

Welcoming and Defending the Disabled Stranger: Hospitality as Personal Relationship and Public Action

James Gould
McHenry County College

Beth Gould Nolson
Independent Scholar

Abstract

Around the world, people with intellectual and developmental disabilities either live at home with family or in facilities staffed by professionals. Research indicates the hardships of family caregivers (who are often fatigued from looking after a dependent loved one) and the shortcomings of disability service systems (which are plagued by inadequate funding and persistent staff vacancies). We suggest two ways in which faith communities can support people with intellectual disabilities and their caregivers. We interpret the Micah (6:8) Mandate through the lens of hospitality to create two kinds of hospitality: kindness-hospitality and justice-hospitality. Churches can extend hospitality directly through personal relationships of care and indirectly through public and political action. We focus on intellectual disability, but our challenge also requires hospitality to people living with physical, sensory, psychiatric, and invisible disabilities. We reference Christian themes and address Christian communities, but our argument is relevant to other faith traditions as well. We discuss the United States and Canada, but our analysis applies to many international contexts.

Introduction

“Can anyone recommend a service of some kind that can stay overnight for a day or two to care for my son while I’m in the hospital? I need surgery, but I have nobody to stay with him.” This plea on a Facebook group for parents of adults

with intellectual and developmental disabilities (IDD) is one of similar postings each month.¹

Christian faith is incarnational—it is lived in the world. Don Browning defines practical theology as “the reflective process which the Church pursues in its efforts to articulate the theological grounds of practical living in a variety of areas.”² It aims to deepen and align theological understandings and faith-based practices—personal and public. Of fundamental importance to practical theology is contributing to the flourishing of creation, life in all its fullness (John 10:10). Through social witness that speaks to issues affecting society-at-large, Kathleen Cahalan and Gordon Mikoski declare, “practical theologians are unapologetic change agents.”³

Christian ethics mandates concern for every person, particularly the most vulnerable (Lev 19:10–15; James 1:27). One group often left behind is people with IDD and their families. Our thesis is simple: the church—individual members, local parishes, and denominational bodies—must work for their flourishing through practices of personal and public hospitality. Our analysis proceeds in three steps. First, we outline *empirical information* about IDD, the social model of disability, and the challenges IDD poses to individuals, families, and social service systems. Second, we provide a *theological foundation* in an ethic of hospitality that reaches across difference to welcome and defend the stranger. From the “Micah (6:8) Mandate” we construct an interplay between kindness-hospitality (personal relationships that welcome) and justice-hospitality (public acts that defend). Third, we offer *practical application*, identifying a number of ways that churches can support individuals with IDD and their caregivers—directly through personal relationships of kindness and indirectly through public acts of justice.

We focus on IDD, but our challenge also requires hospitality to people living with other disabilities. We address Christian communities, but our argument is relevant to all faith traditions emphasizing compassion and justice. We focus on North America, but our analysis applies to many international contexts.⁴ We draw

1 In Illinois, where James Gould lives, Illinois Respite Coalition provides stipends of \$500—very little—so caregivers can pay for emergency respite care. In Ontario, where Beth Nolson lives, Community Living Toronto offers short-term respite care for disabled individuals living in the community with a parent or caregiver.

2 Don Browning, cited in Ray Anderson, *The Shape of Practical Theology* (Downers Grove: InterVarsity, 2001), 23.

3 Kathleen Cahalan and Gordon Mikoski, “Introduction,” in *Opening the Field of Practical Theology*, ed. Kathleen Cahalan and Gordon Mikoski (Lanham: Rowman & Littlefield, 2014), 6.

4 For information on Australasia see Royal Commission into Violence, Abuse, Neglect, and Exploitation of People with Disability, *A Brief Guide to the Final Report* (2023). For information on Finland see Jan Tøssebro et al., “Normalization Fifty Years Beyond—Current Trends in the Nordic Countries,” *Journal of Policy and Practice in Intellectual Disabilities* 9 (2012): 134–46. For information on the UK see Equality and Human Rights Commission, *Being Disabled in Britain* (2017).

on our experiences as dad of and aunt to an intellectually disabled young adult, David.

Empirical Information: The Challenges of Intellectual Disability

Christian ethics centers hospitality—welcoming and defending the stranger whose well-being is threatened or diminished. People affected by IDD are among the socially vulnerable. In order to apply God’s truth to human life, practical theology must be sociologically informed. We begin, then, with an overview of basic facts about IDD and the challenges that impact individuals, their families, and formal systems of care.

The Nature of Intellectual Disability

IDD is mental impairment that substantially limits one or more major life activity. IDD begins in childhood, lasts lifelong, and encompasses a diverse set of conditions such as Autism and Down syndrome. Limited executive function (mental skills that manage thoughts, emotions, and actions) and adaptive behavior (cognitive skills that meet the demands of everyday living) are defining features of IDD. Individuals with deficits in these abilities need assistance with activities of daily life. IDD ranges from mild limitations requiring intermittent supports to profound impairments requiring pervasive supports.⁵ In the US, there are 8.4 million people with IDD—in Canada 686,000.⁶

David is intellectually disabled as the result of a prenatal brain injury. He is not literate, is nonverbal, cannot understand significant choices, and requires assistance with every aspect of daily life. He lives in a four-person group home and attends a day activity center operated by a private nonprofit agency that is government-funded. David is, of course, much more than his disability. He has numerous virtues (humor and empathy), talents (as a bicycle rider, food pantry volunteer, and Special Olympics athlete), and relationships (with family, disabled peers, professional staff, and nondisabled community members). He is loved into being by God, and there is great goodness in David despite his impairments.

5 This standard definition of IDD comes from American Association on Intellectual and Developmental Disabilities, “Supports Intensity Scale” (2015); American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders—DSM-5* (2013); World Health Organization, *International Classification of Functioning, Disability, and Health—ICF* (2002). When we use the term “disabled people” in an unqualified way, we are referring to people with IDD.

6 Residential Information Systems Project, “People With IDD in the United States” (2020); Canadian Association for Community Living, “The Facts on Housing and Persons with Intellectual Disabilities” (n.d.).

The Causes of Disability Challenges

We assume without argument that IDD is detrimental to well-being.⁷ Its disadvantages are both naturally caused and socially constructed. The *medical model* is essentialist: disability resides inside individual body-minds. Disability is a biological condition—a lack of functioning disrupts typical activities. Given his cognitive limitations, David will never do certain things—read, write and count, tie shoes, or prepare meals independently. These disadvantages are unavoidable. The solution to naturally caused disadvantage is individual and therapeutic.

The *social model* of disability is constructivist: disability resides outside the person in unsupportive social environments. Disability is a social creation—individual attitudes and institutional practices hinder full participation in society. David needs full-time support, but the underfunding of wages causes staff vacancies, which, in turn, cause social isolation, absence of meaningful activities, and lack of skill development. These disadvantages are avoidable. The solution to socially constructed disadvantage is social and political.

The *interaction model* acknowledges the role of both biology and society in creating disability challenges. We emphasize the second—ableist social practices, negative public attitudes, and inequitable political decisions exclude people with IDD from community life and limit access to opportunities and supports. Many are disadvantaged because of social injustice, not simply biological malfunctions.

The Hardships of Family Caregivers

Adults with IDD often remain a family responsibility. In the US, 61 percent live in their family home, and 24 percent have caregivers aged sixty-plus; many live with parents until they can no longer provide care.⁸ In Canada, 13,000 disabled adults live with parents.⁹ Caregiving can create physical, psychological, practical, financial, and marital difficulties—especially for women, who provide most care.¹⁰

7 Some disabilities are *mere differences* that are neutral in their effect on flourishing. But other disabilities are *bad differences* that are detrimental to well-being. Some disabilities are bad not simply because of social arrangements but because of biological deficits that, by themselves, make a person worse off. James Gould defends this conclusion in “Christian Faith, Intellectual Disability, and the Mere Difference / Bad Difference Debate,” *Philosophy and Theology* 30 (2018): 447–77; “The Complicated but Plain Relationship of Intellectual Disability and Well-being,” *Canadian Journal of Bioethics* 3 (2020): 37–51; “Why Intellectual Disability is Not Mere Difference,” *Journal of Bioethical Inquiry* 19 (2022): 495–509.

8 Residential Information Systems Project, *Long-Term Supports and Services Recipients by Setting Type and Year* (2021); David Braddock et al., *The State of the States in Intellectual and Developmental Disability 2017* (American Association on Intellectual and Developmental Disabilities, 2017).

9 Canadian Civil Society Parallel Report for Canada to the Committee on the Rights of Persons with Disabilities, “Meeting Canada’s Obligations to Affordable Housing and Supports for People with Disabilities to Live Independently in the Community” (February 27, 2017).

10 Dennis Hogan, *Family Consequences of Children’s Disabilities* (New York: Russell Sage Foundation, 2012); The Arc, *Family and Individual Needs for Disability Supports: Community Report 2023* (2023). While family caregivers assume significant burdens, we must be careful

Parents are fatigued and stressed from the time and energy involved in looking after their loved one. Individuals with IDD have personal needs, behavior difficulties, medical problems, and transportation challenges which create substantial demands. In the US, family caregivers experience financial hardship—and often high rates of poverty—because caregiving responsibilities hinder paid work and because they pay considerable out-of-pocket costs for services.¹¹ In Canada, too, the impact of caregiving, especially on mothers, includes fewer opportunities for employment and limited social networks. Many experience financial strain, emotional distress, and poor overall health. As they age, many parents have unsustainable care responsibilities.¹² Families that do not provide direct care typically oversee the service programs supporting their loved one. Many parents have low confidence in the quality of agency services and become weary advocating for better programs in a system that is inconsistent, complex, and unresponsive. Many have fears about long-term care of their adult child.¹³

Some families provide care because they choose to, but others do so because they must. Out-of-home options are limited—wait lists are long, and existing openings do not meet current demand. In the US, families with children have trouble finding afterschool and summer care, reliable home care, and respite programs. Families with adults have difficulty locating residential homes and day programs—700,000 are waiting for housing and employment supports. One-third of parent caregivers report that they are waiting for personal assistance, respite, housing, therapy, job coaching, and transportation—with an average wait time of more than five years.¹⁴ Family support accounts for 9 percent of public IDD funding, which only 15 percent of families receive.¹⁵ In Canada, too, shortcomings in the adult care system mean that many people cannot access the supports

when evaluating what IDD means for them. Parents and siblings of individuals with Down syndrome, for example, have positive assessments of living with them [Brian Skotko et al., “Having a Son or Daughter with Down Syndrome: Perspectives from Mothers and Fathers,” *American Journal of Medical Genetics, Part A* 155 (2011): 2335–47, and “Having a Brother or Sister with Down Syndrome: Perspectives from Siblings,” *American Journal of Medical Genetics, Part A* 155 (2011): 2348–59.

11 Marsha Seltzer et al., “Midlife and Aging Parents of Adults with Intellectual and Developmental Disabilities: Impacts of Lifelong Parenting,” *American Journal on Intellectual and Developmental Disabilities* 116 (2011): 479–99; The Arc, *Family and Individual Needs* 2023.

12 Canadian Association, “Facts on Housing,” Canadian Association for Community Living, “Inclusion of Canadians with Intellectual Disabilities: A National Report Card 2013” (2013); Inclusion Canada, “Position on Income Security for Families” (n.d.).

13 Julie Taylor et al., “Training Parents of Youth with Autism Spectrum Disorder to Advocate for Adult Disability Services: Results from a Pilot Randomized Controlled Trial,” *Journal of Autism and Developmental Disorders* 47 (2017): 846–57; Jaimie Timmons et al., “Managing Service Delivery Systems and the Role of Parents During Their Children’s Transitions,” *Journal of Rehabilitation* 70 (2004): 19–26.

14 The Arc, *Family and Individual Needs* 2023; The Arc, *Family and Individual Needs for Disability Supports: Community Report* 2017 (2018).

15 Braddock, *State of the States* 2017.

they need, particularly residential options, at least not without significant delay. More than 100,000 lack affordable housing, and 433,300 have unmet home care needs for personal support, therapies, respite, and out-of-school programs. Over 40,000 are on wait lists due to unavailable community-based programs.¹⁶ Social services make a real difference in how well caregivers cope, but limited funding and agency openings leave many families without adequate supports to look after their dependent child.

The Shortcomings of Disability Service Systems

Legal mandates in both the US and Canada require that adults with IDD in community care live normalized lives that are as close as possible to that of non-disabled people.¹⁷ They should not be segregated in disability-specific settings but integrated within mainstream society; they should not receive standardized services that agencies already have in place but individualized supports that meet their personal needs. The reality, however, is that adults with IDD often experience narrowed lives in segregated and standardized programs.¹⁸

16 Canadian Association, “Facts on Housing,” Inclusion Canada, “Impact Report 2022–2023” (2023), 18; Inclusion Canada, “Institutionalization of People Labelled with Intellectual or Developmental Disabilities in Long-Term Care” (n.d.), 2.

17 Historically, adults with IDD in North America lived with their families. By the mid-twentieth century, many were housed in large centers that regimented their lives and segregated them from the community. In the 1960s, integrated services began enabling them to live in mainstream society as active citizens. Advocates like Wolf Wolfensberger championed ‘normalization’—the lives of people with IDD should conform to the patterns of nondisabled peers. This requires integration (dispersed services throughout the community), individualization (person-centered services for small groups), and specialization (a range of services to meet varied needs). Laws—the Americans with Disabilities Act and Accessible Canada Act—give adults the right to choice in housing and daytime activities and to participate in community life.

18 We take the term “narrowed lives” from Simo Vehmas and Reeta Mietola, *Narrowed Lives* (Stockholm: Stockholm University Press, 2021). James Gould has written extensively about injustices in US disability services: “Duty, Not Gratitude: The Ethics of Social Support for People with Intellectual Disabilities in the United States,” *Disability and Society* 36 (2020): 1240–60; “Living in Nowheresville: David Hume’s Equal Power Requirement, Political Entitlements and People with Intellectual Disabilities,” *Journal of Philosophy of Disability* 1 (2021): 145–73; “Beggars Can’t Be Choosers: The Rhetoric and Reality of Person-Centered Disability Services in the United States,” *Disability and Society* 39 (2023): 2303–24; “From Policy to Practice: Socio-Ecological Challenges in Implementing the HCBS Settings Rule,” *Journal of Disability Policy Studies* (2024); “A Philosophical Critique of United States Housing Policy for Adults with Intellectual Disabilities,” *Disability and Society* (2024): 1–20.

In the US, custodial, socially-isolated, system-centered, and non-individualized services are typical.¹⁹ Despite their integrated location, many day programs and group homes operate with institution-like practices and have difficulty providing quality supports that are personalized and integrated. Congregate, segregated day centers offer leisure activities but not skills training. The tasks performed in sheltered workshops are rote and mundane; there is little integrated employment or meaningful nonwork activities (such as volunteer jobs or recreation).²⁰ Most group homes operate by custodial models—staff spend time on direct care, not functional learning or quality-of-life activities. Housing is often understaffed, which limits customized support and community outings. Residents engage in solitary projects, especially on weekends; if they do leave home, they go as a group.²¹

In Canada, many adults with IDD are embedded in institutional customs that isolate them and do little to facilitate a good life. The conditions in group homes and day centers reflect the same problems that existed in larger institutions—a lack of individualized support, routinized daily life, deficient community inclusion, and little freedom or choice. People’s days are repetitive and dull, confined to disability-specific locations, determined by care routines rather than social interaction, with few meaningful experiences or skill development. Personalized planning exists for administrative purposes but plays little role in service delivery, which is organized for homogeneous groups and assumes limitations rather than potential for growth or individual interests.²² Physical inclusion in the community does not create social inclusion with voluntary friends or significant engagement in activities. Residents participate in some, but not all, daily living tasks within their homes.²³

In many countries there is a gap between lofty policy statements of normalization and the stunted lives of adults with IDD in the community care system. Their lives are narrowed, not primarily by natural impairments, but by social factors. Government budgets pay private agencies to operate residential and vocational

19 Carli Friedman, *There’s No Place Like Home* (Washington, DC: The Arc of the United States and The Council on Quality and Leadership, 2019); American Network of Community Options and Resources (ANCOR), *The Case for Inclusion 2024* (2024).

20 Doug Crandell, *Twenty-Two Cents an Hour* (Ithaca: Cornell University Press, 2022).

21 Friedman, *There’s No Place Like Home*; ANCOR, *Case for Inclusion 2024*.

22 Canadian Association, “Facts on Housing”; Natalie Spagnuolo, “Building Back Wards in a ‘Post’ Institutional Era: Hospital Confinement, Group Home Eviction and Ontario’s Treatment of People Labelled with Intellectual Disabilities,” *Disability Studies Quarterly* 36 (2016); Natalie Spagnuolo and Kory Earle, “Freeing Our People: Updates From the Long Road to Deinstitutionalization,” Canadian Center for Policy Alternatives (July 4, 2017).

23 Élise Milot et al., “Perspectives of Adults with Intellectual Disabilities and Key Individuals on Community Participation in Inclusive Settings: A Canadian Exploratory Study,” *Journal of Intellectual and Developmental Disability* 46 (2021): 58–66; Jordan Varey, “The Inclusion of Adults with Intellectual Disabilities: A Study of Two Community Based Group Home Service Providers in Saskatchewan,” *Canadian Journal of Disability Studies* 3 (2014): 132.

services. But economic policies emphasizing small government and low taxes undermine these programs. In the US, there is a persistent shortage of direct support professionals. The workforce crisis stems from policies requiring community services, but without adequate funding to implement these mandates. Low wages, scant benefits, and lack of career opportunities create high staff turnover and vacancy rates. The COVID-19 pandemic and Great Resignation accelerated staff churn and program deterioration: 92 percent of agencies struggle to manage existing services and achieve quality standards; 63 percent have discontinued programs and discharged service-users; 55 percent are considering additional closures; 83 percent are refusing new referrals.²⁴ In Canada, too, underfunding and a lack of care workers affect service operations—some agencies cannot provide supports that fit individual needs. Staff earn lower wages than other service employees, causing low retention and high turnover at group homes and day centers.²⁵

In a systems perspective, the narrowed lives of adults with IDD are due to deficiencies in multiple social sectors—families, schools, workplaces, healthcare settings, religious institutions, the community-at-large, and political institutions. Many of the challenges they experience are socially caused and can be socially ameliorated.

Theological Foundation: An Ethic of Hospitality

In addition to being sociologically informed, practical theology must be theologically grounded. A key feature that characterizes God's people in both Hebrew and Christian Scripture is hospitality, which Letty Russell defines as "the practice of God's welcome by reaching across difference to participate in God's actions bringing justice and healing to our world."²⁶ This definition highlights several aspects. First, hospitality is a practice—a habitual, repeated activity at which someone is (or becomes) proficient. Second, hospitality offers welcome—receiving another gladly and with friendliness. Third, hospitality offers God's welcome—as God's representatives, we extend love generously and freely. Fourth, hospitality reaches across difference—embracing strangers, people who are unlike. Fifth, hospitality brings justice and healing—it creates fairness and equity between people, making them whole. Sixth, hospitality targets a world in crisis—assisting those in difficulty or trouble. We cannot care for the stranger without addressing their needs. Russell states that "God's hospitality as a partnership with humankind in

24 ANCOR, *The State of America's Direct Support Workforce Crisis 2022* (2022); National Core Indicators, *State of the Workforce 2022* (2022); President's Committee for People with Intellectual Disabilities, *America's Direct Workforce Crisis* (2017).

25 Spagnuolo and Earle, "Freeing Our People;" Varey, "Inclusion of Adults," 124.

26 Letty Russell, *Just Hospitality* (Louisville: Westminster John Knox, 2009), 19.

the ‘repair of the world’ becomes the mandate as we look for ways to work with one another to transform the world.’²⁷

The Basics of Biblical Hospitality

In ancient times, hospitality was a moral virtue—an ethical excellence permeating a person’s character. Hospitality was also a moral obligation—an ethical duty prescribing a person’s actions. Hospitality was always extended to strangers—people at the margins who were disconnected from key relationships or communities of support, making them vulnerable and in need of care.²⁸ Throughout Scripture, God is the host who welcomes and cares for the stranger. Israel is the stranger whom God rescued from slavery in Egypt, for whom God cared during the wilderness wanderings, eventually providing a homeland. Jesus embraced the stranger, those shunned by people with privilege—Samaritans (John 4:1–42), Gentiles (Matt 8:5–13), lepers (Matt 8:1–4), and outcasts (Matt 9:10–13).

God’s mandate to welcome the stranger in Hebrew Scripture is predicated on the fact that Israel was delivered from captivity and cared for by God (Lev 19:33–34; Deut 10:19). As God’s people, they are to reflect God’s welcoming nature by caring for what Nicholas Wolterstorff calls the “quartet of the vulnerable”—the widow, the orphan, the alien, and the poor.²⁹ Jesus continues God’s hospitality to the marginalized by extending welcome to those who were socially ostracized: tax collectors (Mark 2:15), the Samaritan woman (John 4:1–42), and people with disabilities (Mark 1:40–45; 5:25–34; 10:46–52). The early church practiced hospitality by welcoming those different from themselves into their homes for meals, worship, and fellowship (Acts 2:42–47; 4:32–35). The conversion of Cornelius occurred in the context of hospitality, opening the door for Gentile outsiders to be welcomed into the church (Acts 10:1–48). Mandates to be hospitable are sprinkled throughout Hebrew and Christian Scripture (Lev 19:9–10; Exod 22:21–23; Rom 12:13; Heb 13:2), and stories of hospitality provide examples which the faithful are to emulate.

Hospitality has several important aspects. First, it begins with God, who welcome to humans, the archetypal stranger. Second, hospitality is an outward practice in which God’s welcome is offered to strangers by God’s people. This welcome requires holistic care for physical, emotional, social, and spiritual needs. Third, hospitality is a boundary-breaking activity. Welcoming those we know and are comfortable with is not biblical hospitality. True hospitality is a subversive act in which we reject the prevailing attitudes of suspicion and hostility to strangers and

27 Russell, *Just Hospitality*, 50.

28 Christine Pohl, *Making Room* (Grand Rapids: Eerdmans, 1999), 87.

29 Nicholas Wolterstorff, *Justice: Rights and Wrongs* (Princeton: Princeton University Press, 2008), 75.

act with welcome instead. Fourth, the hospitality of Jesus reflects the in-breaking of God's reign—hospitality to strangers demonstrates inclusion in the kingdom for people on the margins. Fifth, Jesus's hospitality results in new community as strangers move from a place of disconnection to connection and find their place in God's family.³⁰ Sixth, hospitality arises from love. It requires that we see a stranger and respond with empathy and compassion, leading us to welcome them, even when it is not convenient or comfortable. Love undergirds God's hospitality toward us and is the foundation from which we welcome the other.

Hospitality and the Micah Mandate

While many texts could be chosen, the Micah Mandate—a highly regarded seminal text—is a useful template for identifying two particular aspects of hospitality. The historical context of Micah's prophecy is the late eighth century BCE, during the Assyrian period.³¹ The politics of the time—the rich becoming prosperous by exploiting the poor—shaped his message to the southern kingdom of Judah. The overall textual context of chapter 6 is the theme of judgment, salvation, and social critique. The immediate textual context of 6:8 is 6:1–7 (structured as a covenant lawsuit where God presents evidence and renders a verdict against God's people) and 6:9–16 (where God declares judgment on injustice).

In 6:1–5, God rehearses God's covenant faithfulness and self-giving love from exodus to promised land. God then accuses God's people of unfaithfulness—of violating their covenant obligations (in particular, basic duties to the poor). Dominique Gilliard identifies two evils: the merchants' personal corruption was sustained by institutional injustice.³² In 6:6–7, the people answer the charge of unfaithfulness—they will win God's favor through an escalating series of sacrifices. In 6:8, God states what God actually wants—not religious ritual but moral behavior. After delivering them from slavery, God gave Israel specific moral instructions, warning them not to forget what was done for them and to show generosity to others (Exod 22:21; Lev 25:23).³³ Martha Moore-Keish paraphrases God's demand: "Stop offering sacrifices to me and start offering sustenance to

30 Beth Gould Nolson, "From Disconnection to Connection: The Healing Potential of Household Hospitality to the Stranger," *Practical Theology* 17 (2024): 363–75.

31 The majority view is that *Micah* was not written by one author but has a history of composition and formation. Chapters 6–7 are most contested: some scholars think they are a northern text, written by an unknown prophet from the kingdom of Israel. It is also possible that Micah 6 is post-exilic (a retrospective interpretation), not pre-exilic (a prophetic forewarning). See Rainer Kessler, "Micah," in *Oxford Handbook of the Minor Prophets*, ed. Julia O'Brien, 461–71 (Oxford: Oxford University Press, 2021) and Jan Joosten, "YHWH's Farewell to Northern Israel (Micah 6:1–8)," *Zeitschrift für die alttestamentliche Wissenschaft* 125 (2013): 448–62.

32 Dominique Gilliard, "Counteracting Our Privileged Readings of the Biblical Texts," *The Covenant Quarterly* 71 (2013): 50.

33 Gilliard, "Counteracting Privileged Readings," 53.

those who need it most.”³⁴ God reverses the people’s three wrong answers with three imperatives already revealed: to do (actions), to love (affections), and to walk (companionship).

Justice (*mispat*) has an extended meaning covering the entire content of *Torah*—in particular the instructions to look after the powerless so they are not victimized by the powerful.³⁵ Hans Wolff notes that doing justice means “putting into operation a just social order” for the orphan, widow, alien, and all who are oppressed.³⁶ Stephen Dempster agrees: “the word ‘justice’ often occurs together with ‘righteousness,’ and together they point to the practice of justice in society ... to helping those in need” and caring for those unable to care for themselves.³⁷ To do justice is “to be advocates for those whose rights are being denied or violated.”³⁸

Kindness (*hesed*) is a complex behavior that includes loyalty, faithfulness, kindness, love, generosity, mercy, and devotion.³⁹ Bruce Waltke comments: “the practice of *hesed* is closely related to *mispat*: both pertain to the deliverance of an oppressed, weaker party by the stronger party, but whereas *mispat* puts the emphasis on the action, *hesed* puts it on the attitude behind the action.”⁴⁰ Kindness is the disposition of heart that motivates deeds of justice. Practicing *hesed*, Dempster adds, “means being a person of loyalty and faithfulness ... who helps people particularly in their need.... *Hesed* is like justice, a relational term preeminently, but it is more than advocating rights and ensuring fairness and equity, it is more a mode of being where there is a fundamental connection with another person, who is often weaker.”⁴¹

Walking with God suggests a life in harmony with God’s purposes. The word translated “humbly” has semantic associations with wisdom—reflection, discernment, and prudence.⁴² To walk wisely with God, Dempster says, “is to accept God’s vision and values for life.”⁴³ It is “to engage in the things that God does.... This is clearly linked to God’s great desire for God’s people, that they imitate the divine nature and behavior”—the *mispat* and *hesed* which define God’s essence.⁴⁴ Knowing God’s acts of self-giving love, we must live lives of self-giving love.

34 Martha Moore-Keish, “‘Do Justice’: Micah 6:8,” *Journal for Preachers* 33 (2010): 21.

35 Bruce Waltke, *A Commentary on Micah* (Grand Rapids: Eerdmans, 2007), 391.

36 Hans Wolff, cited in Gilliard, “Counteracting Privileged Readings,” 52–53.

37 Stephen Dempster, “Micah,” in *ESV Expository Commentary, Vol VII: Daniel-Malachi*, ed. Iain Duguid et al. (Wheaton: Crossway, 2018), 486.

38 Stephen Dempster, *Micah: The Two Horizons Old Testament Commentary* (Grand Rapids: Eerdmans, 2017), 304.

39 Mark Gignilliat, *Micah: An International Theological Commentary* (London: T&T Clark, 2019), 204.

40 Waltke, *Commentary on Micah*, 394.

41 Dempster, *Micah: The Two Horizons*, 304–305.

42 Waltke, *Commentary on Micah*, 394.

43 Dempster, “Micah,” 486.

44 Dempster, *Micah*, 306, slightly modified.

Juan Alfaro puts it well: God wants people to “listen to the heart of God and God’s desire for mercy and compassion for those in need.” God calls us “to walk with God, seeing things through God’s own eyes and behaving toward the poor in the same manner as God had done in their history.”⁴⁵ There is, Dempster observes, “an inextricable link between these three requirements. As one walks humbly with God, one begins to love kindness and then to practice justice.”⁴⁶

In 6:9–16, God reiterates the accusation (Israel’s social injustice violates the good that God requires) and imposes sentence (disaster through wasted harvests and armed invasion).

The Micah Mandate exists, Mark Gignilliat insists, as a “witness for the sake of future generations regarding the ... will of God for God’s people and the nations.”⁴⁷ As we consider welcome of the stranger through Micah’s mandate, we find two kinds of hospitality. *Kindness-hospitality* involves compassionate care of the stranger. It concerns interpersonal relationships, emotional connection, mutuality, and belonging. *Justice-hospitality* addresses the social and political systems that keep the stranger at a distance. It concerns public action beyond the interpersonal level to bring flourishing to those on the margins.

Micah’s declaration that God requires us to love kindness and do justice shares similarities with Carol Gilligan’s distinction between care and justice. An ethic of care, based on empathy and connection, creates attentive relationships that treat individuals in a personal way. An ethic of justice, based on logic and emotional detachment, appeals to impersonal principles showing concern for humanity in general.⁴⁸ Since both care and justice are important, we require binocular moral vision. We see things with the left eye that the right eye leaves out (and *vice versa*), and so we need both eyes to get a full picture. In the same way, we need both care and justice for full moral understanding and comprehensive action.

Kindness-Hospitality and Justice-Hospitality

Kindness-hospitality and justice-hospitality fit elegantly with socio-ecological theory. Urie Bronfenbrenner posits that life experience is shaped through complex interactions between individual persons and their social environments.⁴⁹ Stacy Simplican and colleagues’ socio-ecological framework, focused on IDD, has five levels.⁵⁰ The *individual* level consists of personal traits of the person: level of dis-

45 Juan Alfaro, *Micah: Justice and Loyalty* (Grand Rapids: Eerdmans, 1989), 69, slightly modified.

46 Dempster, “Micah,” 486.

47 Gignilliat, *Micah*, 36, slightly modified.

48 Carol Gilligan, *In a Different Voice* (Cambridge: Harvard University Press, 1982).

49 Urie Bronfenbrenner, *The Ecology of Human Development* (Cambridge: Harvard University Press, 1979).

50 Stacy Simplican et al., “Defining Social Inclusion of People with Intellectual and Developmental Disabilities: An Ecological Model of Social Networks and Community Participation,” *Research in Developmental Disabilities* 38 (2015): 18–29.

ability, mood, communication, friendliness, and self-motivation. The *interpersonal* level contains relationship networks: family members, paid staff, disabled peers, and nondisabled friends. The *organizational* level involves service agencies, law enforcement, healthcare providers, faith communities, and businesses. The *community* level incorporates residential arrangements, transportation systems, work, and leisure—as well as public attitudes to disabled people. The *social-political* level includes laws, histories of service delivery, state bureaucracies, and budget appropriations. These nested levels shape the lived experience of adults with IDD. A systems perspective suggests that hospitality to them involves comprehensive influence across multiple ecological levels. Kindness-hospitality occurs mostly at the interpersonal and community levels—justice-hospitality happens mainly at the organizational and social-political levels.

Two points are particularly important. First, a socio-ecological approach indicates that both types of hospitality are necessary. Kindness-hospitality alone is not enough: simply caring for people interpersonally does not address the systemic barriers they face in living a quality life. And justice-hospitality alone is not enough: simply standing at a distance and acting publicly on their behalf does not build the close friendships individuals need. As Hans Reinders points out, citizenship (including people in public institutions and spaces) does not provide friendship (being part of other people's lives)—nor does friendship bring about citizenship.⁵¹ Second, there is a natural movement between kindness-hospitality and justice-hospitality. Kindness-hospitality leads to justice-hospitality. Personal acquaintance with the needs of people with IDD and their caregivers motivates political action: proximity to them creates a deep awareness of their needs for personal friendships and public inclusion. Michelle Warren explains: "Proximity gets us so close to the pain of an issue that it radically changes our perspective and demands a deeper response. The longer we stay proximate, the more our perspective is shaped and the more we respond to what needs to be changed. Proximity is transformational."⁵² And justice-hospitality leads to kindness-hospitality: political awareness of injustices people living with IDD experience creates a desire to learn more about them personally. There is two-way interaction, then, between kindness and justice—one cannot exist without the other.

Practical Application: Enacting Hospitality to People Affected by Intellectual Disability

Churches cannot fix the biologically caused challenges that people affected by IDD experience. But they can address socially caused disadvantages. In this section, we engage the research summarized above, leveraging problematic empirical

51 Hans Reinders, *Receiving the Gift of Friendship* (Grand Rapids: Eerdmans, 2008).

52 Michelle Warren, *The Power of Proximity* (Downers Grove: InterVarsity, 2017), 18.

findings to suggest positive solutions. With socio-ecological theory as our guide, we explore micro-level kindness-hospitality and macro-level justice-hospitality.

We begin with kindness-hospitality, which happens through personal relationships and directly meets the needs of people with IDD and their families for friendship, church inclusion, respite, financial assistance, and lifelong support.

Personal Hospitality

Personal hospitality happens through individual friendships. Adults with IDD experience social isolation; many of their activities are solitary and segregated. Up to half are chronically lonely because of negative social attitudes, lack of opportunities for friendship, and skill deficits associated with IDD.⁵³ Most have very few close relationships, and the majority of those are with disabled peers. They often have superficial friendships with housemates they live with (who are not chosen but assigned by agencies) and thin relationships with neighbors or nondisabled people they meet in mainstream society. Their social networks are small: formal contact is with paid professionals while informal contact is with family members. These are relationships of mandatory duty or natural support that focus on the disability, not voluntary friendships that focus on the person.⁵⁴

Adults with IDD long for friendship. Contact theory indicates that friendships are most likely to form when people participate in shared activities based on common interests over a period of time.⁵⁵ Faith communities can address the loneliness disabled people experience. But few receive calls or visits from members of the churches they attend, and few friendships form between disabled and nondisabled people. Participation at potlucks and attendance at social activities do not guarantee that acquaintance becomes friendship.⁵⁶

Church members should choose disabled adults as friends to meet for coffee, bowling, shopping, or a movie. People with IDD are often *known about* (by diagnostic labels that indicate challenges and deficits), but not *known personally* (by

53 Linda Gilmore and Monica Cuskelly, "Vulnerability to Loneliness in People with Intellectual Disability: An Explanatory Model," *Journal of Policy and Practice in Intellectual Disabilities* 11 (2014): 192–99; Sally Robinson and Jan Idle, "Loneliness and How to Counter It: People with Intellectual Disability Share Their Experiences and Ideas," *Journal of Intellectual & Developmental Disability*, 48 (2022): 58–70.

54 Rachel Harrison et al., "Social Networks and People with Intellectual Disabilities: A Systematic Review," *Journal of Applied Research in Intellectual Disabilities* 34 (2021): 973–92; Aafke Kamstra et al., "Informal Social Networks of People with Profound Intellectual and Multiple Disabilities: Relationship with Age, Communicative Abilities and Current Living Arrangements," *Journal of Applied Research in Intellectual Disabilities* 28 (2015): 159–64.

55 Erik Carter et al., "Promoting Inclusion, Social Connections, and Learning Through Peer Support Arrangements," *Teaching Exceptional Children* 48 (2015): 9–18.

56 Erik Carter, "Research on Disability and Congregational Inclusion: What We Know and Where We Might Go," *Journal of Disability & Religion* 27 (2022): 190–91.

distinctive traits like kindness, humor, and gratitude).⁵⁷ To be a person is to have a story, and when stories remain silent, personhood is diminished. Church members must invest time getting to know adults with IDD as unique and complex individuals (perhaps using tools such as Life Maps).⁵⁸ Peer support networks like Circle of Friends and ministry programs like BeFrienders positively impact social inclusion of disabled individuals and friendships between them and nondisabled people.⁵⁹ The Active Mentoring Approach trains volunteers to join with and support disabled adults in community-based sports and arts activities.⁶⁰ Churches can use support programs to create neighborhood inclusion in leisure activity clubs and volunteer groups.⁶¹ Denominations can replicate Friendship House, a shared living arrangement where seminary students and disabled adults eat, pray, learn, and take part in recreation and social activities together.⁶² Parents, too, experience rejection or unwelcome sympathy; many are isolated by the demands of caregiving and the fact that other people cannot relate to their struggles. They also need personal friendships where they can name their struggles and receive encouragement and support.⁶³

Fear and unfamiliarity with people and families affected by IDD can make reaching out difficult. But hospitality propels us into relationships that at first take us out of our comfort zone, that challenge us to leave our center and move to the margins. We must go, Mary Jo Iozzio insists, “not just once or twice... but regularly. You have to show up reliably to be a friend and to be recognized by another as a friend.”⁶⁴

57 Erik Carter, “A Place of Belonging: Research at the Intersection of Faith and Disability,” *Review and Expositor* 113 (2016): 172–73.

58 Jane Clapton, *A Transformatory Ethic of Inclusion* (Rotterdam: Sense Publishers, 2009), 241; Dorothy Atkinson, “Narratives and People with Learning Disabilities,” in *Learning Disability: A Life Cycle Approach*, ed. Gordon Grant et al. (Maidenhead: Open University Press, 2010), 7–18.

59 Sarah Pannone, “One Church’s Response to Welcoming All of God’s Children,” *Journal of Disability & Religion* 21 (2017): 257–79; Mary Schlieder et al., “An Investigation of “Circle of Friends” Peer-Mediated Intervention for Students with Autism,” *The Journal of Social Change* 6 (2015): 27–40; Angela Amado et al., “BeFrienders: Impact of a Social Ministry Program on Relationships for Individuals with Intellectual/ Developmental Disabilities (I/DD),” *Religion, Disability & Health* 17 (2013): 1–26.

60 Milot et al., “Perspectives of Adults.”

61 Geraldine Boland et al., “Social Inclusion Through Making Neighborhood Connections: Experiences of Older Adults With Intellectual Disabilities of Local Volunteering and Leisure,” *British Journal of Learning Disabilities* (2024), 1–13.

62 Friendship House Holland, www.westernsem.edu.

63 Sheena Rolph et al., *Witnesses to Change* (Kidderminster: British Institute of Learning Disabilities, 2005).

64 Mary Jo Iozzio, *Disability Ethics and Preferential Justice* (Washington: Georgetown University Press, 2023), 73. Most denominations have Offices of Disability Inclusion. Parachurch organizations (like All Belong, Bethesda, Friendship Ministries, Joni and Friends, Key Ministry, Nathaniel’s Hope, Special Touch, and Young Life Capernaum) provide training tools for serving families affected by disability. An internet search will bring up dozens of entries on how churches can support families of children and adults with disabilities. For results of the National Organization on Disability’s Accessible Congregations Campaign see Angela Amado

Parish Hospitality

Parish hospitality happens through church-life accommodations within worship services, religious education classes, youth programs, fellowship events, and service projects.⁶⁵ People with IDD face many barriers to participation. They are much less likely to attend religious services than people without disabilities—about half attend regularly—and involvement in youth groups, Sunday School, and social gatherings is much less common.⁶⁶ The participation gap is worse for those with severe conditions, challenging behaviors, complex communication difficulties, and autism.⁶⁷ Many church leaders do not know how best to serve them. Harmful conceptualizations that hinder meaningful inclusion operate in Christian congregations—deficit-based mindsets emphasize the perceived shortcomings of disabled people, resulting in an impulse to fix them or their presumed tragic circumstances.⁶⁸

Carter asserts that “belonging is rooted in relationships. Having people in our lives who know us, like us, accept us, need us, miss us, and love us is at the heart of our well-being.” People experience belonging when they are present, invited, welcomed, noticed, known, accepted, supported, cared for, befriended, needed, and loved.⁶⁹ Chapelstreet Church in Geneva, Illinois provides Masterpiece, a set of programs for family members and individuals impacted by disability. Disabled children are included in typical Sunday School classrooms or in sensory-friendly spaces with developmentally appropriate activities. Disabled adults enjoy worship, social connection, and learning through M-Club. Buddy Break is a respite program for families, while moms and dads groups offer support.⁷⁰ Water Street Church in Guelph, Ontario, is part of Friendship Ministries Canada—a network that helps churches develop programs for people with IDD so they feel welcomed, grow in faith, and share their gifts. Participants sing, play instruments, do crafts, enjoy games, and learn about Jesus.⁷¹ Nick and Matt, both on the autism spectrum, participate in Junior Church activities. James and his wife Jenna host at their small parish.

et al., “Accessible Congregations Campaign: Follow-Up Survey of Impact on Individuals With Intellectual/Developmental Disabilities (ID/DD),” *Journal of Religion, Disability & Health* 16 (2012): 394–419.

65 Carter, “Research on Disability and Congregational Inclusion.”

66 Debra Brucker et al., “Social Capital, Employment, and Labor Force Participation among Persons with Disabilities,” *Journal of Vocational Rehabilitation* 43 (2015): 17–31.

67 Carter, “Research on Disability and Congregational Inclusion,” 8–9.

68 A research meta-review by Gail McMahon-Panther and Juan Bornman (“Persons with Disabilities in the Christian Church: A Scoping Review on the Impact of Expressions of Compassion and Justice on their Inclusion and Participation,” *Journal of Disability & Religion* (2024): 1–28) demonstrates that people with disabilities face many barriers to participation across Christian denominations.

69 Carter, “A Place of Belonging.” This article contains questions that can help congregations operationalize each dimension of belonging.

70 Chapel Street Church, www.chapelstreet.church.

71 Water Street Church; Friendship Ministries Canada, www.friendshipministries.ca.

Inclusion in congregational planning must be intentional, not an afterthought. Churches must honor the “nothing about us without us” mantra of the disability rights movement: the voices of people with IDD and their families must be part of decisions about disability ministry practices. Seminary graduates receive little preparation for including people with IDD within congregational life or responding to spiritual questions resulting from disability experiences. Preaching and religious instruction that define disability as the result of sin, conflate intellect with faith, see the *imago Dei* in terms of ability, or think people with disabilities need special healing, promote outdated ableist perspectives.⁷² Churches must develop a distinctive theology of disability ministry, not simply copy the practices of special education and service agencies.⁷³ Individualized accommodations—personal assistance, behavior supports, and accessible communication—enable participation of youth with IDD. But most parents report that they are not provided; many change their place of worship because their child is not welcomed.⁷⁴ Children and adults with IDD should be mainstreamed into existing educational opportunities and fellowship events, not segregated in separate programs. Worship liturgies should be adapted in multisensory, interactive, and accessible ways that de-emphasize spoken words and emphasize touch, body movement, simple language, music and dance, dramatic readings, visual imagery, ritual actions, and nonverbal sounds.⁷⁵

Inclusion is about equality, not charity, since disabled people have gifts to share, not just needs for care. Presence (attendance at religious gatherings) cannot be equated with participation (involvement in program activities). Adults with IDD, Carter says, should be “volunteering as an usher or greeter, assisting with aspects of a worship service (e.g., reading Scripture, leading a prayer), joining the choir or worship team, visiting those who are sick or homebound, helping in the nursery or with the children’s program, assisting in community outreach programs, serving on a committee, praying with and for others.”⁷⁶ Hospitality moves congregations beyond ministry to disabled adults into ministry by them—it makes space for them to use their unique strengths to serve others.⁷⁷ Beth’s friend Jill sometimes reads Scripture in public worship, and David volunteers

72 Carter, “Research on Disability and Congregational Inclusion,” 23; “Place of Belonging,” 4.

73 Bethany Fox, *Disability and the Way of Jesus* (Downers Grove: InterVarsity, 2019), chapter 7.

74 Carter, “Research on Disability and Congregational Inclusion,” 10 and 16.

75 Brian Brock [*Disability: Living Into the Diversity of Christ’s Body* (Grand Rapids: Baker Academic, 2021)] and Frances Mackenney-Jeffs [*Reconceptualizing Disability for the Contemporary Church* (London: SCM Press, 2021)] reimagine disability inclusion for the British church. Fox [*Disability and Way of Jesus*], Lamar Hardwick [*Disability and the Church* (Downers Grove: InterVarsity, 2021)], Amy Kenny [*My Body is Not a Prayer Request* (Grand Rapids: Brazos, 2022)] and Erin Raffety [*From Inclusion to Justice* (Waco: Baylor University Press, 2022)] reimagine disability inclusion in the American church.

76 Carter, “Place of Belonging,” 5.

77 Raffety, *From Inclusion to Justice*.

with James's parish at local food ministries. These gifts should be welcomed and developed, since through their talents, people with IDD enrich the lives of others and contribute to their congregations.

Practical Hospitality

Practical hospitality happens through what Marty Richards calls “caresharing”—an approach to caregiving where the well-being of everyone involved is nurtured.⁷⁸ Parents looking after children with IDD report higher-than-average rates of chronic stress, anxiety, and depression. They are at increased risk of marital disruption, family dysfunction, and adverse physical and mental health conditions. Resilient families adapt to caring for a disabled member; promoting resilience requires providing resources to help them meet everyday challenges.⁷⁹ Most families indicate that a support group, respite care, spiritual counseling, and financial support would be helpful. But in the US, only 10 percent of congregations offer some form of care. The vast majority of parents indicate that practical support is not available from their congregation.⁸⁰

Practical hospitality happens through *respite care*. Family members are often fatigued and stressed from the time and energy involved in looking after their dependent loved one. Since nonstop caregiving takes a physical and psychological toll, parents and siblings most need respite—regular breaks from their responsibilities, time to rest and recharge. But respite care is hard to find in the US; for Canadian families, it is also complicated to access respite supports that allow participation in community and employment.⁸¹ Churches can provide multiple forms of respite—but fewer than 10 percent do.⁸² In location, it can be in-home respite (in the disabled person's home or the host's home) or facility-based respite (in a church building or community facility). In length, it can be daytime, overnight, or weekend. Congregations must initiate respite since families will seldom ask for help.

Practical hospitality also happens through *financial assistance*. Parents of children with IDD struggle economically—mothers in particular experience tremendous financial burdens, job-related difficulties, loss of income, and unreimbursed

78 Marty Richards, *Caresharing* (Woodstock: Skylight Paths, 2009).

79 David McConnell and Amber Savage, “Stress and Resilience Among Families Caring for Children with Intellectual Disability: Expanding the Research Agenda,” *Current Developmental Disorders Report* 2 (2015): 100–109; Emily Auerbach et al., “Stress: Family Caregivers of Children with Disabilities” (Storrs: University of Connecticut Collaboratory on School and Child Health, November 2019).

80 Carter, “Research on Disability and Congregational Inclusion,” 14; “A Place of Belonging,” 175.

81 The Arc, *Family and Individual Needs 2023*; Canadian Association, “Inclusion of Canadians.”

82 Carter, “A Place of Belonging,” 176.

out-of-pocket expenses.⁸³ Families experience financial hardship because caregiving hinders employment and because they must pay for mobility devices, assistive technology, medical care, or respite services. Amy Kenny calls attention to these extra costs that society charges disabled people. Churches and individual members should ensure that no family bears this “disability tax” alone. They can pay for things like speech therapy, power chairs, and adaptive sports equipment.⁸⁴

Finally, practical hospitality happens through *circles-of-support* planning. Parents fear for the future of their child when they can no longer provide care or supervise out-of-home services. They worry that quality of care will diminish, that abuse or neglect might occur, that the person will not have friends and social activities, and that they will have to live somewhere they do not want to. Churches can assist parents by creating a circle of support that will step into this role when they no longer can. This network of people gets to know the individual with IDD, identifies the parents’ dreams for their child’s life, and creates a plan to oversee services and advocate for their future care. Churches might establish a formal micro-board charged with ensuring that the person with IDD continues to live as rich a life as possible. This circle of support reassures parents that services essential to their child’s welfare will be maintained when they can no longer provide care or oversight.⁸⁵

Churches can express kindness-hospitality directly in these personal and parish-based ways. Now we turn to justice-hospitality, which happens through public action that indirectly meets needs through service agency partnerships and political advocacy.

Public Hospitality

Public hospitality happens when God’s people reach out beyond themselves to promote the good of every person, especially the vulnerable. The church is *internally relational*—a community of people in friendship with one another. It practices life together—an intimate participation in each other’s lives, including bearing burdens (Gal 6:2). The church is also *externally relational*—commissioned to take God’s self-giving love into the world. Since Jesus acted on behalf of others, his mission of serving those in need must be its mission in social life (Gal 6:10). Love of neighbor requires public action. Executing justice takes three forms,

83 Devender Banda et al., “A Qualitative Study of Financial Concerns of Mothers of Adults with Intellectual and Developmental Disabilities,” *International Journal of Developmental Disabilities* 70 (2022): 857–64; Barbara Saunders et al., “Financial and Employment Impact of Intellectual Disability on Families of Children with Autism,” *Families, Systems, & Health* 33 (2015): 36–45.

84 Kenny, *My Body is Not a Prayer Request*, 63.

85 Carter, *Including People with Disabilities in Faith Communities* (Baltimore: Paul H. Brookes, 2007), 130–133; Jennifer David et al., “Networks of Support: Micro-boards for Children with Intellectual Disability,” *Journal of Intellectual and Developmental Disability* 49 (2024): 373–75.

Wolterstorff says: to not deprive people of basic human goods, to protect people from such deprivation, and to aid people when deprivation occurs.⁸⁶

Public hospitality happens through *organizational partnerships*. Service agencies deliver vocational programs and residential housing. In the US, Special Recreation Associations provide leisure activities and recreation experiences—Special Olympics hosts organized sports. In Canada, Recreation and Parks Associations offer a variety of *sport, recreation and arts programs*—*Special Olympics and Sport for Life* provide sports and exercise activities. Best Buddies International hosts volunteer programs helping people with IDD build friendships, find integrated employment, and live independently. Many Christian denominations operate day activity and housing services—most well-known is L’Arche Communities—but few congregations have partnerships with local service agencies.⁸⁷ Congregations should come alongside them. All can use financial support and volunteer help with service-user activities like cooking, gardening, craft-making, and sports coaching. Churches can adopt a group home—regularly providing dinner and interacting with residents. Faith communities can make financial grants to service agencies for assisting direct care staff, who are not well paid, with small-dollar loans for expenses like unexpected car repairs. Employee assistance like this increases retention and reduces staff turnover. Finally, adults with IDD who live in out-of-home settings fall outside the ordinary outreach efforts of congregations. Churches can help secular service agencies identify and meet the spiritual needs of their service-users.⁸⁸

Public hospitality also happens through *employment support*. Work is more than paid employment; it includes a range of activities such as caring (for others, home, natural environments), volunteering (community service), and artistic expression.⁸⁹ Meaningful work provides a sense of belonging, contribution, social status, purpose, identity, fulfillment, and income. Most adults with IDD, many of whom would like to work, are jobless. In the US, only 16 percent of people receiving public services are competitively employed. Most work part-time at repetitive manual jobs with low income and negligible benefits.⁹⁰ Only 12 percent are employed full-time/full-year; the majority perform rote jobs for subminimum wages in segregated workshops or exploitative community businesses like

86 Nicholas Wolterstorff, *Until Justice and Peace Embrace* (Grand Rapids: Eerdmans, 1983), 84.

87 Carter, “Research on Disability and Congregational Inclusion,” 24.

88 Carter “A Place of Belonging,” 171.

89 Maria Lyons, “Rethinking Work in Relation to Community Inclusion,” in *Community Care and Inclusion*, ed. Robin Jackson and Maria Lyons (Edinburgh: Floris, 2016), 166–80.

90 Dorothy Heirsteiner et al., “Working in the Community: The Status and Outcomes of People with Intellectual and Developmental Disabilities in Integrated employment-Update2-National Core Indicators Data Brief” (Cambridge: Human Services Research Institute, 2016); Jean Winsor et al., “State Data: The National Report on Employment Services and Outcomes” (Boston: University of Massachusetts Boston, Institute for Community Inclusion, 2017).

Goodwill Industries.⁹¹ In Canada, the employment rate for people with IDD is 26 percent—nearly all are paid minimum wage and few work full-time. Thousands remain in facility-based settings that promise, but rarely deliver, job training.⁹² More could enter ordinary jobs if given the chance; they can learn job skills and be productive with the right tasks and supports. Programs such as Discovering Personal Genius identify a person's strengths and interests, then determine how best to support them in a real job. Customized employment adapts the type of job or task demands to meet the needs of both employer and worker.⁹³ Many denominations operate hospitals, nursing homes, and schools—all of which could provide employment opportunities and job training. Local churches can hire individuals for janitorial or clerical tasks. Personal connections are a main way people find jobs—many church members own small businesses, work at large companies, or do charity volunteering. Putting Faith To Work helps congregations use their extensive social networks to connect disabled job-seekers to meaningful employment and volunteer opportunities.⁹⁴ Churches can also establish ride-share programs. Transportation is a significant issue for many people with IDD who do not drive or have trouble using public transportation.⁹⁵

Political Hospitality

Political hospitality happens through governmental advocacy. Three macrosystem factors in the US and Canada negatively impact adults with IDD. *Deficient funding* harms them. Underinvestment by federal and state/provincial governments, resulting in a lack of critical supports, has persisted for decades. Integrated and individualized programs increase financial costs to agencies, but reimbursements have not been raised to offset the additional expense. *Inadequate system capacity* harms adults with IDD. Because of long wait lists, many are awarded funding only to find that there are no group home or day center openings. Obtaining services, especially for individuals in rural areas and with complex needs, is often impossible. Things can be desperate for older adults needing emergency placement.⁹⁶ *Unstable staffing* harms service-users. Knowledgeable staff provide better care, while inexperienced staff compromise outcomes. Staff shortages have occurred for many years—mainly because agencies are not reimbursed enough to offer

91 Crandell, *Twenty-Two Cents*, 95–104.

92 Spagnuolo and Earle, “Freeing Our People.”

93 Crandell, *Twenty-Two Cents*, 136–41 and 170–73. Randy Lewis [*No Greatness Without Goodness* (Carol Stream: Tyndale, 2014)] explains how—inspired by a Christian senior vice president—Walgreens Retail Pharmacies employs a workforce that is 10 percent people with disabilities.

94 Putting Faith To Work, www.faithanddisability.org.

95 Carter, *Including People with Disabilities*, 132–33.

96 Residential Information, *Long-Term Supports*. Because of a lack of adequate funding and specialized staff, many Illinois agencies cannot serve people with IDD and intersectional needs—medical, behavioral and physical (Caitlin Crabb et al., “Community Capacity Report 6.2.2022,” Illinois Department of Human Services (June 2022)).

competitive wages—but are particularly acute now.⁹⁷ In the US and Canada, adults with IDD are disadvantaged by these political factors that negatively impact their welfare.

God's dream for human persons is *shalom*—well-being in every area of life. God's concern for the social-political order is found throughout Scripture. Israel's laws mandate special care for vulnerable members of the community (Lev 19:10–15). The prophets' criticism calls Israel to a politics of justice and an economics of equity (Isa 1:11–17). Mary the mother of Jesus describes God's social overturning where the high are cast down and the low lifted up (Luke 1:46–53). Jesus outlines his mission to meet human needs (Luke 4:18–19) and threatens judgment according to works of mercy to the vulnerable (Matt 25:31–46). Love of neighbor goes beyond charity to political action that addresses systems which cause disadvantage.

Government is ordained by God to protect the rights of individuals and care for those who cannot care for themselves. This includes people with IDD, many of whom require state-funded services. Christians should *vote* for politicians who support progressive legislation and generous funding for disability services.⁹⁸ During election season, they can find out from IDD organizations like The Arc of the United States and Inclusion Canada which candidates are disability friendly. Congregations and individuals should *advocate* for public policies and adequate funding to meet the needs of people with IDD, their families, and service agencies. Action alerts by disability organizations can be found online; these guides make it easy to contact government representatives. Churches can post information links on their websites and in their newsletters.

These are just a few of the many ways that faith communities can enact kindness-hospitality and justice-hospitality to individuals and families affected by IDD.

Conclusion

Calvary Lutheran Church of Woodale, Illinois, offers drop-off respite care events regularly on Saturday afternoons to families caring for someone with IDD. Trained volunteers provide lunch and structured programs while families get a break from their responsibilities in order to refresh their hearts and minds. One mom, Betsy, brings her daughter. Lisa enjoys the activities and attention she receives, especially from teens who talk with her and make her feel welcome.⁹⁹ Kingsway Baptist Church in Etobicoke, Ontario, also has a respite ministry. One Saturday evening

97 ANCOR, *State of America's Direct Support Workforce Crisis 2022*; National Core Indicators, *State of the Workforce 2022*.

98 James Gould, "Devouring David," *Reformed Journal Blog* (May 17, 2025), www.reformedjournal.com.

99 Calvary Lutheran Church, www.calvarywoodale.net.

a month, parents of children with IDD can drop all their kids off, go on a date, or have time to recharge. Parents are delighted: “I can’t remember when we were last out,” one says, “we can’t believe it’s free.”¹⁰⁰

Practical theology, James Woodward and Stephen Pattison state, “is concerned with actions, issues, and events that are of human significance in the contemporary world.”¹⁰¹ It emphasizes lived theology—constructive action based on religious conviction. The church’s ethical imperative, prophetic calling, and social witness is—in Dempster’s words—“doing *mispat* from a *hesed*-filled heart.”¹⁰² Faith communities must *welcome* people with IDD and their caregivers through personal relationship and *defend* them through public action. Despite biblical imperatives to love the neighbor, welcome the stranger, and recognize God’s image in everyone, empirical evidence indicates that churches are uneven in supporting people affected by IDD. The suggestions we have made can help congregations, in Carter’s words, shift from the *why* of inclusion to the *how* of inclusion.¹⁰³

As we noted earlier, there is a natural movement between kindness-hospitality and justice-hospitality. *Kindness-hospitality leads to justice-hospitality*. Personal acquaintance with the needs of disabled people and their caregivers (family and professional) motivates public action on their behalf. *And justice-hospitality leads to kindness-hospitality*. Awareness of social injustices that people and families affected by IDD experience creates a desire to learn more about them personally. These two kinds of hospitality constitute the hard hospitality of vigorous action, not the easy hospitality of casual concern.¹⁰⁴

In order to perform kindness-hospitality, Christians must have personal knowledge of individuals and families affected by IDD. In order to provide justice-hospitality, Christians must have social knowledge of disability systems and political institutions. Education, then, is necessary for effective hospitality. Churches need to educate about the challenges of IDD both within their congregations and through forums for the general public. Parishes can learn the needs in their communities by visiting service agencies and consulting with parent groups. In the US, they can take advantage of Developmental Disabilities Awareness Month and National Family Caregivers Month to host informational speakers and workshops. In Canada, churches can celebrate Community Living Month, National Developmental Disabilities Awareness Month, and National Caregiver Month. Awareness

100 Disability and Faith, “Touching Lives in Toronto: rEcess Respite at Kingsway Baptist” (n.d.).

101 James Woodward and Stephen Pattison, “An Introduction to Pastoral and Practical Theology,” in *The Blackwell Reader in Pastoral and Practical Theology*, ed. James Woodward and Stephen Pattison (Oxford: Blackwell, 2000), 7.

102 Dempster, *Micah*, 306.

103 Carter, “Place of Belonging,” 179.

104 Carter, *Including People with Disabilities*, 29.

toolkits and fact sheets are available from national and local disability organizations.

Without accurate information, Christians cannot live out hospitality. But while education is important, knowledge does not always move people to action. In addition to knowing about the needs of people with IDD, nondisabled people must become proximate to them, their family caregivers, and service systems. The church needs an enlarged imagination where hospitality is both personal and systemic. It must help change the culture by practicing kindness-hospitality (creating internally inclusive churches that meet individual needs) and by extending justice-hospitality (becoming externally collaborative churches that partner with social institutions). The welcome of Jesus must be expressed to adults with IDD, their families, and social care agencies, at all socio-ecological levels, so they experience normalized lives and share fully in the joy of community.