became "invisible" to others. This pastor observed that "no one would approach her and she would not approach others" (P2, conversation 18 July 2012).

Church members did not recognize Terry either as an interested co-learner or as a partner with them on their own spiritual journey. She appears to be ill-fitted for the Christian education groups. It seems that the only way of instruction that works for her is teaching on a one-to-one basis, a luxury that is unlikely to be realized given the manpower constraint of the church. The prospect for Terry's spiritual formation is a gloomy one. The same is true of the spiritual lives of Charles and Martin. They are unable to access the vital spiritual resource in the biblical text. When the concern of the scarcity of resources bears upon this pastoral orientation, persons like Terry, Charles, and Martin are set to become an untouchable group, their impairment then tending to become the primary factor that defines their existence.

Terry's spiritual isolation within the church throws light on the sectarian implications of the special educational approach to spiritual care. This pastoral orientation, in particular its lopsided emphasis on the conceptual manipulation of religious knowledge should be scrutinized. It suffices to suggest here that because the risen Christ Himself is the reality and measure of personal faith, a fixation on, and exaggeration of, the use of biblical texts in spiritual support for people with high-level communication needs is not only impractical but also theologically untenable.

In sum, common to these three conceptions outlined above is the assumption that the logic that governs how a person comes into faith is dependent on one's ability to know God through the literary world of the Bible. Weaknesses of these three types of pastoral responses have clearly indicated that (for as long as spirituality is construed as an individualistic endeavour and is narrowly defined in terms of intellectual assent to the truth claims of biblical texts) persons with learning disabilities, particularly those with SID, will continue to be marginalized and isolated within the faith community. In the remainder of this paper I will look to show that the emphasis on biblical instruction in the spiritual care of the study church is consistent with the evangelical notion of spirituality and Christian education, and also that this approach can and does create barriers for a truly inclusive ecclesial practice.

Having said the above, it must be clarified here that the aforementioned marginalizing of people with SID in the faith community was not a result of deliberate and calculated action on the part of leaders and others in the church. It was rather an unintentional and unplanned consequence by well-meaning church practitioners who did not have the capacity and resources to identify and point

out the dichotomy between what the mission statements suggested the church was and should be doing and what it was actually doing.

5. Discussion

In a number of ways spiritual care and Christian education in the study church resembles that of the evangelical tradition. The emphasis on biblical learning is a prominent characteristic of evangelical spirituality. It is not too far-fetched for James Gordon's to specify the evangelical understanding of Christian spirituality as "lived doctrine, the response of the human heart to divine initiative, the consequences for spiritual life of Christian belief and experience" (Gordon 1991, p. 3). The integration of mind and heart, belief and experience in Christian spirituality is emphasized in Alister McGrath's writings. Spirituality for him is "all about the way in which we encounter and experience God, and the transformation of our consciousness and our lives as a result of that encounter and experience" (McGrath 2003, p. 13).

However, this 'standard' way of encountering God is not opened to persons with SID, given it is solidly built upon the practice of reading and listening to Scripture. Even more pointedly, Ian M. Randall says "evangelical spirituality is biblical oriented". Personal study of Scripture is taken seriously as "a means of spiritual growth" (Randall 2005, p. 289). The importance of Scripture in the progression of spirituality is best presented in Bishop J. C. Ryle's classical statement—the Bible is "*the chief means by which men are built up and established in the faith, after their conversion*" ([Ryle 1878, p. 81] as cited in Tidball 2005, p. 262). Derek Tidball clarifies that other means of spiritual formation have caught evangelicals' attention but the Bible remains "prominent and foundational" in their mindset (Tidball 2005, p. 262). The basic approach to evangelical spiritual formation is a discipline of daily devotion, consisting of pious reading of certain Bible passages and accompanied by prayer. The aim of devotional reading is to have a "living encounter with the God who spoke and continues to speak by means of his Spirit through the Bible" (Tidball 2005, p. 265). Apart from daily devotion, the Bible constitutes the material content of two other vital means of evangelical spiritual formation—the corporate study of Scripture in small groups, and the exposition of the Scripture through preaching. These three approaches have constituted what David K. Gillett calls "a threefold chord within evangelical spirituality that provides the necessary strength for understanding and obeying the Word of God" (Gillett 1993, p. 157).

In light of this text-oriented or text-saturated spirituality, the status of Terry's spiritual well-being is obviously worrying, because she is far from practising the "threefold chord within evangelical spirituality". Additionally, she "did not understand the Sunday service" (Mary, meeting 14 October 2012). Her trial participation in the bible study group was abortive since the learning material did not match with her level of cognition. She is inexperienced regarding the practice of devotion or quiet time because she cannot read. Following the reasoning of the evangelical tradition, a vigorous biblical instruction that is adapted to Terry's cognitive level is deemed vital for her spiritual development and for her to have deeper experience of God.

Having an exclusive focus on Scripture is a prominent characteristic of what Harold W. Burgess called the evangelical model of religious education (Burgess 1996). To push back the growing influence of liberal theology and progressive education, there was a revival of evangelical Christian education around in 1930s and 1940s in North America, with the primary objective of restoring the Bible back to the core of religious education. Under this model the teaching of divine inspiration of Scripture is the theological foundation of Christian education (Lawson 2003). Acceptance of biblical authority is considered by evangelical educators to be the "distinctive mark that identifies true Christianity" (Burgess 1996, p. 169). The church's education curriculum is organized with the aim of transmitting the divine message in a systematic way. It is typical for evangelical educators to draw their subject matter directly from the Bible. The Bible is regarded as "the textbook for Christian teachings" (Burgess 1996, p. 169). The Bible is seen as the designated interface between the learner and God,

which enables the former to experience God in a fundamental sense. Hence, imparting information is the aim but not taken as the goal of Christian education, which is a godly life.

Harold W. Burgess observes that the evangelical model assumes “Christian living [as] rooted in one’s reception of the Christian message and in the resultant work of the Holy Spirit through that message” (Burgess 1996, p. 164). However, the dependence on the textual form of the Bible in effect marginalizes individuals such as Terry. Her cognitive impairment hindered both the reception and retention of the Christian truths, which is communicated via the proclamation. This leaves hardly any raw materials that the Holy Spirit could work on in a later stage of sanctification. Terry’s growth in “godly life” is frustrated, and there is little expectation for her to make progress in that direction.

The evangelical attempt to speak of divine work in this educational model has competing nuances that engendered two different teaching approaches, both having the risk of marginalizing people with SID. The first one is a non-reflective maximalist claim of divine work in the teaching process. It encourages complacency with respect to poor and irrelevant instruction. Burgess describes this weakness pointedly,

Sunday School teachers have sometimes laboured under the impression, all too easily deduced from the model, that if they teach the outer facts of the bible the Holy Spirit will accomplish the necessary work of bringing about the desired goals in the lives of individual learners. (Burgess 1996, p. 165)

The platitude of reliance on the Spirit in bringing about spiritual growth could deceive teachers into overlooking “their role in assisting students to explore the implications of the Scripture for their lives individually and corporately” (Lawson 2003, p. 450). This maximalist position is evident in the cases of Martin and Charles, while with the maximalist stance Terry’s individualized learning needs would be conveniently passed over.

Conversely, the minimalists aspire for professionalism and specialization in church education by diligently following modern pedagogy. Lawson notes that in the later twentieth century there was in the North American evangelical congregations a significant growth in age-focused ministries (Lawson 2003, p. 446). Simultaneously, there was “a growing professionalism within the field of Christian education among evangelicals” (Lawson 2003, p. 447). As a result, specializations in Christian curriculum development, educational administration and leadership, and ministries for different age cohorts emerged in Christian colleges and seminaries. The organization of Sunday school and worship services in many Hong Kong evangelical churches has followed suit.

The study church teaching ministry has the same specialization according to the human developmental principle. Tracking or ability grouping has evolved naturally as the organizing principle of the teaching ministry. All church members attend the same Sunday service, but (when it comes to programmes of spiritual formation) are “triaged” into streams according to age and cognitive developmental stages. Members with disabilities are separately educated in groups in their place of residence. Pastors considered this group teaching far more significant and effective than the Sunday sermon, as the materials are tailored made for them (P1 and P3, interviews 23 and 20 September 2011). Although there has never been a rule formally laid down to separate the congregation into groups along ability lines, this turns out to be the case with almost no exceptions. Apparently no able members belong to care home groups except for the ministering team and a few lay members serving as instructors. No member from the care homes belongs to cell groups for the able-bodied. This unfortunate situation is due partly to mobility problems faced by care home members who require transport if they are to take part in activity outside the care home premises. Another reason for this low level of cross-participation is the meeting time of care home groups, which is sometimes inconvenient for members having a daytime job. However, it is also true that most able-bodied members are simply either not interested or insufficiently interested in joining the care home groups. They are comfortable enough when worshipping alongside people with disabilities on Sundays, but they seldom imagine that the latter might become their partners or friends in cell groups. Why is it that the disabled make

unappealing and unlikely partners in this evangelical journey of sanctification and godly living? Is the reason behind this purely aesthetical, social, or theological?

The grouping pattern based on homogeneity of ability matches the logic of tracking in modern schooling. (Armbruster 2011, p. 470) Tracking, sometimes called grouping, setting or streaming, is an attempt in early years of schooling to adapt classroom instruction to individual differences. Learners with the same or broadly similar level of academic performance are placed in the same group or class. It is believed that students should receive instruction according to abilities, and that it is also beneficial to allow them to proceed at different rates and to receive different course content (Resnick et al. 2010). In addition, an associationist theory of learning is also a defining feature of the past practices of this church. According to this type of learning theory, to acquire knowledge of something is taken as a task that requires recipients “to have a mental collection of many separate associations and the ability to call up these associations quickly and accurately” (Resnick et al. 2010, p. 399). The best kind of teaching is that which enables learners to manipulate “the many associations that constituted a given body of knowledge”. Characteristics of instruction informed by this theory include a fixed body of knowledge composed of a “prespecified set of facts or explanations,” an instructor who knows the answers, and learners who are able to provide answers expected by the instructor (Resnick et al. 2010, p. 400).

With the main objective within schooling by the church being the transmission of the divine truths of the Bible and the expected learning outcome being the learner’s retention of meaningful words and phrases, the study church educational ministry could in fact be adequately described as using the features of the associationist theory of learning that are met in the tracking practised in schools. The division that makes ability as the criterion is a logical consequence and a normative design in this semi-Cartesian model of spirituality and faith. In this text-based spiritual care, people with higher mental ability do not need, for the spiritual advancement, to have around them those with an inferior capability. Even worse, the latter would slow them down if they are present in the same group. Adopting the principle of tracking and the associationist learning theory, people with cognitive impairment will definitely appear less spiritual-enabled. Intellectual disability could now be transmuted into spiritual weakness. It is not only that a person’s spiritual life is marred by sin, it could also be frustrated by the lack of intellectual prowess. In a semi-Cartesian construal of faith, sluggishness in acquiring and accumulating biblical knowledge makes a person’s relationship with God questionable. But is such transposition of cognitive weakness into a person’s spiritual life theologically, or even philosophically, warranted?

Having said the above, it must be clarified that I do not mean that church members maliciously ignored Terry and others with cognitive impairment. No, the problem I address here is a logic of coming to faith in the evangelical model of spirituality and Christian education that makes Christians unable to practise their faith in solidarity with persons such as Terry. Such logic casts an unfavourable light upon Terry, making her appear inferior in matters of faith. Governed by this logic of faith, there is little reason to bring people with different learning abilities together in spiritual formation, except to predefine the able-bodied as helpers and their weaker counterparts as recipients.

More often, the positive impact(s) of people with disabilities to the church is (are) a transposition of the condition of their disabilities. It is commonplace for the able-bodied members to regard their disabled counterparts as representing an opportunity to practise Christian love, or as a channel through which to fulfil moral obligations. A pastor points out tellingly the division between two groups in her church. She says:

As a pastor, I regret that our able-bodied members are unable to live with their brothers and sisters with disabilities. The non-disabled and the disabled members are separated from one another. The kinds of assistance that the former offered to the latter are largely tangible or physical in nature, with little depth in terms of personal interaction. (P1, meeting 9 March 2012)

The difficulties encountered when attempts are made for the non-disabled “to live with” the disabled members in the study church are similar to the challenges faced by the organization known as

L'Arche. Jean Vanier, the founder of this world-wide community movement, points out that “to live with handicapped people in the spirit of the Gospel and the Beatitudes” is the “focal point of fidelity at L'Arche”. He says,

“To live with” is different from “to do for”. It doesn't simply mean eating at the same table and sleeping under the same roof. It means that we create relationships of gratuity, truth and interdependence, that we listen to the handicapped people; that we recognize and marvel at their gifts. (Vanier 1979, p. 106)

Vanier rightly points out the fundamental factor that holds back people from “living with” or looking to “be with” persons with disabilities—“it is always easier to accept the weakness of handicapped people” because assistants “want to see only good qualities in [themselves]” (Vanier 1979, p. 88). The negative stance of Vanier is his assertion that to live with or being with the other requires the relinquishment not only of cultural bias and stereotypes against disability. It is also critical that the able person should, (1) give up the deceptive self-conception that he or she is morally superior; and (2) lay down one's false sense of self-sufficiency. Yet, this shattering of false self-image only in a tenuous way predisposes a person to relationships that could potentially be qualified by the phrase “living with” or “being with”. Vanier's writings seem to stop short of a full articulation of positive factors that bring about authentic “living with” relationships between able and disabled partners. A theological account of “living with” relationships in terms of *koinōnia*, the fellowship with God the Father and fellow human beings by virtue of Christ's mediation in the power of the Spirit, might be able to further develop Vanier's insight in the future.

6. Conclusions

The study reported in this paper shows that the religious experiences of persons with SID are researchable if an appropriate methodology is in place. The combined action research and spiritual mapping method has proved itself effective in bringing some positive changes, including enabling participants to aware their misconceptions of persons with SID, helping care providers to be liberated from the malignant social psychology directed against people with high communication needs, and giving participants space to review their practices and roles and broaden their view of religious epistemology. Furthermore, it is found that the method is helpful to uncover the deep seated religious forces that have kept persons with SID at the border of the faith community. The spiritual care practice for persons with SID in the study church currently follows the evangelical model of spirituality and Christian education. Its primary objective is to enable individuals to have a right and good relationship with God. The Christian Bible is regarded as the foundation of one's spiritual wellbeing, because it is the *way* for individuals to know and to believe in God. According to this model, spiritual care is pedagogical in nature, with the goal of transmitting biblical knowledge. It presumes a problematic reasoning of how a person comes to faith—that the knowledge of Scripture is treated as a necessary condition, though it also necessary that it is accompanied by the illumination of the Spirit. This presumption has led Christians without disabilities to misconceive individuals with SID as either inferior in the matter of faith or even incapable of coming to faith. I recounted how such presumption gives rise to three typical pastoral responses, with the common consequence of keeping persons with SID at the margins of the community. To overcome this prejudice in future, we need nothing less than a thorough and critical examination of the problematic logic of coming to faith, and a search for a theologically adequate notion of faith that is truly inclusive. A review of literature regarding the relationships between the doctrine of subjective appropriation of faith and severe cognitive impairment is recommended.

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