INCLUSION IN WORSHIP

A Ministry to Welcome Worshippers of All Abilities as Active Participants in Parish Life

INCLUSION REPRESENTATIVE RESOURCE BOOKLET
Fifth Roman Catholic Edition
DEDICATION

This resource is dedicated with gratitude to the late Cardinal Joseph Bernardin and Father Henri Nouwen who inspired the Inclusion in Worship Ministry of Pathways.org at the Conference on Inclusion, April 22, 1996, to the late Cardinal Francis George, Archbishop of Chicago, for his support and leadership, to Cardinal Blase Cupich for his desire to carry on the inclusion in worship legacy of his predecessors and to make inclusion part of the very fabric of the Roman Catholic Archdiocese of Chicago, to the Pathways.org Inclusion In Worship Round Table of Advisors for their guidance and to the pastors and Inclusion Representatives who work to make their parishes accessible and welcoming to parishioners of all abilities.

ACKNOWLEDGEMENTS

We wish to thank Grace Harding, former director of the Department for Persons with Disabilities, Diocese of Pittsburgh, Pennsylvania and the Diocese of Allentown, Pennsylvania for sharing their Parish Advocate Handbooks with Pathways.org. Their publications acknowledged the following: Eastern Paralyzed Veterans of America, National Catholic Partnership on Disability, National Pastoral Life Center, Diocese of Wichita, Diocese of Boston, Liberty Resources, Research and Training Center on Independent Living.

This resource was created at the request of Inclusion Representatives in the Roman Catholic Archdiocese of Chicago. If you have information that you would like to add to this booklet, please submit by email to Joanne Meyer, Program Manager, at jmeyer@pathways.org or call 708-922-9455.

ON THE COVER

The icon of the Holy Trinity by Rublev was selected for the Inclusion Awareness Day prayer card and our cover because it is a source of meditation on the Trinity, hospitality and inclusion. In his book, Behold the Beauty of the Lord: Praying with Icons, Father Henri Nouwen explains that icons do not reveal themselves at first site but only gradually, after patient, prayerful reflection. They draw us into closer communion with God. Nouwen describes the Trinity icon as an invitation to know God, not through our intellect, but through our hearts. He writes, “As we place ourselves in front of the icon in prayer, we come to experience a gentle invitation to participate in the intimate conversation that is taking place among the three divine angels and to join them around the table.” Nouwen observes that the icon beckons us to enter a house of love that “has no boundaries and embraces everyone who wants to dwell there.” The image of the three figures extends beyond the picture to include the viewer. The icon invites each of us to join the three figures to complete the image. We are all welcome to participate. We are all invited to take our place at the Table. We are all included.

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“Many parishes have already taken steps in designing spaces for greater accessibility. Together we continue our efforts to make our places of worship even more welcoming for full participation in parish life.

Blase Cardinal Cupich  
Archbishop of Chicago  
2016 Inclusion Awareness Day Letter to Parishes
OVERVIEW OF THE INCLUSION IN WORSHIP MINISTRY
HISTORY OF THE INCLUSION IN WORSHIP MINISTRY

Cardinal Joseph Bernardin and Father Henri Nouwen generously gave their insight and guidance to the Inclusion in Worship Ministry, which was inaugurated at St. Monica’s Catholic Church on April 22, 1996 at the Inclusion in Worship Conference sponsored by Pathways.org in partnership with the Archdiocese of Chicago. Cardinal Bernardin called the conference in response to a youth’s unfulfilled desire to serve as an altar boy. His parish leaders did not know how to include him because he used a walker and the altar was not accessible. Parishioners of all abilities, including this young man, inaugurated their liturgical ministries at the Eucharist at the historic conference on inclusion. After the conference, at Cardinal Bernardin’s request, Pathways.org created the Open Hearts, Open Minds, Open Doors video and Idea Guide. In both publications practical ways congregations can involve worshippers with disabilities are presented. Before his death, Cardinal Bernardin also inaugurated Inclusion Awareness Day, an annual event to keep inclusion on the forefront of parish life.

His Eminence Francis Cardinal George, Archbishop of Chicago, gave his blessing to the Inclusion In Worship Ministry and Inclusion Awareness Day in 1997. In 1998 the annual Open Hearts Awards cash grants were funded by Pathways.org to assist parishes with access projects. In 2001 Cardinal George called for parish Inclusion Representatives to assist pastors with implementing the Inclusion in Worship ministry. Pathways.org is currently coordinating the efforts of over 120 Parish Inclusion Representatives. Inclusion Representatives, under the direction of their pastors, reach out to welcome and include parishioners of all abilities, coordinate Inclusion Awareness Day celebrations and submit nominations for Pathways.org Open Hearts Awards grants.
His Eminence Blase Cardinal Cupich, Archbishop of Chicago, continued the legacy of his predecessor Cardinals, endorsing the Inclusion In Worship ministry, Inclusion Awareness Day and the Open Hearts Awards grants. It is his wish that the Archdiocese of Chicago and its agencies provide accessible and inclusive environments where individuals of all abilities can share their gifts. In 2016, the 20th Anniversary of Inclusion in Worship, Cardinal Cupich asked that parishioners of all abilities be offered the same respect and opportunity to participate. “Together we continue our efforts to make our places of worship even more welcoming...”

PUBLICATIONS

In addition to Open Hearts, Open Minds, Open Doors video and Idea Guide, the 1999 Open Hearts, Minds and Doors: Embodying the Inclusive and Vulnerable Love of God by then Father Robert Barron and Father Donald Senior was published with the National Federation of Priests’ Councils. That same year the Different Gifts, But the Same Spirit series of lesson plans for elementary, junior high and high school students were published by Pathways.org. The lesson plans teach students about the gifts that everyone brings to their faith community. In 2006 Pathways.org released Father Henri Nouwen’s complete keynote address The Vulnerable Journey on DVD and CD. In 2013 our videos and print publications were made available online at www.InclusionInWorship.org. In 2017 the Pathways.org Different Gifts, Same Spirit lesson plans were redesigned and published by Loyola Press as a resource for their Adaptive Finding God catechetical program.

INCLUSION IN WORSHIP WEBSITE RESOURCES

Open Hearts Open Minds Open Doors video

Featuring Joseph Cardinal Bernardin of Chicago and noted Dutch theologian and author, Father Henri Nouwen, explaining useful ways to include persons with disabilities in worship (25 minutes).
INCLUSION IN WORSHIP WEBSITE RESOURCES (cont’d.)

Open Hearts Open Minds Open Doors Idea Guide

A series of ten questions in the areas of affirmation, communication and accessibility to helps congregations to see how they can be accessible and inclusive.

The Vulnerable Journey video

Father Henri Nouwen’s powerful keynote delivered at the 1996 “That All May Worship” conference (50 minutes).

Opening Hearts, Minds and Doors: Embodying the Inclusive and Vulnerable Love of God

An examination of Father Henri Nouwen’s theological framework for the Inclusion In Worship Ministry by Father Robert Barron and Father Donald Senior, published in conjunction with the National Federation of Priests’ Councils and based on the Open Hearts video. (37 pages)

Different Gifts, Same Spirit: Creating an Inclusive Learning Community Lesson Plans

Lesson plans for religious educators that teach students age 8 to 18 about the gifts received when people with disabilities are included. Includes a Family Guide, Director’s Guide and Teacher’s Guides in one publication from Loyola Press.

Inclusion In Worship Handouts

Educational handouts with inclusion tips in the areas of affirmation, communication and accessibility, a Facilities Survey, Survey of Congregant Needs, bulletin items and Inclusion Awareness Day planning materials available for downloading at www.InclusionInWorship.org.

FOR MORE INFORMATION AND TO DOWNLOAD THE INCLUSION IN WORSHIP GENERAL BROCHURE GO TO WWW.INCLUSIONINWORSHIP.ORG
INTERFAITH MOVEMENT

From inception, the Inclusion in Worship ministry has been an interfaith movement. In 1998 Pathways.org partnered with the Chicago Rabbinical Council on the production of *Seth’s Bar Mitzvah*, a video telling the story of a young man’s inclusion in his synagogue as he prepares for his bar mitzvah. In 2007 the Greek Orthodox Metropolis of Chicago embraced the Inclusion In Worship ministry and joined Pathways.org in raising awareness to the need for access and inclusion in their parishes. His Eminence Metropolitan Iakovos’ inaugurated Inclusion Awareness Day in the Greek Orthodox Metropolis of Chicago the same year.

OPEN HEARTS ROUND TABLE OF ADVISORS

The activities of the Inclusion In Worship Ministry are guided by an interfaith Round Table of clergy and lay advisors from the Chicago area.

- Most Reverend Robert Barron, Auxiliary Bishop, Santa Barbara Pastoral Region, Archdiocese of Los Angeles, CA
- Reverend Jeremiah Boland, Pastor, Our Lady of Perpetual Help, Glenview, IL
- Very Reverend John Canary, Retired Vicar General, Roman Catholic Archdiocese of Chicago, IL
- Reverend Claudio Diaz, Pastor, St. Aloysius, Chicago, IL
- Reverend Robert Heidenreich, Coordinator for Ministerial Review and Priest's Programs, Archdiocese of Chicago Office of Diocesan Priest's Personnel
- Mrs. Kelly Horne, Inclusion Representative, Ss. Faith, Hope and Charity, Winnetka, IL
- Reverend Tom Hurley, Pastor, Old St. Patrick’s, Chicago, IL
- Reverend David Jones, Pastor, St. Benedict the African, Chicago, IL
- Mrs. Sheila McLaughlin, Director, Bernardin Center, Catholic Theological Union, Chicago, IL
- Rabbi Debra Newman Kamin, member at Large, Am Yisrael Congregation, Winnetka, IL
OPEN HEARTS ROUND TABLE OF ADVISORS (cont’d)

- Reverend Martin O’Donovan, Pastor, Ss. Faith, Hope and Charity, Winnetka, IL
- His Grace Bishop Demetrios of Mokissos, Greek Orthodox Metropolis of Chicago
- Reverend Paul Rutgers, Chicago Council of Religious Leaders
- Reverend Donald Senior, Retired President, Catholic Theological Union, Chicago, IL
- Reverend Kenneth Simpson, Archdiocese of Chicago Vicar for Professional and Pastoral Development of Priests
- Monsignor Kenneth Velo, Senior Administrator for Catholic Collaboration, DePaul University, Chicago, IL
- Reverend John Wall, President, Catholic Extension Society, Chicago, IL

Inclusion In Worship Round Table Members from left to right Reverend Robert Heidenreich, Reverend David Jones, Bishop Demetrios of Mokissos, Reverend Jeremiah Boland, Reverend Jack Wall at the 2013 Pathways.org Anniversary Dinner.
THEOLOGICAL FOUNDATION OF THE INCLUSION IN WORSHIP MINISTRY
THE VULNERABLE JOURNEY

Father Henri Nouwen laid the spiritual and theological foundation for the Inclusion In Worship ministry with his keynote address *The Vulnerable Journey* at the 1996 Pathways.org Conference on Inclusion In Worship. In his moving and personal talk, Nouwen explains lessons he learned while living in a L’Arche community in Toronto Canada and caring for Adam, a man with significant disabilities. Adam taught Henri that one’s ability to give and receive love is what makes us truly human and that being able to walk or talk or eat by yourself or give lectures is not a criterion for the ability to love. Adam helped Henri to realize that the vulnerable Jesus and the most vulnerable members of our worshipping communities belong at the center of the Eucharist and the center of church life. The gifts of individuals with disabilities, especially those with significant disabilities, can transform our communities of faith. It is in recognizing our mutual vulnerabilities that we form a community of love and draw closer to God. If we fail to recognize the gifts of the most vulnerable in our worshipping communities, the church becomes an organization of power and manipulation. To prevent that, our local churches must stay grounded in the realization that we all have disabilities and we are closest to God when we are willing to be vulnerable.

“You have to rediscover that the church is a fellowship of the weak, that the church is a place where God shows his unconditional love through poverty, the poverty of Jesus and the poverty of the followers of Jesus, and that the most poor and the most weak belong right in the center, right in the heart.”

Henri Nouwen

*The Vulnerable Journey*

View the Vulnerable Journey online at www.InclusionInWorship.org.
SCRIPTURE

All Christian Ministry is based on the ministry of Jesus. There are over 25 accounts of Jesus reaching out to people with disabilities in the New Testament. In these stories we see Jesus’ special concern for people with disabilities and his desire to restore them to the community. Jesus’ caring attitude toward individuals with disabilities affirmed their dignity and worth. As Inclusion Representatives we follow Christ’s example of ministry as we reach out to individuals with disabilities in our faith communities.

If we examine the gospel narratives* where Jesus interacted with people with disabilities we see that:

- Jesus felt comfortable going to places where people with disabilities gather
- Jesus approached people with disabilities when he saw them
- Jesus asked people with disabilities what they wanted rather than making assumptions
- Jesus used healing touch to connect with people with disabilities
- Jesus took people with disabilities aside to interact on a personal basis
- Jesus used prayer as the foundation for his ministry
- Jesus continued to minister to people with disabilities in the face of opposition

*The translations reflect the attitudes of the times when they were written.

Jesus visits a place where people with disabilities gather and asks a man who had been ill for 38 years, “Do you want to be well?”

John 5:1-9 1After this, there was a feast of the Jews, and Jesus went up to Jerusalem.a 2Now there is in Jerusalem at the Sheep [Gate] a pool called in Hebrew Bethesda, with five porticoes. b 3In these lay a large number of ill, blind, lame, and crippled. c 4One man was there who had been ill for thirty-eight years. 5When Jesus saw him lying there and knew that he had been ill for a long time, he said to him, “Do you want to be well?” 7The sick man answered him, “Sir, I have no one to put me into the pool when the water is stirred up; while I am on my way, someone else gets down there before me.” 8Jesus said to him, “Rise, take up your mat, and walk.” 9Immediately the man became well, took up his mat, and walked
Jesus calls to a woman with scoliosis and lays his hands on her

Luke 13:10-17 10He was teaching in a synagogue on the sabbath. 11And a woman was there who for eighteen years had been crippled by a spirit; she was bent over, completely incapable of standing erect. 12When Jesus saw her, he called to her and said, “Woman, you are set free of your infirmity.” 13He laid his hands on her, and she at once stood up straight and glorified God.

Jesus asks a man who is blind, “What do you want me to do for you?”

Luke 18:35-43 (also Mark 10:46-52) 35Now as he approached Jericho a blind man was sitting by the roadside begging, 36and hearing a crowd going by, he inquired what was happening. 37They told him, “Jesus of Nazareth is passing by.” 38He shouted, “Jesus, Son of David, have pity on me!” 39The people walking in front rebuked him, telling him to be silent, but he kept calling out all the more, “Son of David, have pity on me!” 40Then Jesus stopped and ordered that he be brought to him; and when he came near, Jesus asked him, 41“What do you want me to do for you?” He replied, “Lord, please let me see.” 42Jesus told him, “Have sight; your faith has saved you.” 43He immediately received his sight and followed him, giving glory to God. When they saw this, all the people gave praise to God.

As Inclusion Representatives we follow Christ’s example of ministry as we reach out to individuals with disabilities in our faith communities.
**Jesus asks two men who are blind, “What do you want me to do for you?”**

Matthew 9:27-31 (also Matthew 9:30-33) 30As they left Jericho, a great crowd followed him. 30 Two blind men were sitting by the roadside, and when they heard that Jesus was passing by, they cried out, “[Lord,] Son of David, have pity on us!” 31 The crowd warned them to be silent, but they called out all the more, “Lord, Son of David, have pity on us!” 32 Jesus stopped and called them and said, “What do you want me to do for you?” 33 They answered him, “Lord, let our eyes be opened.” 34 Moved with pity, Jesus touched their eyes. Immediately they received their sight, and followed him.

**Jesus heals a boy with epilepsy, takes his hand and helps him rise to stand**

Mark 9:14-29 (also Luke 9:37-43 and Matthew 17:14-21) 14 When they came to the disciples they saw a large crowd around them and scribes arguing with them. 15 Immediately on seeing him, the whole crowd was utterly amazed. They ran up to him and greeted him. 16 He asked them, “What are you arguing about with them?” 17 Someone from the crowd answered him, “Teacher, I have brought to you my son possessed by a mute spirit. 18 Wherever it seizes him, it throws him down; he foams at the mouth, grinds his teeth, and becomes rigid. I asked your disciples to drive it out, but they were unable to do so.” 19 He said to them in reply, “O faithless generation, how long will I be with you? How long will I endure you? Bring him to me.” 20 They brought the boy to him. And when he saw him, the spirit immediately threw the boy into convulsions. As he fell to the ground, he began to roll around and foam at the mouth. 21 Then he questioned his father, “How long has this been happening to him?” He replied, “Since childhood. 22 It has often thrown him into fire and into water to kill him. But if you can do anything, have compassion on us and help us.” 23 Jesus said to him, “‘If you can!’ Everything is possible to one who has faith.” 24 Then the boy’s father cried out, “I do believe, help my unbelief!” 25 Jesus, on seeing a crowd rapidly gathering, rebuked the unclean spirit and said to it, “Mute and deaf spirit, I command you: come out of him and never enter him again!” 26 Shouting and throwing the boy into convulsions, it came out. He became like a corpse, which caused many to say, “He is dead!” 27 But Jesus took him by the hand, raised him, and he stood up. 28 When he entered the house, his disciples asked him in private, “Why could we not drive it out?” 29 He said to them, “This kind can only come out through prayer.”
Jesus anoints the eyes of a blind man

John 9:1-7

As he passed by he saw a man blind from birth. His disciples asked him, “Rabbi, who sinned, this man or his parents, that he was born blind?” Jesus answered, “Neither he nor his parents sinned; it is so that the works of God might be made visible through him. We have to do the works of the one who sent me while it is day. Night is coming when no one can work.

While I am in the world, I am the light of the world.”

When he had said this, he spat on the ground and made clay with saliva, and smeared the clay on his eyes, and said to him, “Go wash in the Pool of Siloam” (which means Sent). So he went and washed, and came back able to see.

Jesus takes aside a man who is deaf and privately anoints him

Mark 7:32-37

And they brought to him a man who was deaf and had a speech impediment, and they begged him to lay his hand on him. And taking him aside from the crowd privately, he put his fingers into his ears, and after spitting touched his tongue. And looking up to heaven, he sighed and said to him, “Ephphatha,” that is, “Be opened.” And his ears were opened, his tongue was released, and he spoke plainly. And Jesus charged them to tell no one. But the more he charged them, the more zealously they proclaimed it.

Jesus takes the hand of a man who is blind and leads him outside the village

Mark 8:22-26

When they arrived at Bethsaida, they brought to him a blind man and begged him to touch him. He took the blind man by the hand and led him outside the village. Putting spittle on his eyes he laid his hands on him and asked, “Do you see anything?” Looking up he replied, “I see people looking like trees and walking.” Then he laid hands on his eyes a second time and he saw clearly; his sight was restored and he could see everything distinctly. Then he sent him home and said, “Do not even go into the village.”
Jesus heals a man who could not speak and his heart is moved with compassion for the crowds because they are troubled and abandoned

Matthew 9:32-36 As they were going out, a demoniac who could not speak was brought to him, and when the demon was driven out the mute person spoke. The crowds were amazed and said, “Nothing like this has ever been seen in Israel.” But the Pharisees said, “He drives out demons by the prince of demons.” Jesus went around to all the towns and villages, teaching in their synagogues, proclaiming the gospel of the kingdom, and curing every disease and illness. At the sight of the crowds, his heart was moved with pity for them because they were troubled and abandoned, like sheep without a shepherd.

Jesus continues his healing ministry in the face of opposition

Matthew 12:22-23 Then they brought to him a demoniac who was blind and mute. He cured the mute person so that he could speak and see. All the crowd was astounded, and said, “Could this perhaps be the Son of David?” But when the Pharisees heard this, they said, “This man drives out demons only by the power of Beelzebul, the prince of demons.”

Jesus continues his healing ministry in the face of opposition

Matthew 12:9-14 (also Mark 3:1-6, Luke 6:6-11) And behold, there was a man there who had a withered hand. They questioned him, “Is it lawful to cure on the Sabbath?” so that they might accuse him. He said to them, “Which one of you who has a sheep that falls into a pit on the Sabbath will not take hold of it and lift it out? How much more valuable a person is than a sheep. So it is lawful to do good on the sabbath.” Then he said to the man, “Stretch out your hand.” He stretched it out, and it was restored as sound as the other. But the Pharisees went out and took counsel against him to put him to death.

Jesus asked him, “What do you want me to do for you?”

Luke 8:40-41
Access to Jesus is achieved through the intervention of friends

Mark 2:1-12 (also Matt. 9:1-8, Luke 5:17-26) 1 * When Jesus returned to Capernaum after some days, it became known that he was at home. 2 Many gathered together so that there was no longer room for them, not even around the door, and he preached the word to them. 3 They came bringing to him a paralytic carried by four men. 4 Unable to get near Jesus because of the crowd, they opened up the roof above him. After they had broken through, they let down the mat on which the paralytic was lying. 5 * When Jesus saw their faith, he said to the paralytic, “Child, your sins are forgiven.” 6 * Now some of the scribes were sitting there asking themselves, 7 “Why does this man speak that way?” He is blaspheming. Who but God alone can forgive sins? 8 Jesus immediately knew in his mind what they were thinking to themselves, so he said, “Why are you thinking such things in your hearts? 9 Which is easier, to say to the paralytic, ‘Your sins are forgiven,’ or to say, ‘Rise, pick up your mat and walk’? 10 * But that you may know that the Son of Man has authority to forgive sins on earth”— 11 he said to the paralytic, “I say to you, rise, pick up your mat, and go home.” 12 He rose, picked up his mat at once, and went away in the sight of everyone. They were all astounded and glorified God, saying, “We have never seen anything like this.”

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“God created you with unimaginable gifts... You only know you have a gift when there is someone to say ‘Thank you’... Affirmation creates community.”

Henri Nouwen
Open Hearts, Open Minds, Open Doors Video
The call to include members of all abilities in worship, ministries and fellowship is also proclaimed by the Pastoral Statement of the US Catholic Bishops on People with Disabilities and their Revised Guidelines for the Celebration of Sacraments with People with Disabilities:

PASTORAL STATEMENT OF U.S. CATHOLIC BISHOPS ON PEOPLE WITH DISABILITIES

November 16, 1978

1. The same Jesus who heard the cry for recognition from the people of Judea and Samaria 2,000 years ago calls us, His followers, to embrace our responsibility to our own disabled brothers and sisters in the United States. The Catholic Church pursues its mission by furthering the spiritual, intellectual, moral and physical development of the people it serves. As pastors of the Church in America, we are committed to working for a deeper understanding of both the pain and the potential of our neighbors who are blind, deaf, mentally retarded, emotionally impaired, who have special learning problems, or who suffer from single or multiple physical handicaps—all those whom disability may set apart. We call upon people of good will to reexamine their attitudes toward their brothers and sisters with disabilities and promote their well-being, acting with the sense of justice and the compassion that the Lord so clearly desires. Further, realizing the unique gifts individuals with disabilities have to offer the Church, we wish to address the need for their integration into the Christian community and their fuller participation in its life.

2. Prejudice starts with the simple perception of difference, whether that difference is physical or psychological. Down through the ages, people have tended to interpret these differences in crude moral terms. Our group is not just different from theirs; it is better in some vague but compelling way. Few of us would admit to being prejudiced against parishioners with disabilities and promote their well-being, acting with the sense of justice and the compassion that the Lord so clearly desires. Further, realizing the unique gifts individuals with disabilities have to offer the Church, we wish to address the need for their integration into the Christian community and their fuller participation in its life.

3. What individuals with disabilities need, first of all, is acceptance in this difference that can neither be denied nor overlooked. No acts of charity or justice can be of lasting value unless our actions are informed by a sincere and understanding love that penetrates the wall of strangeness and affirms the common humanity
underlying all distinction. Scripture teaches us that "any other commandment there may be [is] all summed up in this: 'You shall love your neighbor as yourself.'" (Rom. 13:9) In His wisdom, Jesus said, "as yourself." We must love others from the inside out, so to speak, accepting their difference from us in the same way that we accept our difference from them.

The Church's Response to the Person with a Disability

4. Concern for parishioners of all abilities was one of the prominent notes of Jesus’ earthly ministry. When asked by John’s disciples, "Are you He who is to come or do we look for another?" Jesus responded with words recalling the prophecies of Isaiah "Go back and report to John what you hear and see; the blind recover their sight, the lame walk, the lepers are cleansed, the deaf hear, dead men are raised to life, and the poor have the Gospel preached to them." (Mt. 11:3-5) Persons with disabilities become witnesses for Christ, His healing of their bodies a sign of the spiritual healing He brought to all people. "Which is less trouble to say, ‘Your sins are forgiven’ or ‘Stand up and walk?’ “ To help you realize that the Son has authority on earth to forgive sins" -- He then said to the paralyzed man -- "Stand up! Roll up your mat and go home" (Mt. 9:5f).

5. The Church that Jesus founded would surely have been derelict had it failed to respond to His example in its attention to parishioners of all abilities. It remains faithful to its mission when its members become more and more a people of the Beatitudes, a people blessed in their meekness, their suffering, their thirst for righteousness. We all struggle with life. We must carry on this struggle in a spirit of mutual love, inspired by Christ’s teaching that in serving others we serve the Lord Himself. (cf. Mt. 25:40) In doing so, we build a community of interdependent people and discover the Kingdom of God in our midst.

6. The Church, through the response of its members to the needs of their neighbors and through its parishes, healthcare institutions and social service agencies, has always attempted to show a pastoral concern for individuals with disabilities. However, in a spirit of humble candor, we must acknowledge that at times were have responded to the needs of some of our parishioners of all abilities only after circumstances or public opinion have compelled us to do so. By every means possible, therefore, the Church must continue to expand its healing ministry to these persons, helping them when necessary, working with them and raising its voice with them and with all members of society who are their advocates. Jesus revealed by His actions that service to and with people in need is a privilege and an opportunity as well as a duty. When we extend our healing hands to others, we are healed ourselves.

7. On the most basic level, the Church responds to persons with disabilities by defending their rights. Pope John XXIII's encyclical Pacem in Terris stresses the innate dignity of all men and women. "In an ordered and productive community, it is
a fundamental principle that every human being is a ‘person’. . . [One] has rights and duties . . . flowing directly and spontaneously from [one's] very nature. These rights are therefore universal, inviolable and inalienable." (9)

8. The word *inalienable* reminds us that the principles on which our democracy is founded also guarantee certain rights to all Americans, regardless of their circumstances. The first of these, of course, is the right to life. We have spoken out on this issue on many occasions. We see defense of the right to life of persons with disabilities as a matter of particular urgency, however, because the presence of handicapping conditions is not infrequently used as a rationale for abortion. Moreover, those babies with severe disabilities who are permitted to be born are sometimes denied ordinary and usual medical procedures.

9. All too often, abortion and postnatal neglect are promoted by arguing that the infant will survive only to suffer a life of pain and deprivation. We find this reasoning appalling. Society's frequent indifference to the plight of citizens with disabilities is a problem that cries aloud for solutions based on justice and conscience, not violence. All people have a clear duty to do what lies in their power to improve living conditions for parishioners of all abilities, rather than ignoring them or attempting to eliminate them as a burden not worth dealing with.

10. Defense of the right to life, then, implies the defense of other rights which enable the individual with a disability to achieve the fullest measure of personal development of which he or she is capable. These include the right to equal opportunity in education, in employment, in housing, as well as the right to free access to public accommodations, facilities and services. Those who must be institutionalized deserve decent, personalized care and human support as well as the pastoral services of the Christian community. Institutionalization will gradually become less necessary for some as the Christian community increases its awareness of disabled persons and builds a stronger and more integrated support system for them.

11. It is not enough merely to affirm the rights of parishioners of all abilities. We must actively work to make them real in the fabric of modern society. Recognizing that individuals with disabilities have a claim to our respect because they are persons, because they share in the one redemption of Christ, and because they contribute to our society by their activity within it, the Church must become an advocate for and with them. It must work to increase the public’s sensitivity toward the needs of parishioners of all abilities and support their rightful demand for justice. Moreover, individuals and organizations at every level within the Church should minister to persons with disabilities by serving their personal and social needs. Many can function on their own as well as anyone in society. For others, aid would be welcome. All of us can visit persons unable to leave their homes, offer transportation to those who cannot drive, read to those who cannot read, speak out
for those who have difficulty pleading their own case. In touching the lives of men, women and children in this way, we come closest to imitating Jesus' own example, which should be always before our eyes. (cf. Lk. 4:1719, 21)

Persons with Disabilities and the Ecclesial Community

12. Just as the Church must do all in its power to help ensure parishioners of all abilities a secure place in the human community, so it must reach out to welcome gratefully those who seek to participate in the ecclesial community. The central meaning of Jesus' ministry is bound up with the fact that He sought the company of people who, for one reason or another, were forced to live on the fringe of society. (cf. Mk. 7:37) These He made the special object of His attention, declaring that the last would be first and that the humble would be exalted in His Father's kingdom. (cf. Mt. 20: 16, 23:12) The Church finds its true identity when it fully integrates itself with these marginal people, including those who suffer from physical and psychological disabilities.

13. If parishioners of all abilities are to become equal partners in the Christian community, injustices must be eliminated and ignorance and apathy replaced by increased sensitivity and warm acceptance. The leaders and the general membership of the Church must educate themselves to appreciate fully the contribution parishioners of all abilities can make to the Church's spiritual life. They bring with them a special insight into the meaning of life; for they live, more than the rest of us perhaps, in the shadow of the cross. And out of their experience they forge virtues like courage, patience, perseverance, compassion and sensitivity that should serve as an inspiration to all Christians.

14. In the case of many parishioners with disabilities, integration into the Christian community may require nothing more than issuing an invitation and pursuing it. For some others, however, full participation can only come about if the Church exerts itself to devise innovative programs and techniques. At the very least, we must undertake forms of evangelization that speak to the particular needs of individuals with disabilities, make those liturgical adaptations which promote their active participation and provide helps and services that reflect our loving concern.

15. This concern should be extended also to the families and especially the parents. No family is ever really prepared for the birth of a child with a disability. When such a child does come into the world, families often need strong support from their faith community. That support must remain firm with the passage of years. The path to independence can be difficult. Family members need to know that others stand with them, at least in spirit, as they help their children along this path.

16. The central importance of family members in the lives of all parishioners with
disabilities, regardless of age, must never be underestimated. They lovingly foster the spiritual, mental and physical development of the person with a disability and are the primary teachers of religion and morality. Ministers working in the apostolate with persons with disabilities should treat them as a uniquely valuable resource for understanding the various needs of those they serve.

17. Full participation in the Christian community has another important aspect that must not be overlooked. When we think of parishioners with disabilities in relation to ministry, we tend automatically to think of doing something for them. We do not reflect that they can do something for us and with us. As noted above, parishioners of all abilities can, by their example, teach the non-disabled person much about strength and Christian acceptance. Moreover, they have the same duty as all members of the community to do the Lord's work in the world, according to their God-given talents and capacity. Because individuals may not be fully aware of the contribution they can make, Church leaders should consult with them, offering suggestions on practical ways of serving.

Parish Level

18. For most Catholics the community of believers is embodied in the local parish. The parish is the door to participation for individuals with disabilities, and it is the responsibility of the pastor and lay leaders to make sure that this door is always open. We noted above that the task, on occasion, may not be an easy one; involving some people in parish life may challenge the ingenuity and commitment of the entire congregation. Yet, in order to be loyal to its calling, to be truly pastoral, the parish must make sure that it does not exclude any Catholic who wishes to take part in its activities.

19. If the participation of persons with disabilities and their families is to be real and meaningful, the parish must prepare itself to receive them. This preparation might begin with a census aimed at identifying parishioners and those with no church affiliation who have significant disabilities. Parish leaders could then work with individuals and their families to determine what steps, if any, are needed to facilitate their participation in parish life.

20. It may be necessary at this initial stage to place considerable emphasis upon educating the members of the parish community on the rights and needs of local parishioners of all abilities. All too often one hears that there are too few persons with disabilities in a given parish to warrant ramped entrances, special liturgies or education program. Some say these matters should be handled on the diocesan level. Although many parishes have severely limited resources, we encourage all to make the best effort their circumstances permit. No parishioner should be excluded on the basis of disability alone.
21. The most obvious obstacle to participation in parish activities faced by many parishioners of all abilities is the physical design of parish buildings. Structurally inaccessible buildings are at once a sign and a guarantee of their isolation from the community. Sometimes all that is required to remedy the situation is the installation of outside ramps and railings, increased lighting, minor modification of toilet facilities, and perhaps, the removal of a few pews and kneelers. In other cases, major alterations and redesign of equipment may be called for. Each parish must examine its own situation to determine the feasibility of such alterations. Mere cost must never be the exclusive consideration, however, since the provisions of free access to religious functions for all interested people is a pastoral duty.

22. Whenever parishes contemplate new construction, they should make provision in their plans for the needs of individuals with disabilities. If both new construction and the adaptation of present buildings are out of the question, the parish should devise other ways to reach its members with disabilities. In cooperation with them, parish leaders may locate substitute facilities, for example, or make a concerted effort to serve at home those who cannot come to church.

23. It is essential that all forms of the liturgy be completely accessible to parishioners of all abilities, since these forms are the essence of the spiritual tie that binds the Christian community together. To exclude members of the parish from these celebrations of the life of the Church, even by passive omission, is to deny the reality of that community. Accessibility involves far more than physical alterations to parish buildings. Realistic provision must be made for persons with disabilities to participate fully in the Eucharist and other liturgical celebrations such as the sacraments of Reconciliation, Confirmation and Anointing of the Sick. The experiences and needs of individuals with disabilities vary, as do those of any group of people. For some with significant disabilities, special liturgies may be appropriate. Other will not require such liturgies, but will benefit if certain equipment and services are made available to them. Celebrating liturgies simultaneously in sign language enables the deaf person to enter more deeply into their spirit and meaning. Participation aids such as Mass books and hymnals in large print or Braille serve the same purpose for blind or partially sighted members.

24. People can also play a more active role in the liturgy if provided with proper aids and training. Blind parishioners can serve as lectors, for example, and deaf parishioners as special ministers of the Eucharist. We look forward to the day when more individuals with disabilities are active in the full-time, professional service of the Church, and we applaud recent decisions to accept qualified candidates for ordination or the religious life in spite of their significant disabilities.

25. Evangelization and catechesis for individuals with disabilities must be geared in content and method to their particular situation. Specialized catechists should help
them interpret the meaning of their lives and should give witness to Christ's presence in the local community in ways they can understand and appreciate. We hasten to add, however, that great care should be taken to avoid further isolation of people through these programs, which as far as possible, should be integrated with the normal catechetical activities of the parish. We have provided guidelines for the instruction of persons with disabilities and for their participation in the liturgical life of the church in *Sharing the Light of Faith: National Catechetical Directory for Catholics of the United States*.

26. Finally, parishes must be sensitive to the social needs of members with disabilities. We have already touched on some ways in which Christians can express their concern for their brothers and sisters with disabilities. These actions and others like them can help solve some of the individual's practical problems. They also create an opportunity for disabled and non-disabled people to join hands and break down the barriers that separate them. In such an interchange, it is often the person with a disability who gives the gift of most value.

Diocesan Level

27. Efforts to bring parishioners of all abilities into the parish community are more likely to be effective if the parishes are supported by offices operating at the diocesan level. At present, the social service needs of individuals with disabilities and their families are usually addressed by established diocesan agencies. Where it is found to be inadequate, the program should be strengthened to assure that specialized aid is provided to parishioners of all abilities. In those cases where there is no program at all, we urge that one be established.

28. The clergy, religious and laity engaged in this program should help the parish by developing policy and translating it into practical strategies for working with individuals with disabilities. They should serve as advocates, seeking help from other agencies. Finally, they should monitor public policy and generate multifaceted educational opportunities for those who minister to and with parishioners of all abilities.

29. Many opportunities for action at the diocesan level now exist with regard to public policy. Three pieces of federal legislation that promise significant benefits to individuals with disabilities have been passed during the seventies; each calls for study and possible support. We refer to the Rehabilitation Amendments of 1974, and the Education for All Handicapped Children Act of 1975. Enforcement of the regulations implementing Section 504 of the Rehabilitation Act, which forbids discrimination on the basis of disabling conditions, is a matter of particular interest. In response to the Rehabilitation Amendments, the executive branch of the federal government has also taken recent action, sponsoring a White House Conference on Handicapped Individuals in 1977. This conference was attended by official state
delegations, and there would be value in determining which of its recommendations are being applied in the state or states where a given diocese is located. Diocesan offices will also wish to keep abreast of general public policy and practice in their states.

30. Dioceses might make their most valuable contribution in the area of education. They should encourage and support training for all clergy, religious, seminarians and lay ministers, focusing special attention on those actually serving individuals with disabilities, whether in parishes or some other setting. Religious education personnel could profit from guidance in adapting their curricula to the needs of learners with disabilities, and Catholic elementary and secondary school teachers could be provided in-service training in how best to integrate students with disabilities into programs of regular education. The diocesan office might also offer institutes for diocesan administrators who direct programs with an impact on persons with disabilities.

31. The coordination of educational services within the dioceses should supplement the provision of direct educational aids. It is important to establish liaisons between facilities for parishioners of all abilities operating under Catholic auspices (special, residential and day schools; psychological services and the like) and usual Catholic school programs. Only in this way can the structural basis be laid for the integration, where feasible, of students with disabilities into programs for non-disabled persons. Moreover, in order to ensure the widest possible range of educational opportunities, Catholic facilities should be encouraged to develop working relationships both among themselves and with private and public agencies serving the same population.

National Level

32. As the most visible expression of our commitment, we the bishops now designate ministry to parishioners of all abilities as a special focus for the National Conference of Catholic Bishops and the U.S. Catholic Conference. This represents a mandate to each office and secretariat, as it develops its plans and programs, to address the concerns of individuals with disabilities. Appropriate offices should also serve as resource and referral centers to both parochial and diocesan bodies in matters relating to the needs of our brothers and sisters with disabilities.

Concluding Remarks

33. Parishioners of all abilities are not looking for pity. They seek to serve the community and to enjoy their full baptismal rights as members of the Church. Our interaction with them can and should be an affirmation of our faith. There can be no separate Church for parishioners of all abilities. We are one flock that serves a single shepherd.
34. Our wholeness as individuals and as the people of God lies in openness, service and love. The bishops of the United States feel a concern for individuals with disabilities that goes beyond their spiritual welfare to encompass their total well-being. This concern should find expression at all levels. Parishes should maintain their own programs of ministry with parishioners of all abilities, and dioceses should make every effort to establish offices that coordinate this ministry and support parish efforts. Finally, the National Conference of Catholic Bishops and the U.S. Catholic Conference will be more vigilant in promoting ministry with persons with disabilities throughout the structure of the Church.

35. We look to the future with what we feel is a realistic optimism. The Church has a tradition of ministry to parishioners of all abilities, and this tradition will fuel the stronger, more broadly based efforts called for by contemporary circumstances. We also have faith that our quest for justice, increasingly enlisted on the side of individuals with disabilities, will work powerfully in their behalf. No one would deny that every man, woman and child has the right to develop his or her potential to the fullest. With God's help and our own determination, the day will come when that right is realized in the lives of all parishioners of all abilities.

Original Title: Pastoral Statement of U.S. Catholic Bishops on Handicapped People

The Pastoral Statement of the US Catholic Bishops on People with Disabilities is reprinted with permission.

“... to be truly pastoral, the parish must make sure that it does not exclude any Catholic who wishes to take part in its activities.”

U.S. Conference of Catholic Bishops
Pastoral Statement on Persons with Disabilities
U.S. CONFERENCE OF CATHOLIC BISHOPS GUIDELINES FOR THE CELEBRATION OF THE SACRAMENTS WITH PERSONS WITH DISABILITIES

In 2017 the Catholic bishops revised and expanded their Guidelines for the Celebration of the Sacraments with Persons with Disabilities to help assure that people with disabilities are able to participate in the sacramental life of the Church and share their own gifts as missionary disciples.

For the complete text of the Revised Guidelines for the Celebration of the Sacraments with Persons with Disabilities visit the USCCB website at: http://www.usccb.org/about/divine-worship/policies/guidelines-sacraments-persons-with-disabilities.cfm

Copies of the Revised Guidelines will be available for purchase in October of 2017 at: store.usccb.org

“It is essential that all forms of the liturgy be completely accessible to persons with disabilities, since these forms are the essence of the spiritual tie that binds the Christian community together.”

U.S. Conference of Catholic Bishops Guidelines for the Celebration of the Sacraments with Persons with Disabilities
GETTING STARTED WITH YOUR INCLUSION IN WORSHIP MINISTRY
Since 1996 the Archdiocese of Chicago has worked in partnership with Pathways.org to assist pastors to include parishioners of all abilities in worship, parish ministries, social events, and religious education. To further the Inclusion In Worship effort, each pastor was asked to appoint an Inclusion Representative to work with the pastor to intentionally include parishioners of all abilities in parish life.

A parishioner who has shown an interest in working to include persons with disabilities, a parishioner who has a disability, or a relative or friend of a person with a disability would be a good Inclusion Representative. A staff member, minister of care or parish nurse would also make a good Inclusion Representative. If your parish is already inclusive and accessible we need your Representative to share your expertise with other parishes.

Inclusion Representative training materials and the Inclusion Representative Resource Booklet are available at www.InclusionInWorship.org. Materials for planning Inclusion Awareness Day, applications for the annual Open Hearts Award grants of up to $1,000, how-to videos and handouts for your parish inclusion ministry are also available on our website.

Your parish is invited to participate in this exciting ministry. Please consult with your pastor and fax the name of your parish’s Inclusion Representative to Pathways.org at 1-888-795-5884, email to info@inclusioninworship.org or call 708-922-9455 for more information. Thank you.

Parish Name: _____________________________________  Vicariate: ____________

Parish Inclusion Representative Name: __________________________

Mailing address: ________________________________________________________

________________________________________

Email: _________________________________________________________________

Telephone: __________________________  Fax: __________________________

Pastor’s Signature: ____________________________________________________
WHAT DOES A PARISH INCLUSION REPRESENTATIVE DO?

Every parish community is unique. The work of the Inclusion Representative, under the guidance of the pastor, will vary with the needs of the parish. Use these suggestions to begin your ministry.

- Visit www.InclusionInWorship.org and complete the **basic training** for Inclusion Representatives.

- Show dignity and respect for parishioners of all abilities by using **people first language** and educate others about how to speak with dignity and respect.

- Form a well-rounded inclusion committee approved by the pastor and parish council to coordinate access and inclusion efforts in your parish.

- Coordinate annual **Inclusion Awareness Day** activities to showcase how your parish welcomes parishioners of all abilities every day of the year. Kick off for Inclusion Awareness Days in parishes is the second weekend in October with parishes selecting dates throughout the fall. Planning materials are available on www.InclusionInWorship.org.

- Do a walk through survey of your facilities and survey the needs of your parishioners. Use the surveys on page 46 and 52. With parish leaders plan how to improve access and accommodate parishioner needs.

- Nominate your parish for a Pathways.org **Open Hearts Award**. Grants of up to $1,000 are available for access and inclusion projects. Visit www.InclusionInWorship.org for applications and guidelines.

- Promote the use of the **Different Gifts, But the Same Spirit** lesson plans in your parish school and religious education program. Download the plans at www.InclusionInWorship.org.

- Work with religious educators, parents and children (age 5 to 18) of the parish to prepare and submit a **Junior Open Hearts Awards** nomination. Grants of up to $1,000 are available for access and inclusion projects. Visit www.InclusionInWorship.org for applications and guidelines.

- Personally invite parishioners of all abilities to participate in liturgy, parish ministries, organizations and events. Provide accommodations so their participation becomes a reality.

- Be a voice for inclusion in all aspects of parish life.
PEOPLE FIRST LANGUAGE

When writing or speaking about people who happen to have disabilities, words should be chosen with care. Use "People First Language" to promote dignity and respect:

- Refer to the person first. Say “a man who uses a wheelchair” NOT “a wheelchair bound man.”
- If the disability isn’t critical to the story or conversation, don’t mention it.
- Describe a person, not a condition. For example, say “a person with epilepsy” NOT “an epileptic.”
- Never use the term “mentally retarded.” The acceptable terms are “intellectual disability” or “cognitive disability.”
- Never use the word “handicapped” as it connotes begging as the only occupation for people with disabilities. For example, say “accessible parking” NOT “handicapped parking.”
- Don’t portray people with disabilities who are successful as “heroes” or raise expectations that all people with disabilities should reach this level.
- Don’t sensationalize disabilities by using terms such as “afflicted with,” “victim of” or “suffers from.”
- Don’t use generic labels such as “the disabled” for groups of people with disabilities.
- Emphasize abilities, not limitations. For example, say “walks with crutches,” NOT “crippled,” and “uses a wheelchair,” NOT “wheelchair bound.”
- Don’t refer to people with disabilities as patients. A disability is not a disease.
- Don’t use condescending euphemisms such as “handy-capable” or “physically inconvenienced.”
- Speak of people with disabilities as the active participants in society that they are.
ORGANIZING AN INCLUSION MINISTRY

For any faith community to make long-lasting, appropriate changes, a planning structure will be needed. Enlist a group of committed people, including those with disabilities, and create an on-going committee focusing on disability issues and connected to the governing council of the faith community.

People you can invite to serve on the inclusion committee:

- a person with a disability
- a family member of a person with a disability
- a decision maker in your faith community
- a person with skills in contracting or architecture
- a person with experience in grant writing and fund raising.

The inclusion committee could coordinate:

- a walk-through of buildings with decision makers to list access barriers (visit www.InclusionInWorship to download the Facilities Survey).
- a survey of the congregation’s needs (visit www.InclusionInWorship to download the Survey of Parishioner Needs).
- an audit of organizations and ministries within the faith community to see if they address the needs of persons with disabilities
- development of short-term and long-range plans to increase accessibility and inclusion
- implementation of short and long-term accessibility plans
- celebrating successes.

Remember that making change at one point in time does not necessarily answer the need forever. Devices may break, new ideas or requests may come up, and new members may join your faith community.
TALKING POINTS FOR INCLUSION REPRESENTATIVES

Parish Inclusion Representatives can use the following talking points to speak about the Inclusion in Worship Ministry at a parish council meeting when presenting the ministry for approval. Showing excerpts from the Open Hearts, Open Minds, Open Doors DVD to the parish council is an effective way to introduce the ministry.

Inclusion is offering the same respect and opportunity to participate to all.

An inclusive parish offers the same opportunity to worship, minister and study to all parishioners regardless of physical and mental abilities.

Cardinal Joseph Bernardin began the effort to include parishioners of all abilities into all aspects of parish life in 1996 when he called a conference on inclusion. He asked Pathways.org to partner with the archdiocese on this movement.

The Inclusion in Worship Ministry video was produced to help parishes identify the needs of their own congregations and to develop short and long term plans for inclusion.

Cardinal Francis George continued the effort and asked each parish to appoint an Inclusion Representative to coordinate inclusion efforts on the parish level.

Cardinal Blase Cupich fully endorses and supports Inclusion In Worship and the Inclusion Representative ministry.

My name is _________________. With the approval of our pastor I have volunteered to act as Inclusion Representative for our parish. (Outline your plans for this ministry. This may include: the formation of an Inclusion in Worship Ministry Committee, surveying the needs of the parish, providing accommodations so that parishioners of all abilities can serve in liturgical ministries, nominating the parish for an Open Hearts Award, celebrating Inclusion Awareness Day etc.)

The mission of Inclusion in Worship Ministry is to create congregations where parishioners of all abilities and their families can participate in worship, ministry, study and fellowship. With the approval of the parish council I would like to begin this ministry under one of the commissions of the council.

Thank you.
RECRUITING MEMBERS FOR YOUR MINISTRY

BULLETIN ARTICLE

New Inclusion in Worship Ministry

Our parish is starting an exciting new ministry that seeks to welcome and include parishioners of all abilities into active participation. We extend a warm and heartfelt invitation to all of our parishioners to join this new ministry. The goals of the ministry are:

- accessibility—surveying the needs of our parish community and providing the necessary accommodations so parishioners of all abilities can participate in worship, ministries, social events and leadership roles
- communication—conveying that all are welcome to participate through our print, internet, verbal and nonverbal communications
- affirmation—personally inviting parishioners with disabilities to participate in parish activities.

If you are interested in joining this ministry or if you have any needs or concerns, please contact (name of Inclusion Representative) at (phone number) or (email address). Our first ministry meeting will be on (day and date) at (time) in the (location). All are welcome to attend. For more information about Inclusion in Worship, a partnership between the Archdiocese of Chicago and Pathways.org, visit www.InclusionInWorship.org.

“Inclusion begins in our hearts. It begins with affirmation…When we open our hearts and our community to the gifts each person brings, we are all strengthened.”

Joseph Cardinal Bernardin
Open Hearts, Open Minds, Open Doors video

Contributors: Inclusion Representatives from Incarnation Parish, Palos Heights, IL and Prince of Peace Parish, Lake Villa, IL
RECRUITING MEMBERS FOR YOUR MINISTRY (cont’d.)

INCLUSION IN WORSHIP PARISH MINISTRY BROCHURE

You may use the brochure on the following pages to recruit members for your Inclusion In Worship ministry. Brochures may also be used at parish Ministry Fairs, on Inclusion Awareness Day and at other parish events to publicize your Inclusion In Worship ministry. Fill in your parish name on the front and your contact information inside, print or photocopy double sided, fold and distribute.

“Each of us has a role in promoting and forming an inclusive worship environment...”

Blase Cardinal Cupich
Archbishop of Chicago
2016 Inclusion Awareness Day Letter to Parishes
PRAYER FOR AWARENESS

God, Creator of all, help us to recognize that each of us has abilities and each of us has limitations. And yet we all have a part to play in bringing about Your Kingdom. You love each of us profoundly. In the spirit of gratitude and solidarity we ask you to increase our awareness of both the gifts and the needs of those around us. Open our hearts, minds and doors to the gifts of every person. Help us to become truly welcoming communities where everyone can find a place at Your Table. We ask this in Your name, Amen.

ON THE COVER: THE ICON OF THE TRINITY

The icon of the Trinity by Rublev depicts the relationship between the three persons of the Trinity. As we view the icon we take our place at the table to accept the invitation to become a part of the Divine relationship, completing the image. The Inclusion In Worship Ministry helps parishes to provide an accessible environment where parishioners of all abilities can participate and take their places around the Table of the Lord.

Inclusion In Worship is a ministry of Pathways.org, a Chicago based not for profit providing grants, videos and educational materials to help congregations welcome worshipers of all abilities. Visit www.InclusionInWorship.org for more information.
PLEASE JOIN US IN THIS MINISTRY

There are over twenty-five accounts in the Scriptures of Jesus reaching out to people with disabilities. In these stories we see Jesus’ special concern for people with disabilities and his desire to restore them to the community. The Inclusion In Worship Ministry follows the example of Christ’s ministry as we reach out to welcome and include parishioners of all abilities in our worshipping communities.

If you are interested in joining this ministry at our parish or if you have any needs or concerns, please contact the parishioner listed below.

FOR INFORMATION ON THE INCLUSION IN WORSHIP MINISTRY AT OUR PARISH CONTACT:

INCLUSION IN WORSHIP

A Ministry to Welcome Parishioners of All Abilities as Active Participants

The Inclusion in Worship Ministry, under the guidance of our pastor, seeks to make parishioners of all abilities feel welcomed and encouraged to participate. The goals of the Inclusion in Worship Ministry are:

Education—educating our staff, ministry leaders and parishioners about people first language and disability etiquette so that everyone plays a role in welcoming all parishioners into our community of faith.

Accessibility—providing an accessible campus and any needed accommodations so parishioners of all abilities can participate in our liturgies, ministries, religious education programs, social events and as parish leaders.

Communication—Using our parish mission statement, print, internet, verbal and nonverbal communications to encourage parishioners of all abilities to participate in all aspects of parish life.

Affirmation—recognizing the gifts of every person and personally inviting parishioners of all abilities to participate in parish activities and providing needed accommodations.
**FACILITIES SURVEY**

*Use the following survey to evaluate the accessibility of your campus. At least one person who uses a wheelchair should be part of the survey team. “no” answers indicate areas which need to be addressed. See *“ below for tips.*

<table>
<thead>
<tr>
<th>Parking</th>
<th>YES</th>
<th>NO</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are 10% of all parking spaces designated accessible spaces? If no, actual number:</td>
<td></td>
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</tr>
<tr>
<td>Are car spaces at least 8’ wide in the accessible spaces? If no, actual width:</td>
<td></td>
<td></td>
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<tr>
<td>Is there an adjacent access aisle at least 5’ wide, minimum? Two spaces can share access aisles.</td>
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<tr>
<td>Are the reserved spaces and access aisles paved, even if the rest of the parking lot is not paved?</td>
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<tr>
<td>Is there at least one van-accessible space? One van accessible space for every six accessible spaces is recommended.</td>
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<tr>
<td>Is the van-accessible space 8’ wide, minimum with an 8’ wide access aisle?</td>
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<td></td>
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<tr>
<td>Are reserved spaces clearly marked with access symbol signage, 60” to bottom of sign, minimum? If no, actual height of signage:</td>
<td></td>
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</tr>
<tr>
<td>Is the van-accessible space clearly marked “Van Accessible”?</td>
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<tr>
<td>Are reserved spaces on a level surface?</td>
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<tr>
<td>Is there a 3’ wide curb cut between the parking lot and sidewalk, with a slope of 1”:12”? Actual width of curb cut:</td>
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<tr>
<td>Actual slope of curb cut:</td>
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<tr>
<td>Are reserved spaces close to an accessible entrance and on an accessible route with walkways at least 54 inches wide?</td>
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<tr>
<td></td>
<td>YES</td>
<td>NO</td>
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<td></td>
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<tr>
<td>Are wheel stops installed 18’ from the curb to prevent car overhang onto sidewalk leading to the accessible entrance?</td>
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</tbody>
</table>

**Walkways**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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<tbody>
<tr>
<td></td>
<td></td>
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<tr>
<td>Do walkways have non-slip, paved surfaces?</td>
<td></td>
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<tr>
<td>Are walkways the recommended 36” wide with 60” x 60” passing spots every 200’ to allow for passing? If no, actual width:</td>
<td></td>
</tr>
<tr>
<td>Is the slope of the walkway a maximum of 1” rise in 20”?</td>
<td></td>
</tr>
<tr>
<td>Are walkways of a continuing common surface, and not interrupted by steps?</td>
<td></td>
</tr>
<tr>
<td>Are there any protruding objects, such as shrubs, in the walkway? List and create a plan for removal:</td>
<td></td>
</tr>
</tbody>
</table>

**Ramps**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Has a sloped walkway rather than an exterior ramp been considered?</td>
<td></td>
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<tr>
<td>Do ramps have a slope no greater than 1” rise in 12”?</td>
<td></td>
</tr>
<tr>
<td>Do ramps have a width of no less than 36” between handrails?</td>
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<tr>
<td>Do ramps have continuous side rails on both sides?</td>
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<tr>
<td>Are side rails 34” to 38” above the surface of the ramp?</td>
<td></td>
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<tr>
<td>Do side rails extend 1’ beyond the top and bottom of the ramp?</td>
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</tr>
<tr>
<td>Do ramps have a non-slip surface?</td>
<td></td>
</tr>
<tr>
<td>Do ramps have level 5’ platforms at 30’ intervals and whenever they turn (for purposes of rest and safety)?</td>
<td></td>
</tr>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>-----</td>
<td>----</td>
</tr>
<tr>
<td>Are exterior ramps covered with a canopy for weather protection to keep ramps free of snow, ice and rain?</td>
<td></td>
</tr>
<tr>
<td>If exterior ramps are not covered is a 4” bottom rail in place rather than a curb to allow rain to drain off and snow to be pushed off?</td>
<td></td>
</tr>
<tr>
<td>Are ramped entrances clearly designated with signage?</td>
<td></td>
</tr>
</tbody>
</table>

**Entrance**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is at least one primary entrance to the building usable by people who use wheelchairs and walkers?</td>
<td></td>
</tr>
<tr>
<td>Do doors have a clear opening of 32” or more? If no, actual width:</td>
<td></td>
</tr>
<tr>
<td>If doors have a closer, is there a time-delay device?</td>
<td></td>
</tr>
<tr>
<td>When closed, are doors that are in a series separated by at least 4’ plus the width of any door swinging into the space? If no, actual distance:</td>
<td></td>
</tr>
<tr>
<td>Are all thresholds level (less than ¼ inch), or beveled, up to ½ inch high?</td>
<td></td>
</tr>
<tr>
<td>Are door handles 48” high or less?</td>
<td></td>
</tr>
<tr>
<td>Are door handles operable with a closed fist?</td>
<td></td>
</tr>
</tbody>
</table>

**Wheelchair Lift**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is platform 42” x 48”? If no, actual dimension:</td>
<td></td>
</tr>
<tr>
<td>Can lift be operated by persons with disabilities without assistance?</td>
<td></td>
</tr>
<tr>
<td>Is lift secured to prevent accidents or misuse?</td>
<td></td>
</tr>
<tr>
<td>Is there an accessible route on and off the lift, top and bottom?</td>
<td></td>
</tr>
<tr>
<td>Access to Worship</td>
<td>YES</td>
</tr>
<tr>
<td>--------------------------------</td>
<td>-----</td>
</tr>
<tr>
<td>Are there one or two pews 32” apart for people who use crutches or walkers?</td>
<td></td>
</tr>
<tr>
<td>Have the ends of several pews been removed to allow people in wheelchairs to sit with family?</td>
<td></td>
</tr>
<tr>
<td>Are there chairs with padded seats, some padded pews, or seat pads to distribute?</td>
<td></td>
</tr>
<tr>
<td>Are there areas of adequate lighting to enable participation in worship?</td>
<td></td>
</tr>
<tr>
<td>Access to Worship (continued)</td>
<td></td>
</tr>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Is there adequate lighting on speakers and interpreters, with no shadows on either?</td>
<td></td>
</tr>
<tr>
<td>Are worship aides and hymnals available for people with vision loss in large print?</td>
<td></td>
</tr>
<tr>
<td>Are worship aides and hymnals available for people with vision loss in Braille?</td>
<td></td>
</tr>
<tr>
<td>Is there an amplification system for persons who are hard of hearing? If yes, what type?</td>
<td></td>
</tr>
<tr>
<td>Are there sign language interpreters for people who are deaf and hard of hearing?</td>
<td></td>
</tr>
<tr>
<td>In lieu of interpreters, is there real-time captioning available?</td>
<td></td>
</tr>
<tr>
<td>Is the sanctuary accessible so that people who use wheelchairs and walkers can serve as worship ministers?</td>
<td></td>
</tr>
<tr>
<td>Have ushers been trained to offer appropriate assistance?</td>
<td></td>
</tr>
<tr>
<td>Stairs</td>
<td>YES</td>
</tr>
<tr>
<td>Do stairs have a non-slip surface?</td>
<td></td>
</tr>
<tr>
<td>Are stairs well-lit?</td>
<td></td>
</tr>
<tr>
<td>Is there a continuous and stable handrail along both sides of the stairs? If no, is there a handrail on one side:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td><strong>YES</strong></td>
<td><strong>NO</strong></td>
</tr>
<tr>
<td>Is there textural or color change at the top and bottom of steps to alert persons with vision loss?</td>
<td></td>
</tr>
<tr>
<td><strong>Restrooms</strong></td>
<td></td>
</tr>
<tr>
<td><strong>YES</strong></td>
<td><strong>NO</strong></td>
</tr>
<tr>
<td>Is there at least one accessible restroom provided on each floor?</td>
<td></td>
</tr>
<tr>
<td>Do entranceways, doors, and vision screens allow 32” clearance?</td>
<td></td>
</tr>
<tr>
<td><strong>Restrooms (continued)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>YES</strong></td>
<td><strong>NO</strong></td>
</tr>
<tr>
<td>Has an out-swinging door that has a 32” clear opening?</td>
<td></td>
</tr>
<tr>
<td>Has grab bars 36” long on each side or on one side and rear wall, 33” to 36” above floor, fastened securely to the wall at the ends and center?</td>
<td></td>
</tr>
<tr>
<td>Has a commode with seat 17” to 19” from floor?</td>
<td></td>
</tr>
<tr>
<td>Has paper holder 7”- 9” in front of toilet, 14”- 19” from floor?</td>
<td></td>
</tr>
<tr>
<td>Are sinks wall-mounted with rim no higher than 34” from floor?</td>
<td></td>
</tr>
<tr>
<td>Do sinks have faucets operable with closed fist? (Single-lever type handles not requiring hand grip are preferred.)</td>
<td></td>
</tr>
<tr>
<td>Are exposed drain pipes and hot water pipes covered or insulated?</td>
<td></td>
</tr>
<tr>
<td>Are some mirrors and shelves at a height with the bottom no higher than 40” above floor (or slanted to allow vision at that level)?</td>
<td></td>
</tr>
<tr>
<td>Are some towel racks, and other dispensers and disposal units mounted no higher than 40” from the floor?</td>
<td></td>
</tr>
<tr>
<td>Do restrooms for men have wall-mounted urinals with opening of the basin no higher than 17” from the floor, or have floor-mounted urinals that are level with the main floor?</td>
<td></td>
</tr>
</tbody>
</table>
### Elevators

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

If building is multi-story, is there an elevator?

Are the hall call buttons centered at 42” maximum from floor?

Are all of the interior controls 48” or less from the floor? If no, actual height:

Are the buttons labeled with raised or Braille letters beside them?

Do cab dimensions range from 51”x 80” to 60”x 60”? If no, actual dimension:

Is there a handrail provided on at least one side, 32” from the floor?

### Elevators (continued)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

Is the door slow-closing, with a sensing device?

Is there an audible signal at each floor?

* To save time, you may want to divide your committee into groups, assign each group different areas to survey and then have groups report back on findings. Make copies of the survey for team members and place on clipboards. Use a tape measure for accurate measurements.


*Adapted from: Opening Doors, National Catholic Office for Persons with Disabilities, Washington, D.C.*
SURVEY OF CONGREGANT’S NEEDS

Statistics show that one out of five Americans has a disability. We would like to learn more about the needs of our congregation and the barriers that may prevent full participation at our house of worship. Please take a few minutes to complete the following survey. Thank you.

1. The person who could participate more fully if accommodations were provided is (Circle all that apply):
   - Self
   - Family Member
   - Acquaintance
   - Don’t know anyone
   (Please continue)

2. What would allow full participation in worship at our house of faith?
   - Invitation to participate
   - Disability awareness training for staff and congregation
   - Drop off area
   - Accessible parking spaces
   - Curb cuts
   - Ramps
   - Automatic doors
   - Doors 36 inches in width
   - Greeters who could assist
   - Clearly marked accessible bathrooms
   - Accessible pulpit/bimah
   - Assistive listening devices for persons with hearing needs
   - Sign language interpreter
   - Braille materials
   - Large print liturgy guides/hymnals
   - Pew cuts or accessible spaces throughout the worship space
   - Pew without kneelers
   - Padded seating with arm rests
   - Pews 32 inches apart to allow for use of walkers, canes, crutches
   - Other ____________________________________________
3. What other area(s) limit or prevent full participation?

- Meeting rooms
- Lighting
- Carpet/floor coverings
- Sound system
- Gym
- School building
- Social hall
- Office/rectory
- Sanctuary
- Attitudes
- Other(s): _________________

4. Please check ministries in our faith community that are not accessible:

- Altar server
- Choir member
- Lector
- Usher
- Catechist
- Religious education student
- Day school student
- Liturgical minister
- Parish council
- Teen group
- Women’s guild
- Other: __________

Additional Comments:

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Name: ________________________________________________________________

Address: __________________________________________________________________

City: ___________ State: ___ Zip Code: ___________ Phone: _______

☐ Yes, I would like to serve on an inclusion committee to help make our faith community more accessible and welcoming. I have completed the above information so that you may contact me.
Annual Open Hearts Awards

$1,000 Grants for Access Projects in Houses of Worship and Religious Schools

The Pathways.org Open Hearts and Junior Open Hearts Awards help congregations and religious schools across the U.S. fund projects that enable individuals of all abilities to participate in worship, ministries, leadership roles and religious education.

Grants of up to $1,000 have been used for large print prayer books, pew cutouts, automatic door openers, ramps, assistive listening devices, sign language interpreters and adaptive religious education materials for students.

To nominate, please submit:

- A video, essay with electronic photos, or children’s artwork of project
- A detailed request for funding
- A completed application form

Junior Open Hearts Awards must be submitted by youth ages 5-18 (parents and teachers may facilitate nominations).

Deadline for applications is August 1
Submit applications electronically to info@inclusioninworship.org
Application forms are available at www.InclusionInWorship.org
or call 1-800-955-2445 for more information
PATHWAYS.ORG OPEN HEARTS AWARDS

Since 1997, grants of up to $1,000 have been awarded to houses of worship and religious schools nationwide to help fund access and inclusion projects. Annual deadline is August 1.

As parish Inclusion Representative you are encouraged to nominate your parish for an Open Hearts Award with the approval of your pastor. Complete the application form available at www.InclusionInWorship.org, make a video or take digital photos of your access and inclusion efforts and describe the specific planned project you are seeking funding for. Once the application is complete, submit it to your pastor for his signature and then email the completed form, video or essay with photos to info@inclusioninworship.org.

Or facilitate the nomination of a Junior Open Hearts Award by the children of the parish in the religious education program or school. Use the Different Gifts, But the Same Spirit lesson plans at www.InclusionInWorship.org to teach RE or school children about inclusion. Then have the children make a video, write essays with electronic photos or draw pictures of what inclusion means to them with a description of the project they seek funding for. Submit the best work with a completed application to info@inclusioninworship.org.

Or advertise the Junior Open Hearts Awards in your parish bulletin (see below) or personally invite a family or child from your parish to create a video, write an essay with electronic photos, or draw a picture of inclusion at your parish. Submit along with a description of the planned project and a completed nomination form available at www.InclusionInWorship.org to info@inclusioninworship.org.

CALLING ALL YOUTH AGES 5 TO 18!

Wouldn’t you feel proud if you won $1,000 for our parish? It’s easy! Just enter the Junior Open Hearts Awards sponsored by Pathways.org! Write an essay, draw a picture or create a video that tells how our parish welcomes worshippers of all abilities. Send your entry along with a completed Junior Open Hearts Awards application and information about the project you seek funding for to Pathways.org, 150 N. Michigan Avenue, Suite 2100, Chicago, IL, 60601. Nominations must be postmarked August 1st or earlier. Download the Junior Open Hearts Award Application at www.InclusionInWorship.org or call 1-800-955-2445.

Pathways.org Open Hearts Awards
www.InclusionInWorship.org
1-800-955-2445
INCLUSION AWARENESS DAY

WHY SHOULD WE CELEBRATE INCLUSION AWARENESS DAY?

Disabilities cross all cultural, ethnic and racial lines. Yet many people who live with assorted disabilities are missing when we gather to worship. We are called to love our neighbors as ourselves, but cannot fulfill that responsibility when many are missing from our midst, including those who move through the world in ways different from our own; those who need to understand the Word of God by means we fail to consider; or those who would proclaim their faith by means we are too impatient to attend. Inclusion Awareness Day is a time for us to open our hearts, minds and doors so that meaningful participation in faith communities is available to all parishioners every day of the year. (Adapted from Jubilee Days, National Catholic Partnership on Disabilities)

INCLUSION AWARENESS DAY ACTIVITIES

Congregations can welcome parishioners of all abilities in three areas: affirmation, communication and accessibility. Listed below are ideas for your Inclusion Awareness Day event or you may develop ideas of your own. The Inclusion Awareness Day Workbooks of planning materials are available at www.InclusionInWorship.org to assist you further.

AFFIRMATION

- Use the Inclusion Awareness Day Workbooks of planning materials at www.InclusionInWorship.org to plan your Inclusion Awareness Day events.
- Show the Pathways.org Inclusion in Worship Ministry DVD to your youth group, adult education group or after worship services.
- Publicize your faith community’s accessible features. Use access symbols in bulletins, ads, and on signage.

COMMUNICATION

- Place copies of the Cardinal’s Inclusion Awareness Day letter in the pews, read from the pulpit or publish in your bulletin on Inclusion Awareness Day.
- Place information in your bulletin about welcoming persons with disabilities on Inclusion Awareness Day and throughout the year. Use the bulletin materials provided in this booklet or at www.InclusionInWorship.org.
• Send a family discussion guide home for parents and children to discuss ways to be more inclusive. A family guide is available in the Different Gifts, but the Same Spirit lesson plans at www.InclusionInWorship.org.
• Educate staff, volunteers and ministry leaders about using “People First Language” in homilies, announcements and print materials.
• Ask celebrants to speak about the gifts received when all can participate.
• Send a press release to local papers to showcase your efforts to welcome people with disabilities.

ACCESSIBILITY

• Do a walk-through of your facilities before Inclusion Awareness Day. Note inaccessible areas and announce plans to remove those barriers at your congregation’s Inclusion Awareness Day celebration. The Facilities Survey is available at www.InclusionInWorship.org.
• Use Inclusion Awareness Day to solicit volunteers for an Inclusion Committee to keep access and inclusion a priority.
• Survey your congregation and develop an access plan to meet the needs of the faithful. Visit www.InclusionInWorship.org for a Survey of Parishioner Needs that can be duplicated, distributed to parishioners at mass, collected and tabulated to meet needs.

For Inclusion Awareness Day Workbooks, Prayer Cards, posters, bulletin items and more activities and ideas on planning Inclusion Awareness Day visit www.InclusionInWorship.org.

“The celebration of Inclusion Awareness Day will help others witness their faith in a valued and supported faith community. Know of my gratitude and my prayers for all that you do.”

Blase Cardinal Cupich
Archbishop of Chicago

2016 Inclusion Awareness Day Letter to Parishes
INCLUSION AWARENESS DAY BULLETIN ARTICLES

Click here for the series of educational bulletin items for downloading. See sample below. Or use How You Can Make a Difference on the following page. Find prayers, children’s activities and more ideas in the Inclusion Awareness Day Workbook at www.InclusionInWorship.org.

How YOU Can Make a Difference

Welcome Parishioners of All Abilities

- A warm smile and friendly conversation are very welcoming.
- Speak directly to the person with a disability, not only to the family member, companion, interpreter, or canine companion.
- Offer accessible seating, large-print missalettes and assistive listening devices. Know where accessible washrooms are.

Need more ideas?
Visit: www.InclusionInWorship.org

How YOU Can Make a Difference

Welcome Parishioners Who Are Blind

- Identify yourself when you greet a person who is blind.
- Talk in a normal tone of voice.
- Offer your arm when assisting.
- Give verbal cues such as, “We are going through a doorway.”

Need more ideas?
Visit: www.InclusionInWorship.org
INCLUSION AWARENESS DAY BULLETIN ARTICLES

HOW YOU CAN MAKE A DIFFERENCE

There are many things that you, as an individual, can do to help parishioners of all abilities feel welcome in your house of faith.

1. I will treat ALL people as PEOPLE FIRST – as I would like to be treated.

2. I will SPEAK DIRECTLY to the person with a disability, not only to the nearby family member, companion, interpreter, or the canine companion.

3. I will offer to SHAKE HANDS when introduced to a person with a disability. (Persons with limited hand use or who wear an artificial limb may shake hands. Shaking the left hand is okay, too.)

4. I will place myself at EYE LEVEL, in front, for easy conversation with a person in a wheelchair, with crutches, or with a walking frame.

5. I will OFFER ASSISTANCE AND WAIT until the offer is accepted. I will wait and then ask for instructions.

6. I will be PATIENT AND WAIT for the person with difficulty speaking, rather than speaking for the person. I may help by asking short questions that require short answers, a nod, or a shake of the head.

7. I will see the WHOLENESS OF SPIRIT beneath the surface of someone with a disability and overcome the tendency to turn away or ignore the person.

8. I will TREAT ADULTS with developmental disabilities AS ADULTS, not as children. I will use first names only when using the same familiarity for all persons.

9. I will get the attention of someone who is hearing-impaired by LIGHTLY TAPPING their elbow or shoulder, or by WAVING MY HAND. I will look directly at the person and speak clearly, slowly, and expressively to establish if the person can read my lips.

10. I will guide a person with visual impairments by GIVING VERBAL CLUES to steps, curbs, escalators or doors.
PRAYERS FOR INCLUSION AWARENESS DAY

PRAYER FOR AWARENESS

God, Creator of all, help us to recognize that each of us has abilities and each of us has limitations. And yet we all have a part to play in bringing about Your Kingdom. You love each of us profoundly. In the spirit of gratitude and solidarity, we ask you to increase our awareness of both the gifts and the needs of those around us. Open our hearts, minds and doors to the gifts of every person. Help us to become truly welcoming communities where everyone can find their place at Your Table. We ask this in Your name, Amen.

PRAYER FOR INCLUSION

God, our beloved creator, you fashioned us in your image. We are precious in your eyes. Instill in us the awareness and courage we need to see your face in the face of our neighbors and care for the least of our brothers and sisters. Help us to break down barriers in our hearts and remove obstacles in our communities that prevent all of your faithful from fully participating in the life of your church. We ask this through Christ, our Lord. Amen.

CLOSING PRAYER

O Lord, thank you for the blessings of the gifts and talents of each of our parishioners. Teach us to meet the challenges of developing an understanding and appreciation for who we are and how you intend for us to use our strengths in our Church and community. Help us to value one another’s differences. Amen.

INCLUSION AWARENESS DAY AS AN ANNUAL MINISTRY BENCHMARK

Parish Inclusion Representatives should use the annual celebration of Inclusion Awareness Day to take stock of their inclusion ministry and to make plans for future initiatives. Use the Inclusion Representative Long Range Plan on the next page to keep track of your parish’s progress on becoming an accessible and welcoming community of faith where parishioners of all abilities can participate and share their gifts at the altar.
# Inclusion Representative Long Range Plan

Parish: ______________________ Inclusion Rep: ________________________

Address: _____________________ Date Prepared: ________________________

Pastor Signature: ________________________________

<table>
<thead>
<tr>
<th>Project</th>
<th>Completion Date</th>
<th>Description/Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appoint an Inclusion Rep</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form an Inclusion Committee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do a walkthrough of your campus to evaluate your accessibility</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plan an annual Inclusion Awareness Day celebration for your parish</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Apply for an Open Hearts Award grant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Invite children to apply for a Junior Open Hearts Award grant</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Prioritize access and inclusion projects and goals and note the anticipated completion date.** $1,000 Open Hearts Awards are available to support your efforts.

1. 

2. 

3. 

4. 

5. 

54
AFFIRMATION, COMMUNICATION AND ACCESSIBILITY
INTRODUCTION TO AFFIRMATION, COMMUNICATION AND ACCESSIBILITY

One in five Americans has a disability, but you’d be surprised how many houses of worship are not equipped to welcome everyone. Pathways.org is dedicated to raising awareness about barriers to participation that exist in many faith communities for persons with physical, mental, emotional, or sensory differences. The Inclusion in Worship Ministry assists congregations of all denominations to welcome worshippers of all abilities into full participation.

We welcome individuals of all abilities into our congregations with affirmation, communication and accessibility. The ideas in the following pages are grouped under these headings. Follow the tips from each area to create a caring, inclusive congregation where all can participate.

Please feel free to duplicate and share these handouts at your Inclusion Committee meetings, in your bulletin or at parish staff meetings.

Thank you for opening hearts, minds and doors so that all may worship and participate together in accessible and inclusive congregations.

"Inclusion begins in our hearts. It begins with affirmation... When we open our hearts and our community to the gifts each person brings, we are all strengthened."

Joseph Cardinal Bernardin

Open Hearts, Open Minds, Open Doors
AFFIRMATION

Some good ideas used by congregations to welcome parishioners of all abilities and their families in the area of affirmation:

- The faith community recognizes talents and/or gifts of individuals. Rarely are people described by their disabilities, instead they are recognized for their gifts. For example a woman who is blind proclaims the Scripture using Braille, and a man who is a guitar player and who uses a wheelchair performs with the music ministry.

- An access survey is used to determine the individual needs of the congregation and to help prioritize improvements such as accessible parking, large-print materials, improved sound system and lighting, wheelchair access, inclusive religious education classes, etc.

- Adults and children with disabilities are given opportunities to serve others within the worship service and in the outreach programs of the faith community.

- Worshippers with invisible disabilities are active members in the faith community (Invisible disabilities include learning disabilities, mental conditions, seizures, the many forms of cancer, arthritis, lupus, heart disease, stroke, etc.).

- Children of all abilities are included in religious education classes with appropriate supports.

- A religious or lay leader who has acquired a serious disability continues to serve in worship services and church leadership if he/she desires.

- A “Care Committee” has been created to connect the congregation to families affected by disability by means of weekly social visits, shopping assistance, caregiver break time, or babysitting. Committee members are trained to communicate appropriately and to extend open-arms to the new baby with difficulties or to the person with a new injury/condition so that all families can feel the warmth of God’s love.
TEN EASY WAYS TO WELCOME PARISHIONERS OF ALL ABILITIES IN THE AREA OF AFFIRMATION

1. Include children, youth and adults with disabilities in worship as cantors, ushers, musicians, altar servers, gift bearers, lectors, etc.

2. Make a well-rounded committee on inclusion part of your congregation’s governing council to increase meaningful participation for worshippers of all abilities.

3. Educate the entire congregation about disability issues by periodically running pieces in your bulletin about hospitality and welcome. See “How You Can Make a Difference” in this toolkit.

4. Train ushers and lay leaders as role models to include and welcome worshippers of all abilities and their families.

5. Reinterpret disability narratives in the scriptures as “healing” not “curing” stories or reference biblical leaders who had disabilities in homilies and sermons.

6. Place an “inclusion box” in the worship space with paper and pencils for suggestions for better inclusion.

7. Observe an annual Inclusion Awareness Day to celebrate how your congregation welcomes worshippers of all abilities. Visit www.InclusionInWorship.org for ideas.

8. Consult a person who uses a wheelchair, walker or crutches when planning renovations or additions.

9. Understand that previous negative experiences may cause individuals with disabilities to initially decline your invitation to participate. Don’t hesitate to extend additional invitations.

10. List accessible features and supports available in a permanent “For your comfort and convenience…” section of the bulletin or worship aide.
GUIDELINES FOR CLERGY, USHERS AND LAY LEADERS

GENERAL INFORMATION

1. What do you say when you meet a person with a disability? How about, “Hello?”
2. A warm smile and friendly conversation are very welcoming.
3. Speak directly to the person with a disability, not only to the family member, companion, interpreter, or canine companion.
4. Use people-first language such as “people with disabilities” or “a parishioner who is blind” NOT “the disabled,” NOT “a blind parishioner.”
5. Ask the person with the disability HOW you can help. Respect any refusal.
6. Offer accessible seating, large-print bulletins, missalettes, or assistive listening devices. Know where accessible washrooms are.
7. Recognize that each person has gifts and abilities. Ask parishioners with disabilities if they would like to usher, bring up the gifts, proclaim the word, etc.
8. Be sensitive to where a person wishes to receive communion – at their seat or at the altar- and make sure they are accommodated.
9. Feel comfortable using words like see, walk, and listen with persons with disabilities.
10. Use the accessibility logo in print materials and on signage. Include the words “All Are Welcome.”

WELCOMING PEOPLE WHO ARE BLIND OR HAVE VISION LOSS

1. Identify yourself when you greet the person. Tell the person when you are about to leave.
2. Talk normally, using your customary voice and typical expressions like “See you later.”
3. Offer your arm when assisting; the same way an usher does at a wedding.
4. Give verbal cues such as “We are going through a doorway.” Explain the traffic pattern with clear, calm instructions such as “Go up the center aisle.”

Pathways
150 North Michigan Ave., Suite 2100, Chicago, IL 60601 • www.InclusionInWorship.org • (800) 955-CHILD (2445) • info@InclusionInWorship.org
WELCOMING PEOPLE WITH MOBILITY DIFFERENCES

1. Speak directly to the person.
2. Offer assistance, but accept a “No, thank you.”
3. Sit down so that you are at eye-level if the conversation will last more than a few minutes.
4. Shake hands or lightly touch a shoulder in the same way you would with others.
5. Keep a person’s wheelchair or walker near the person. A person who uses a chair may be able to walk but still needs the chair.

WELCOMING PEOPLE WHO ARE DEAF OR HARD OF HEARING LOSS

1. Face the person. He/she will appreciate seeing your facial expression and may read your lips. Your face, gestures, and body movements help in understanding.
3. Speak clearly and slowly. Writing may be necessary.

WELCOMING PEOPLE WITH SPEECH DIFFERENCES

1. Be patient. Let a person talk at his/her own pace.
2. Remember a person may have communication means other than speech, such as writing.
3. Ask questions that require short answers or a shake of the head. If you cannot understand, rephrase the question.
4. Repeat or paraphrase what was said in order to confirm that you understand.

WELCOMING PEOPLE WITH COGNITIVE DIFFERENCES

1. Greet the person and interact normally.
2. Keep things simple and uncomplicated.
3. Treat people equally regardless of participation level; give prayer books or hymnals to all; allow everyone a chance to speak.

Please duplicate and share with others.
COMMUNICATION

Some good ideas used by congregations to welcome parishioners of all abilities and their families in the area of communication:

- Worshhip services are presented verbally and visually, dramatically and musically for different learning styles.

- Sermons or entire worship services are recorded on audiotape or are available in large print.

- Amplifying sound system is in good order. Assistive listening devices are available for those with hearing difficulties.

- Lighting is surveyed to ensure that the wattage is high enough and that the placement of fixtures ensures maximum visibility.

- Parish staff and receptionists know that persons with disabilities are intentionally included in all parish programs and communicate that information to callers, connecting them to the appropriate person to meet their needs.

- A comfortable way to offer suggestions for inclusion is created for parishioners of all abilities and their families so they are not made to feel like “complainers”.

- Sign language interpreter is available for worship service on a regular basis.

- The words “Stand or sit as you are able” and “Kneel or sit as you are able” are used in worship aides to direct the congregation.

- The faith community consistently publicizes that persons with disabilities are intentionally included in worship, ministry, fellowship and study.

- Transportation is personally offered to people in need and provided on a consistent basis. This availability is also communicated in bulletins and event announcements.
TEN EASY WAYS TO WELCOME PARISHIONERS OF ALL ABILITIES IN THE AREA OF COMMUNICATION

1. State the desire to be intentionally inclusive in the faith community’s mission statement.

2. Use “people first” language in homilies, sermons, and bulletin articles.

3. Use access symbols in newspaper advertisements, event announcements and signage to publicize accessible features already in place. See access symbols in this folder.

4. Include the words “All are welcome. Please call (insert phone number) so that we can provide accommodations for your participation” in all event announcements.

5. Personally invite congregants with disabilities to participate in ministries, clubs, religious education programs, and events and arrange any accommodations to make participation possible.

6. Make large print prayer books, missals, Bibles, bulletins and hymnals (such as this 14 point bold type) available.

7. Provide homilies on audiotape or in large-print and promote their availability in the bulletin.

8. Keep individuals with visual impairments informed by announcing information from the bulletin at the end of the worship service.

9. When new members join your congregation, ask, in a sensitive and dignified way, if any accommodations would enhance their participation in the faith community.

10. Invite congregants who cannot regularly attend services or events to contribute to the faith community through a “ministry of prayer”.

Pathways
150 North Michigan Ave., Suite 2100, Chicago, IL 60601
www.InclusionInWorship.org • (800)955-CHILD (2445) • info@InclusionInWorship.org
COMMUNICATION RESOURCES

LARGE PRINT LITURGY AIDES

J.S. Paluch Co., Inc.  Sunday Missal Service
3825 North Willow Road  1012 Vermont Street
P.O. Box 2703  Quincy, IL 62301
Schiller Park, IL 60176  (800) 635-0622
(800) 621-5197  American Catholic Press
(847) 678-9300

Oregon Catholic Press  16565 South State Street
P.O. Box 18030  South Holland, IL 60473
Portland, OR 97218-0030  708-331-5485
(800) 548-8749  www.leafletmissal.com

Pathways.org has also been advised that some congregations make enlarged photocopies of their worship aides and leave copies at the entrances of the Church.

BRAILLE AND AUDIOTAPE RESOURCES

Xavier Society  Johanna Bureau
154 East 23rd Street  8 S. Michigan Avenue
New York, NY 10010-4595  Chicago, IL 60603
(800) 637-9193  (312) 332-6076

Guild for the Blind  The Chicago Lighthouse
180 N. Michigan Avenue  1850 W. Roosevelt Rd.
Suite 1700  Chicago, IL 60608
Chicago, IL 60601  (312) 666 1331
(312) 236-8569  www.thechicagolighthouse.org

ASSISTIVE LISTENING DEVICES

Assistive listening devices pick up sound, amplify the sound, and deliver the amplified sound to the user’s ear. Several types are available. Contact your current sound system manager for more information on the types of assistive listening devices and how to install them.
SIGN LANGUAGE INTERPRETER RESOURCES

Chicago Hearing Society
2001 N. Clybourn Avenue
2nd Floor
Chicago, IL 60614
(773) 248-9121 ext. 311
Call for current rates.

Chicago Area Interpreters Service (CAIRS)
36 S. Wabash
Suite 714
Chicago, IL 60603
(312) 895-4300
Call for current rates.

Archdiocese of Chicago
Catholic Office of the Deaf
721 N. LaSalle Street
Chicago, IL 60610
312-655-7899
Email: cathdeafchurch@archchicago.org
Call for rates and availability.

Harper Junior College
1200 Algonquin Road
Palatine, IL 60076
(847) 925-6415
Ms. Joan Fiske, Sign Language Instructor
Call for student interpreter availability. Free of charge. Fulfills student’s community service requirement.

Waubansee Community College
Department of Sign Language Interpreter Training
5 East Galena Blvd.
Aurora, IL 60506
(630) 906-4114
Inquire about student interpreter availability.

UNIVERSAL ACCESS SIGNS

Large Print

Sign Language

Audio Describes

Handicap Accessible
Some good ideas used by congregations to welcome parishioners of all abilities and their families in the area of accessibility:

- It is possible to get from a parked car to worship services without going up or down a step.
- A bathroom with wheelchair-accessible facilities is available on the worship floor.
- A button can open at least one heavy entrance door.
- Marked, accessible parking spaces for cars and vans are close to accessible entrances.
- Front pew kneeler has been removed for persons using wheelchairs, canes, crutches, or walking frame and their families.
- Sanctuary area is accessible. Podium and/or microphone are adjustable for person’s height or a lapel microphone is available.
- Architecture committee consults with persons who use wheelchairs, walkers, crutches or canes in every phase of evaluation and planning for modification or addition to all church buildings.
- Sidewalks have curb cuts and entrances have ramps.
- A whole fundraising strategy is created to raise money for long-term architectural modifications. Fundraising can include bake sales, car washes and memorial contributions.
- Choir area allows persons using wheelchairs to participate.
- Doors are 36 inches wide and are level with the doorsill of each entrance.
TEN EASY WAYS TO WELCOME PARISHIONERS OF ALL ABILITIES IN THE AREA OF ACCESSIBILITY

1. Use universal design concepts to plan buildings, programs, ministries and events so that all can participate. See the following page for more information on universal design.

2. Move Sunday school classes, fellowship activities and meetings to accessible areas.

3. Encourage church members to designate memorial gifts for accessibility projects.

4. Install long-handled door hardware. It is easier for everyone to use, not only those with impaired hand function.

5. Place pews 32 inches apart to allow space for people who use walkers, crutches and canes.

6. Provide padded seating or have chair pads available. Provide chairs with arms for those who have difficulty rising.

7. Open the ends of several existing pews so that people using wheelchairs may be seated with their families and friends rather than in specially designated segregated sections.

8. Think about converting two side-by-side bathrooms into one accessible, unisex bathroom so caregivers can assist.

9. Consult with persons who use wheelchairs, walkers, crutches, or canes in every phase of planning new construction, building modifications or additions to buildings.

10. Explore ways of including members of your congregation who have disabilities in the education, fellowship, ministry, and worship of the faith community. Often simple accommodations can make participation possible.
UNIVERSAL DESIGN/DESIGN FOR ALL

Changes in access to our buildings benefit all of us . . . a child in a stroller, persons with a temporary cast, crutches, cane or wheelchair and persons needing accessibility more permanently.

Universal design is design that works beautifully and seamlessly for as many people as possible regardless of disability or age. Universal design creates access that is beneficial to all rather than focusing on differing requirements for different people.

CONSTRUCTING A NEW RAMP

Ramps are the most common method of creating an accessible route of travel when bridging a height difference up to several feet. A straight ramp is the easiest to use since it requires no turns by the user.

Ramps should include:

- curbs or railings on both sides of the ramp
- 36-inch minimum width between the handrails
- a slip-resistant surface
- a slope as close to 1/2 inch of rise for every 12 inches of run is ideal—check with a person using a wheelchair or a walker.

CREATING AN ACCESSIBLE PASSENGER DROP-OFF

A safe, accessible drop-off creates an area where all users can get out of or into their cars or vans and get directly onto an accessible route. A facility that requires automobile access but doesn’t have an accessible passenger drop-off can force a user with a disability to not use the facility at all.

An accessible drop-off area includes:

- a level surface and a 5’ x 20’ access aisle adjacent to the vehicle space
- curb cuts, if necessary, to provide access from the vehicle space to the sidewalk
- clearly posted signs with the accessibility logo
- location as close as possible to accessible entrances
INSTALLING ACCESSIBLE PARKING SPACES

Parking spaces are often the first part of an accessible route of travel for people with disabilities. Proper design and location can create the difference between an accessible and an inaccessible church facility and can ensure the safety of the people using them. One in twenty-five spaces should be accessible.

Accessible parking spaces for cars and vans should be:

- clearly marked with signs showing the accessibility symbol
- 8’ wide with a 5’ access aisle (two spaces can share one aisle)
- 8’ wide with an 8’ access aisle for vans with side-mounted lifts or ramps. Van accessible spaces should be clearly marked with signs indicating the larger access aisle. One in every eight accessible spaces should be designed for lift equipped vans.
- designed so that a curb cut is located within the access aisle boundaries, not the parking space boundaries.

“The creation of a fully accessible parish reaches beyond mere physical accommodations to encompass the attitudes of all parishioners toward persons with disabilities. Pastoral ministers are encouraged to develop specific programs aimed at forming a community of believers known for its joyful inclusion of all of God’s people around the table of the Lord.”

United States Catholic Conference of Bishops
Guidelines for the Celebration of Sacraments
BLESSING A NEW ACCESS FEATURE

Efforts to create access through accommodations such as ramps, elevators, assistive listening devices etc. should be acknowledged and celebrated. The ritual below can be adapted to bless any new accommodation and can be used as a standalone service or for inclusion within a regular weekly worship service. In addition, access symbols should be posted on the building and used in bulletins, flyers, or other advertisements so that people will know of the availability of accommodations.

Presider: Welcome the assembly and explain the history of the new accommodation that the worshipping community has provided.

Begin the blessing ceremony with the following prayer:

Opening Prayer
Presider: Let us pray. Living and true God, You created all that is good and holy. Be close to your servants who gather here today. Be their constant help and protection. Enable us to reach out to all Your children to show understanding and awareness, comfort and consolation, justice and equality. We ask this through Jesus Christ Your Son, our Lord, who lives and reigns with you and the Holy Spirit, one God, forever and ever.

All: Amen

Blessing
Presider: Creator God, you give us all good things. You know our needs and fulfill our desires. You protect all of us when we are fragile and give all of us courage when we are weak. Bless this new [name the new access feature] and those who will use it. May it open up a world of new possibilities for our community. May it bring worshipers to our assembly, students to Your saving Word and seekers to Your divine love.

All: Amen

Presider sprinkles the new access feature with holy water.

Intercessions
Presider: Confident that we are all God’s children, let us approach Him with our petitions.

Minister: For creativity and sensitivity in breaking down barriers in attitude and in architecture we pray…

All: Lord, make us one.
Minister: That our worshipping community may continue Jesus’ mission of love for all people, offering appropriate support and services, we pray…

All: Lord, make us one.

Minister: That members with disabilities may respond with trust to our efforts to involve them more fully in the life of the Church, we pray…

All: Lord, make us one.

Minister: That we may be grateful for the gifts and abilities of every member of the Body of Christ, we pray…

All: Lord, make us one.

Minister: That the Lord will give each of us the strength to understand and accept our own disabilities, especially those that hinder our growth in God’s love, we pray…

All: Lord, make us one.

Presider: God of love, our refuge and our strength, hear the prayers of Your church, which we offer in faith. We ask this through Christ our Lord. Amen.

**The Lord’s Prayer**

Presider: Gathering our prayer and praise into one, let us offer the prayer that Christ himself taught us to pray…

All: Our Father …

Sign of Peace

Presider: Let us offer one another a sign of Christ’s peace.

**Conclusion**

Presider: Let us offer our final Prayer for Awareness.

All: God, Creator of all, help us to recognize that each of us has abilities and each of us has limitations. And yet we all have a part to play in bringing about Your Kingdom. You love each of us profoundly. In the spirit of gratitude and solidarity, we ask you to increase our awareness of both the gifts and the needs of those around us. Open our hearts, minds and doors to the gifts of every person. Help us to become truly welcoming communities where everyone can find their place at Your table. We ask this in Your name, Amen.
WELCOMING PARISHIONERS OF ALL ABILITIES
POINTS TO REMEMBER

Remember that we all have disabilities.

Remember that a person who has a disability is a PERSON—like anyone else.

Speak directly to a person with a disability. Don’t consider a companion to be a conversational go-between.

Converse with a person with a disability as you would with anyone else. Explore your mutual interests in a friendly way.

Offer assistance if asked or if the need seems obvious, in which case ask simply, “Do you need help? How should I help you?” Respect the person’s right to indicate the kind of help needed.

Talk about the disability if it comes up naturally, without prying.

Don’t be embarrassed over common expressions that call attention to a disability—like asking a person who is deaf if he/she has heard some news. You are most likely to be sensitive to the expression than the person to whom you are talking.

Appreciate what the person CAN do. Remember that difficulties the person may be facing may stem more from society’s attitudes and barriers than from the disability.

Do not shout at people with vision loss. They have lost their vision, not their hearing. Use graphic language when directing someone who is blind. Indicate distances and obstacles that might be in the way.

Don’t provide words for someone who stutters or speaks with difficulty. Be patient and listen. If you do not understand, be honest and ask the speaker to repeat. When necessary, ask questions that require short answers or a shake of the head.

Always face a person with a hearing loss. Be sure the person can see your lips. Speak clearly without exaggerating lip movements. Use gestures to aid communication. When full understanding is doubtful, write notes.

Don’t move a wheelchair or crutches out of reach of the person who uses them.

Never start to push a wheelchair without first asking the occupant if you may do so.
APPROPRIATE TERMINOLOGY

People with disabilities want to be treated respectfully as individuals, they are not looking for sympathy or pity, they are not “afflicted” or “suffering” from their disability. Understanding and using appropriate terminology when speaking about people of diverse abilities is respectful.

Age-related Macular Degeneration (AMD) — Age related macular degeneration (AMD) is an eye disease that is present to at least a mild degree in millions of older Americans. It is a leading cause of visual loss in this country. AMD affects the macula, a small portion of the retina. The retina is the light-sensing nerve tissue that lines the inside of the eye. All parts of the retina contribute to sight, but only the macula can provide the sharp, straight-ahead vision that is needed for driving and reading small print. As a person ages, changes may occur in this small but important area of the retina, causing difficulties in reading and other tasks that require good central vision.

Amyotrophic Lateral Sclerosis — also known as Lou Gherig’s Disease is one of nine forms of muscular dystrophy is a disease of the motor neurons, muscle-controlling nerve cells in the brain and spinal cord that control voluntary muscle movement.

Arthritis — Inflammation of one or more joints. Of the two forms of arthritis, osteoarthritis and rheumatoid arthritis, the latter is more likely to be disabling. Rheumatoid arthritis is a chronic, progressive, systemic disorder that can result in joint destruction, pain and lack of mobility.

Attention deficit hyperactivity disorder — a developmental disability estimated to affect between 3-5% of all children. It is characterized by inattentiveness, impulsive behavior and in many cases, but not all, restlessness or hyperactivity.

Autism — A developmental disability significantly affecting verbal and non-verbal communication and social interaction, generally evident before age three that adversely affects educational performance.

Blindness — Refers to total loss of vision and should not be used when referring to partial vision loss.

Cataracts — Occurs when the lens becomes opaque, resulting in severely distorted vision or total blindness. Surgical treatment for cataracts (such as lens implants) has advanced rapidly in recent years returning to the individual most of the vision that was lost.

Cerebral Palsy — (C.P.) Cerebral palsy is a term used to describe a group of
conditions affecting body movement and muscle coordination. It is caused by damage to one or more specific areas of the brain, usually occurring during fetal development; before, during, or shortly after birth; or during infancy. "Cerebral" refers to the brain and "palsy" to muscle weakness/poor control. Cerebral palsy is not communicable. It is not a disease and should not be referred to as such. Training and physical therapy help improve function. (United Cerebral Palsy)

Cerebral Vascular Accident (Stroke) — Cerebral Vascular Accident (CVA) occurs when normal circulation of blood through the brain is interrupted by an obstruction of a blood vessel by a clot or abnormal mass, or by hemorrhage. Deprived of oxygen-filled blood, brain cells are destroyed and cease to control body activities normally under their direction. CVA may result in hemiplegia (numbness and paralysis on one side), and speech and language difficulties.

Child Find — a service directed by each state's Department of Education or lead agency for identifying and diagnosing underserved children with disabilities. While Child Find looks for all underserved children, it makes a special effort to identify children from birth to six years old.

Cognitive Disability — a particular state of functioning that begins in childhood (before the age of 18) and is characterized by limitations in both intelligence and adaptive skills. Within an individual, limitations often coexist with strengths. With the appropriate supports over a sustained period of time, the life functioning of the person with a cognitive disability generally will improve. The term mental retardation is considered demeaning by many people and should be avoided.

Congenital Disability — a condition that exists at birth. The term “birth defect” is not appropriate because “defect” is not a synonym for disability.

Deaf — Total loss of hearing. Most people who are deaf cannot speak or cannot speak clearly because their hearing is impaired. Deaf-mute and deaf and dumb are inaccurate descriptions and should never be used.

Disability — The National Catholic Partnership on Disability defines disability as the normal and anticipated outcome of the risks, strains, and stresses of the living process itself from birth to advanced age. Disabilities are to be expected within any community. Use disability rather than handicap. E.g., “There are approximately 43 million individuals with disabilities in this country.”

Down Syndrome — A genetic condition that causes delays in physical and intellectual development. It occurs in approximately one in 800 births. Individuals with Down Syndrome have 47 chromosomes instead of the usual 46. (National Association on Down Syndrome) When referring to someone with Down Syndrome
do not use demeaning and outdated terms such as mongoloid or mongoloidism.

**Early Intervention Services** — Services for infants and toddlers that are designed to identify and treat developmental delays as early as possible. Early intervention services are provided after an assessment and evaluation determines the need for services. Services can be provided in the home, clinic, daycare center, hospital or local health department. (NICHCY)

**Epilepsy** — Epilepsy is a neurological condition that makes people susceptible to seizures. A seizure is a change in sensation, awareness, or behavior brought about by a brief electrical disturbance in the brain. Seizures vary from a momentary disruption of the senses, to short periods of unconsciousness or staring spells, to convulsions. (Epilepsy Foundation)

**Hard of Hearing** — Hearing loss that limits functional communication.

**IDEA** — Also known as PL94-142. Federal law that requires all states to provide public school education to children with disabilities age 3-21 no matter how severe the disabilities.

**IFSP** — Individualized Family Service Plan that describes a plan for early intervention services needed. It lists outcomes expected, the services the child will receive, when and where services will be received and a transition plan into the next intervention program.

**Inclusion** — Offering respect and the opportunity to participate to all people.

**Learning Disability** — A disorder affecting the understanding or use of spoken and/or written language.

**LRE** — Least Restrictive Environment- an educational setting that provides a student with disabilities with the chance to work and learn with as much contact as possible with children without disabilities, while meeting all of the child's learning needs and physical requirements.

**Mental Illness/ Mental Disorder** — Physical brain disorders that profoundly disrupt a person’s ability to think, feel, and relate to others and their environment. (Commission on Mental Illness, Archdiocese of Chicago) Demeaning terms such as mentally deranged, deviant, neurotic, psychopathic, schizophrenic and crazy are not appropriate.

**Multiple Sclerosis (MS)** — MS is thought to be an auto-immune disease that affects the central nervous system (CNS). The CNS consists of the brain, spinal
cord, and the optic nerves. Surrounding and protecting the nerve fibers of the CNS is a fatty tissue called myelin, which helps nerve fibers conduct electrical impulses. In MS, myelin is lost in multiple areas, leaving scar tissue called sclerosis. When myelin or the nerve fiber is destroyed or damaged, the ability of the nerves to conduct electrical impulses to and from the brain is disrupted, and this produces the various symptoms of MS. MS can be characterized by periods of remission and persistently recurring exacerbations. (National Multiple Sclerosis Society)

Muscular Dystrophy (MD) — There are nine types of muscular dystrophy, a group of genetic, degenerative diseases primarily affecting voluntary muscles. Heart muscle may also be affected, resulting in symptoms of heart failure. Duchene type muscular dystrophy (DMD) is the most severe form.

Occupational therapy — A therapy or treatment provided by an occupational therapist that helps individual developmental or physical skills that will aid in daily living; it focuses on sensory integration, on coordination of movement, and on fine motor and self-help skills, such as dressing, eating with a fork and spoon, etc.

Paraplegia — Total or partial paralysis of both lower limbs. Paraplegia is caused by spinal cord injury or disease.

People First Language — When writing or speaking about parishioners of all abilities, words should be chosen with care in order to promote dignity and a positive image. People first language focuses on the person first rather than a disability. You identify the person first, by saying a person with a disability or a person who is deaf rather than using disabled person or deaf person.

Physical therapy — Treatment of movement differences by a trained physical therapist (under doctor’s orders) that includes the use of massage, exercise, etc. to help improve the use of bones, muscles, joints, and nerves.

Poliomyelitis polio) — Acute poliomyelitis is a viral infection of the anterior horn cells within the spinal cord causing varying degrees of muscle paralysis while sensation remains intact. Poliomyelitis destroys some of the muscle fibers and thus the remaining musculature has to function at a higher demand than normal. Individuals improve their function through substitution of other muscles or using passive tendon tension by alternate posturing. Substitution is exquisitely effective. It also introduces the potential for overuse of remaining muscles.

Post-polio syndrome — Post-polio syndrome (PPS) is a condition that affects people who had polio anywhere from 10 to 40 years after recovery from an initial paralytic attack of the poliomyelitis virus. It is characterized by loss of strength,
increased fatigue, and muscle or joint pain.

**Quadriplegia** — Paralysis of all four limbs caused by traumatic injury to or disease of the spinal cord in the neck. Extent of the paralysis often depends on the location of the injury on the spinal cord. Some limited use of upper limbs may be maintained.

**Retinal Detachment** — Occurs when the retina separates from the choroid and the sclera. This detachment may result from glaucoma, retinal degeneration, or extreme myopia. It can also be caused by trauma to the eye.

**Retinitis Pigmentosa** — The most common heredity condition associated with loss of vision appears initially as night blindness and can result in total blindness.

**Short Stature** — Describes people who are under 4’10”. There are more than 80 distinct types of short stature. Most types are hereditary. Do not use the terms dwarf or midget. Say a person of “short stature”.

**Speech Impairment** — Limited or difficult speech patterns

**Spina Bifida** — Spina bifida is the failure of the fetus's spine to close properly during the first month of pregnancy. Surgery to close the newborn's spinal opening is generally performed within 24 hours after birth to minimize the risk of infection and to preserve existing function in the spinal cord. The effects of spina bifida vary. (National Institute of Spinal Disorders)

**Spinal cord injury (SCI)** — Spinal cord injury occurs when the spinal cord is traumatized or severed. Trauma can result through a fall, an automobile accident, or a sports injury. The overall impact of injury on an individual depends on the site and nature of the insult. If the injury occurs in the neck or upper back, the resulting paralysis affects all four extremities (quadriplegia). If the injury occurs in the lower back, paralysis is confined to the lower extremities (paraplegia).

**Wheelchair** — When referring to someone who uses a wheelchair say he or she uses a wheelchair rather than wheelchair bound or confined to a wheelchair. People are not confined or bound to their wheelchairs, they use them for mobility.
“We need to take a look at how the architecture of our church buildings affects who can participate in worship and other activities.”

Joseph Cardinal Bernardin

Open Hearts, Open Minds, Open Doors
TIPS FOR WORKING WITH INDIVIDUALS OF VARYING ABILITIES
HEARING LOSS

10% of the population experiences some degree of hearing loss.

The degree of hearing loss and the onset of hearing loss play an important part in the language development of a person with a hearing loss.

Hearing loss can be:

Mild—This may pass unnoticed with slight difficulty hearing distant speech or background noises. Psychologically, however, it is the impaired awareness and the environmental detachment, which are of most importance. The extent of the difficulty experienced will be dependent on how great the loss is, distance from the sound source and the quality of the sound.

Moderate—Generally understands conversational speech within a range of three to five feet. Socialization is definitely affected. The use of amplification makes conversation possible, but it is limited to one person or a small group. The person experiences much detachment and seeks social relationships with others having similar degrees of deafness.

Severe—Sounds must be loud and distance small for conversation to be heard with the help of technology. Person will have considerable difficulty unless conversation is directed exclusively to him or her.

Profound—Unable to hear sound even with the help of technology.
HELPFUL POINTS: HEARING LOSS

WHEN SPEAKING WITH A PERSON WHO IS DEAF:

- Talk naturally, neither too fast nor too slow.
- Use a phrase or a sentence, not single words. Establish the topic first.
- Avoid repeating the same thing in the same way. Change it.
- Discourage the analysis of every word.
- Face the person in such a way to permit him to lip-read without strain.
- Avoid glare from behind. It makes it difficult to read the lips. The light, daylight or artificial, should be on the speaker’s face.
- Avoid shouting. This may impair the satisfactory relationship between speaker and lip reader so essential to successful communication, especially when the person is hard of hearing.
- Be natural. Speak distinctly and do not slow down the tempo too suddenly.
- Enunciate clearly. Beware of overemphasizing speech or exaggerated movements.
- If a person who is deaf is with hearing persons, an effort should be made to make him/her feel a part of the group. Speak to him/her. If speech doesn’t suffice then use a pad and pencil, gestures and signs.
- The voice should not be raised to an unusual pitch, but a moderate increase in intensity may be necessary.
- If what is said is not understood, rephrase the statement immediately. When the key words are not understood, there is no comprehension. The key word may not show on the lips. There are many words such as uncle, cousin, sister, dinner, which have no lip movements. Words like father, mother, brother, beautiful and love are “outside” words, and are readily seen on the lips.
WHAT ARE ASSISTIVE LISTENING DEVICES (ALDS)?

Assisted listening devices help hard of hearing people to hear better and understand more in large areas that are subject to interference such as background noise, reverberation and distance between the speaker and listener. Used with microphones placed appropriately, or coupled to an existing public address system, ALDs deliver sound (signal) directly to the listener’s ear at a consistent volume, despite interference (noise).

Audio Induction Loop System: A microphone or sound source is connected to an amplifier’s audio input. This signal is then fed into a coil of wire that is placed around the perimeter of the seating arrangement. A listener within the loop encircled area picks up the signal inductively through a hearing aid equipped with a telecoil (denoted by a “T” position on the aid’s on/off switch); or, if without hearing aids, by using a receiver/device with built in telecoil, volume control and ear-piece. Subject to signal “spillover” into areas above, below and adjacent to the looped area.

FM system: A wireless system. Uses a designated FM radio frequency to carry a signal (transmits good sound fidelity) to receivers/devices used by listeners seated anywhere within limited range. It will broadcast through walls.

AM system (also called wireless) - Uses a selected AM radio frequency to broadcast a signal (subject to interference) to receivers/devices and personal AM radios tuned to that exact frequency. It will broadcast through walls and has a limited range.

Infrared System: A panel(s) of emitters floods the seating area with invisible, harmless infrared light rays, transmitting signal (sound). Listeners use receivers/devices that pick up the signal, converting it into sound. Receivers must be worn in the panel’s direct line of sight. The Signal is contained within the walls of the covered area.

Hardwired System: Each listener is directly connected to the sound source, i.e., a unit/device with volume control and earpiece, permanently mounted at the designated seat(s).
INTELLECTUAL DISABILITIES

Intellectual or Developmental Disability is a particular state of functioning that begins in childhood and is characterized by limitations in both intelligence and adaptive skills.

Intelligence refers to a general mental capability. It involves the ability to reason, plan, solve problems, think abstractly, comprehend complex ideas, learn quickly, and learn from experience.

Adaptive skills are the collection of conceptual, social, and practical skills that people have learned so they can function in their everyday lives. Significant limitations in adaptive behavior impact a person's daily life and affect the ability to respond to a particular situation or to the environment.

Specific examples of adaptive behaviors are:

**Conceptual Skills**
- Receptive and expressive language
- Reading and writing
- Money concepts
- Time concepts
- Multiple instructions
- Self-direction

**Social Skills**
- Interpersonal
- Responsibility
- Self-esteem
- Gullibility (likelihood of being tricked or manipulated)
- Naïveté
- Follows rules
- Obey's laws
- Avoids victimization

**Practical Skills**
- Personal activities of daily living such as eating, dressing, mobility and toileting.
- Instrumental activities of daily living such as preparing meals, taking medication, using the telephone, managing money, using transportation and doing housekeeping activities.
Occupational Skills

Maintaining a safe environment

Offering supports to individuals with intellectual disabilities can promote their inclusion. (Adapted from the American Association on Intellectual and Developmental Disabilities website www.aarm.org)

Definition of Intellectual Disability

The American Association on Intellectual and Developmental Disabilities (AAIDD) Definition of Intellectual Disability:

Intellectual disability is a disability characterized by significant limitations both in intellectual functioning and in adaptive behavior as expressed in conceptual, social, and practical adaptive skills.

This disability originates before age 18.

Five Assumptions Essential to the Application of the Definition

1. Limitations in present functioning must be considered within the context of community environments typical of the individual's age peers and culture.
2. Valid assessment considers cultural and linguistic diversity as well as differences in communication, sensory, motor, and behavioral factors.
3. Within an individual, limitations often coexist with strengths.
4. An important purpose of describing limitations is to develop a profile of needed supports.
5. With appropriate personalized supports over a sustained period, the life functioning of the person with an intellectual disability generally will improve.
AUTISM AND PERSVasive DEVELOPMENTAL DISORDER

The IDEA defines autism as “a developmental disability significantly affecting verbal and non-verbal communication and social interaction, generally evident before age three, that adversely affects educational performance.” Autism and pervasive developmental disorder are developmental disabilities that share many of the same characteristics. Usually evident by age three, autism and pervasive developmental disorder are neurological disorders that affect a child’s ability to communicate, understand language, play and relate to others.

A diagnosis of autism is based on identification of a number of symptoms relating to social interaction, communication, and restricted repertoire of activities and interests. When fewer symptoms are identified, the child is diagnosed as having pervasive developmental disorder. Due to the similarity of behaviors associated with autism and pervasive developmental disorder, use of the term “pervasive developmental disorder” has caused some confusion among parents and professionals. However, the treatment and educational needs are the same for both diagnoses.

Some or all of the following characteristics may be observed in children with the diagnosis of autism:

- Communication problems (e.g., using and understanding language).
- Difficulty relating to people, objects and events.
- Unusual play with toys and other objects
- Difficulty with changes in routine or familiar surroundings.
- Repetitive body movements or behavior patterns.

Children with autism or pervasive developmental disorder vary widely in abilities, intelligence, and behaviors. Some children do not speak; others have limited language that often includes repeated phrases or conversations. Persons with more advanced language skills tend to use a small range of topics and have difficulty with abstract concepts. Repetitive play skills, a limited range of interests, and impaired social skills are generally evident as well. Unusual responses to sensory information, for example, loud noises, lights, certain textures of food or fabrics, are also common.
TIPS FOR TEACHERS AND PARENTS

FAITH SHARING IDEAS FOR THE MASS

Diocese of Pittsburgh
Secretariat for Education
God’s Love Embraces Autism (GLEA)

We started with the assumption that if our children with autism were acting up at Mass, it was not necessarily due to bad behavior. Taking into consideration the “sensory” and rigidity” issues that accompany autism, acting up could be due to our children’s unfamiliarity or discomfort with their surroundings. Churches, most often, are large, cavernous, “echo-y” places that can create all kinds of auditory processing discomfort for our kids.

We found that it helped if we took our sons into the empty church and let them wander freely and touch everything. Of course, they were drawn to the altar area, (which should be the focus) but is also an area deserving of great reverence. Since our children show their reverence in non-typical ways, a talk with parish priests is a good idea before letting kids loose. We found that one visit is far from enough. Often, you'll need to visit repeatedly before the child is comfortable.

Doris’ Experiences with Michael

Doris is a cantor at her church. While she rehearsed with the organist, her sons, E.J. and Michael roamed around the altar area. (Michael has autism.) After that exposure, she noticed a marked difference in Michael’s comfort level and calmness at Mass. Of course, Doris, right from the beginning would reinforce the concept:

“At practice, we are on the altar.”
“At Mass, we sit in the pew.”

She also discovered that Michael’s behavior was much better if they sat in the first row, with no other people or distractions between him and the altar. The front pew is not necessarily the first place a family who has a child with autism would pick. However, it can truly make a difference in the child’s ability to focus and thus participate in the Mass. Again, a talk with the parish priests, Eucharistic ministers, lectors, ushers, etc. is a good idea to garner support and understanding for your child’s attendance at Mass.

In addition, Doris found that Michael was less "fidgety" if he had something in his hands. She’d bring a small packet of “fidget items” --- rosary beads, a worry stone.
Anita’s Experiences with Michael
Anita, mother of Michael and Jason, introduced them to their church a bit differently. (Michael has autism.) She also wanted Michael to be more familiar with the Church and would bring him for explorations in the empty church. She found it helpful to bring a list of items for him to find. This list helped him to focus on where he was. The list might be something like:

- find the altar
- find the pulpit
- find the Bible
- find the chalice, etc.

The list could be as long or as short as the child’s attention span. Lists could vary from visit to visit. Some children may need the interaction of placing a sticker or checkmark after each item found. If a child doesn’t read, a picture list could be made. You could individualize a list for your own child.

Anita found that here Michael didn’t respond as well to “fidget items” in his hands as well as he did to books. He was fascinated with books, even before he could read. She shopped around and found a variety of beginner Bibles and “easy-read” religious stories for him. The books, as well as sitting near the front of the church or close to the choir or organ music helped Michael to focus and participate. As Michael has gotten older, he has responded to more of a delayed reward system. “If you’re good at Mass, you can have a video, etc. when we get home.”

Katie’s Experience with Bill

My son, Bill, has autism. We also brought Bill and his younger brother, Kevin on visits to our empty church. Along with running up and down aisles, Bill was fascinated by the statues. He would hug them (with supervision) or jump up and down in front of them (a form of prayer, we like to think).

When Bill developed language, our true problems at Mass began. Bill’s language is a mixture of appropriate, repetitive “chatter”. This chatter can be constant and is at one volume setting: LOUD! Bill could not lower his voice more than a few seconds at a time. As much as we wanted Bill to be at Mass, we also didn’t want to overwhelm the rest of the congregation.

We spoke with our parish priest and he suggested that we try a combination of things. We started by putting Bill in the babysitting program at the 10:00 Mass, although he was technically too old. Then we’d bring Bill into the church for Communion and the end of Mass. (We did have to give the babysitters a crash course in autism!)

As Bill has gotten older, we dropped the babysitting program and moved into the
family room. Father suggested that Bill could go back and forth between the family room and the regular congregation as needed. His loud and exuberant commentary has necessitated that we stay mainly in the family room. We always come out for Communion though, and this can be quite an experience. We never know what Bill may say on his way down the aisle. He may say bits of prayers which he often combines with his favorite topics – Disney characters and Star Wars. I think his image of the Blessed Mother is a mixture of the traditional “Our Lady in Blue,” Snow White and Cinderella. However, he is filled with excitement when he receives the Host. He may jump up and down and loudly proclaim: “My Lord and my God, yup, I ate Jesus!” Over the years, many people in our parish have become supportive of Bill. Everyone still watches Bill in church (it truly is hard not to). Usually, our family is okay with this but sometimes it is still hard.

To focus on the Mass from the family room, Bill often needs more than books. We noticed that he was quieter if he had a more interactive kind of Mass book. We made him a Velcro “Mass activity book” that involved matching pictures with parts of the Mass as we went along. We even put Velcro on a picture of him so he could put himself next to a picture of the Consecration of Jesus. In addition, Bill loved doing puzzles with a religious theme during the Homily.

We have also practiced parts of the Mass with our sons at home. We repeat the Our Father, the Creed and other prayers that stay the same. We hand-over-hand practice the Sign of the Cross. We practice going to Communion, etc. It does help them focus on these parts of the Mass during Church.

Learning the Mass and participating in the Mass is a life-long journey for all of us. Families who have children with autism just have to be a little more creative as they travel down the path.

Written by:
Katie Blatz
Doris Anne Mercer
Anita Stephens
January 10, 2001
VISION LOSS

Definitions

The term vision loss describes a condition experienced by people with a wide range or educational, social and medical needs directly related to a partial or complete loss of sight. This definition encompasses people who have never had any visual function, those who had normal vision for some years before becoming gradually or suddenly partially or totally blind, those with [disabilities] in addition to the visual loss, those with selective impairments of parts of the visual field, and those with a general degradation of acuity across the visual field. (Warren, 1989, p.155)

A variety of terms are used to describe levels of vision loss, a diversity that has created some confusion among professionals in various fields of study. The rationale for the development of various definitions is directly related to their intended use. For example, eligibility for income-tax exemptions or special assistance from the American Printing House for the Blind requires that individuals with vision loss qualify under one of two general subcategories: blind or partially sighted (low vision).

Blindness

The word blindness has many meanings. In fact, there are over 150 citations for blind in an unabridged dictionary.

Legal Blindness as defined by the Social Security Administration, is a visual acuity of 20/200 or worse in the best eye with best correction, as measured on the Snellen test, or a visual field of 20% or less. The definition of legal blindness includes a wide range of visual ability that involves both acuity and field of vision (Corn & Koenig, 1966.)

Visual Acuity is determined by the use of an index that refers to the distance from which an object can be recognized. The person with normal eyesight is defined as having 20/20 vision. However, if an individual is able to read at 20 feet what a person with normal vision can read at 200 feet then his or her visual acuity would be described at 20/200. Most people consider those who are legally blind to have some light perception; only about 20% are totally without sight.
A person is also considered blind if his or her field of vision is limited at its widest angle to 20 degrees or less. A restricted field of vision is also referred to as **tunnel vision**, pinhole vision or tubular vision. A restricted field of vision severely limits a person’s ability to participate in athletics, read, or drive a car.

Blindness can also be characterized as an educational disability. Educational definitions of blindness focus primarily on students’ ability to use vision as an avenue for learning. Children who are unable to use their sight and rely on other senses, such as hearing and touch, are described as educationally blind.

**Educational Blindness**

in its simplest form, may be defined by whether vision is used as a primary channel of learning. Regardless of the definition used, the purpose of labeling a child as educationally blind is to ensure that he or she receives an appropriate instructional program. This program must assist the student who is blind in utilizing other senses as a means to succeed in a classroom setting and in the future as an independent productive adult.

**Partial Sight (Low Vision)**

People with partial sight or low vision have a visual acuity greater than 20/200 but not greater than 20/70 in the best eye after correction. The field of education also distinguishes between being blind and partially sighted when determining the level and extent of additional support services required by a student. The term **partially sighted** describes people who are able to use vision as a primary source of learning.

A vision specialist often works with students with vision loss to make the best possible use of remaining sight. This includes the elimination of unnecessary glare in the work area, removal of obstacles that could impede mobility, use of large-print books, and use of special lighting to enhance visual opportunities. Although many children with low vision do use printed materials and special lighting in learning activities, some use **Braille** because they can see only shadows and limited movement. These children require tactile or other sensory channels to gain maximum benefit from learning opportunities (Barraga & Erin, 1992).

Two very distinct positions have been formed regarding individuals who are partially sighted and their use of residual vision. The first suggests that such individuals should make maximal use of their functional residual vision through the use of magnification, illumination and specialized teaching aids (e.g., large-print books and
posters), as well as any exercises that will increase the efficiency of remaining vision. This position is contrary to the more traditional philosophy of sight conservation or sight saving, which advocates restricted use of the eye. It was once believed that students with vision loss could keep what sight they had much longer if it was used sparingly. However extended reliance on residual vision in conjunction with visual stimulation training now appears to actually improve a person’s ability to use sight as an avenue for learning.

Muscle Disorders
Muscular defects of the visual system occur when one or more of the major muscles within the eye are weakened in function, resulting in a loss of control and an inability to maintain tension. People with muscle disorders cannot maintain their focus on a given object for even short periods of time. The three types of muscle disorders are nystagmus (uncontrolled rapid eye movement), strabismus (crossed eyes), and amblyopia (an eye that appears normal but does not function properly).

Nystagmus
Is continuous, involuntary, rapid movement of the eyeballs in either a circular or side-to-side pattern.

Strabismus
Occurs when the muscles of the eye are unable to pull equally, thus preventing the eyes from focusing together on the same object. Internal strabismus (esotropia) occurs when the eyes are pulled inward toward the nose; external strabismus (exotropia) occurs when the eyes are pulled out toward the ears. The eyes may also shift on a vertical plan (up and down), but this condition is rare. Strabismus can be corrected through surgical intervention. Persons with strabismus often experience a phenomenon known as double vision, since the deviating eye causes two very different pictures coming to the brain. To correct the double vision and reduce visual confusion, the brain attempts to suppress the image in one eye. As a result, the unused eye loses its ability to see. This condition, known as;

Amblyopia
Can also be corrected by surgery or by forcing the use of the affected eye via patching.

Receptive Eye Problems
Disorders associated with the receptive eye occur when there is a degeneration of or damage to the retina and the optic nerve. These disorders include optic atrophy, retinitis pigmentosa, retinal detachment, retrolental fibroplasia and glaucoma.
Optic atrophy is a degenerative disease that results from the deterioration of nerve fibers connecting the retina to the brain.

Retinitis Pigmentosa is the most common hereditary condition associated with loss of vision, appears initially as night blindness and gradually degenerates the retina. Eventually it results in total blindness.

Retinal Detachment occurs when the retina separates from the choroid and the sclera. This detachment may result from disorders such as glaucoma, retinal degeneration, or extreme myopia. It can also be caused by trauma to the eye, such as boxer’s receiving a hard right hook to the face.

Retinopathy of Prematurity (ROP) formerly known as retrolental fibroplasia, is one of the most devastating eye disorders in young children. It occurs when too much oxygen is administered to premature infants, resulting in the formation of scar tissue behind the lens of the eye, which prevents light rays from reaching the retina. ROP gained attention in the early 1940’s, with the advent of improved incubators for premature infants. These incubators substantially improved the concentration of oxygen available to the infant but resulted in a drastic increase in the number of children with vision loss. The disorder has also been associated with neurological, speech and behavior problems in children and adolescents. Now that a relationship has been established between increased oxygen levels and blindness, premature infants can be protected by careful control of the amount of oxygen received in the early months of life.

CLASSIFICATION OF VISION LOSS

Vision loss may be classified according to the anatomical site of the problem. Anatomical disorders include impairment of the refractive structures of the eye, muscle anomalies in the visual system and problems of the receptive structures of the eye.

Refractive Problems are the most common type of vision loss and occur when the refractive structures of the eye (cornea or lens) fail to focus light rays properly on the retina. The four types of refractive problems are hyperopia, or farsightedness; myopia or nearsightedness; astigmatism, or blurred vision and cataracts.
Hyperopia

Occurs when the eyeball is excessively short from front to back (has a flat corneal structure), forcing light rays to focus behind the retina. The person with hyperopia can clearly visualize objects at a distance but cannot see them at close range.

Myopia

Occurs when the eyeball is excessively long (has increased curvature of the corneal surface), forcing light rays to focus in front of the retina. The person with myopia can view objects at close range clearly but cannot see them from a distance (e.g., 100 feet). This individual requires eyeglasses to assist in focusing on distant objects. Figure 14.3 illustrates the myopic and hyperopic eyeballs and compares them to the normal human eye.

Astigmatism

Occurs when the curvature of surface of the cornea is uneven, preventing light rays from converging at one point. The rays of light are refracted in different directions, and the visual images are unclear and distorted. Astigmatism may occur independently of or in conjunction with myopia or hyperopia.

Cataracts

Occur when the lens becomes opaque resulting in severely distorted vision or total blindness. Surgical treatment for cataracts (such as lens implants) has advanced rapidly in recent years, returning to the individual most of the vision that was lost.

AGE RELATED MACULAR DEGENERATION

Age related macular degeneration (AMD) is an eye disease that is present to at least a mild degree in millions of older Americans. It is a leading cause of visual loss in this country.

AMD affects the macula, a small portion of the retina. The retina is the light-sensing nerve tissue that lines the inside of the eye. All parts of the retina contribute to sight, but only the macula can provide the sharp, straight-ahead vision that is needed for driving and reading small print.

As a person ages, harmful changes may occur in this small but important area of the retina, causing difficulties in reading and other tasks that require good central vision. Scientists do not know why these macular changes occur. But aging evidently plays a major role in the process. That is why it is known as age-related, or senile, macular degeneration.
Although AMD is a leading cause of visual loss, it is important to know that the majority of people with AMD continue to have almost normal vision throughout their lives. Even those who are severely affected do not lose all their sight, but retain enough to move about independently and make use of helpful devices called low vision aids. For a limited number of people who develop a rapidly worsening form of AMD that seriously endangers vision, there is a sight-saving treatment developed through research.

Usually AMD does not develop until a person is 65 or older. But a few people are affected by the disease while still in their forties and fifties. A person’s chances of developing AMD are greater than average if he or she has a near relative with the disease. Scientists are now trying to learn what other factors might place a person at risk for AMD.

**Signs and Symptoms**

Most people with AMD have a form of the disease that develops very slowly. It is called the “dry” form. In it, tiny yellowish deposits called drusen develop beneath the macula. Also, the layer of light-sensitive cells in the macula becomes thinner as some cells break down. These changes typically cause a dimming or distortion of vision that people find most noticeable when they try to read.

Generally if one eye has dry AMD, the other eye will also have some signs of the condition. Thus the person with dry AMD may eventually have vision problems in both eyes. However the dry form of AMD rarely causes total loss of reading vision. A much greater threat of visual loss arises when the dry form of AMD gives way to the “wet” or neovascular form of the disease. This condition arises in a small percentage of AMD patients. In it, new blood vessels grow beneath the macula. These abnormal vessels leak fluid and blood, causing the light-sensitive cells near them to sicken and die. This process generally produces a marked disturbance of vision in the affected eye: Straight lines look wavy, and later there may be blank spots in the field of vision.

If the leakage and bleeding from new vessels continues, much of the nerve tissue in the macula may be killed or injured within a period of a few weeks or months. Such damage cannot be repaired, because the nerve cells of the macula do not grow back once they have been destroyed.

Although only a small percentage of people with AMD develop the neovascular form, they make up the vast majority of those who experience serious visual loss from AMD.
THE VOLUNTEER WHO WORKS WITH PEOPLE WITH VISION LOSS

Volunteers should be chosen for their ability to work with people who are blind and their willingness to learn. They need a genuine care and compassion for others that is free of pity or false feelings about blindness. Their primary role is to “supply eyes” for the person who is blind. They must be able to do this without dominating or fostering dependency or becoming involved with the inner problems of the blind person. They should encourage independence without trying to supply intelligence or make decisions for the blind person.

People with vision impairments have a variety of needs because of the loss of sight. It is important for the volunteer to respond to the actual expressed needs of the person and not to their own need to be helpful. While the relationship may be mutually beneficial, volunteering cannot be a way of solving one’s own problems at the expense of another.

Some of the most frequent needs of people with vision impairments are assistance with reading, guide service and transportation. In each of these situations, the function of the volunteer is to supply eyes.

The volunteer can help with reading the parish bulletin, newspapers, mail and answering letters. Other materials will need to be read such as the parish bulletin or the Pittsburgh Catholic. Many books are already available in Braille, large print or cassette tapes. It is not necessary to duplicate services that are provided by various public organizations. See the Xavier Society on the following page.

Volunteers who are providing transportation and guide service need to be familiar with the sighted guide technique that is described in another section of this booklet.

Where blindness is accompanied by some other disability, there may be additional needs related to daily living.

Volunteer work should be done for a set and limited time each week. The volunteer needs to designate limits both in time and in the activities that he or she does. Otherwise, it is possible for a volunteer to begin with much enthusiasm and activity than is required only to stop because the job has become too much.

It is not the role of the individual volunteer to provide financial assistance or other gifts. However, there may be times that the parish or Saint Vincent de Paul Society may be called on to do this.
HELPFUL HINTS FOR WORKING WITH PEOPLE WITH VISION LOSS

Treat people with vision loss naturally as you would any other persons. Feel free to use words such as see and look. They understand them and probably use them.

Address people who are blind directly, not through a third party. Most have normal intelligence and are able to speak for themselves. Face them and look at them. They may have some residual vision.

Use names so the person knows to whom you are speaking. Identify yourself by name so the person who is blind doesn’t have to guess who you are.

Speak in normal tone of voice. They have vision problems, not necessarily a hearing problem.

Offer assistance, but let the person with vision impairment describe what kind of help is needed. Do not insist on helping when help is not desired.

When guiding a person who is blind, ask if he or she would like a description of what you’re seeing. Orient the person to new surroundings. Let the person know when you enter or leave a room.

Be patient. People with vision loss are quite capable of doing many things. Often they just need more time.

Plan activities with the person who has a vision loss, not for him/her.

Don’t fuss over his/her accomplishments as “remarkable” or “wonderful”. Vision loss implies neither abnormality nor special gifts.

Speak with expression. It helps to make up for the lack of visual clues. People who are blind often miss information from the faces of speakers and their body language. Their own facial expressions may not accurately indicate what they are feeling or thinking.

Never pet a guide dog in harness. Even when a dog is out of harness, ask permission before touching it.
SIGHTED GUIDE PROCEDURES

The sighted guide is a person who works as part of a team to enable a person who is blind to travel safely and efficiently in different environments and under varying conditions. He must react in time to any obstacles in the person’s path such as curb, stairs or to any dangerous situation he may encounter. In addition, he provides information about the environment through verbal explanations or specific body movements.

TO INITIATE CONTACT

1. Always ask the person if he/she would like to take your arm. **Never grab from behind.**

2. Place the back of your hand on the arm or hand of the person who is blind so they know where you are. If the person who is blind is untrained in the proper sighted guide technique, it is helpful to physically place his/her hand on your arm just above the elbow.

THE GRIP AND POSITION

1. The grip should be taken above the elbow with thumb on the outside and fingers on the inside of the arm. Either arm can be used (left-hand grips right arm or right hand grips left arm.)

2. The grip should be firm but not tight.

3. The forearm of the person who is blind is horizontal to the floor.

4. The guide is one-half step in front of the traveler who is blind.

5. The outside shoulder of the guide is directly in front of the outside shoulder of the traveler.

MOVEMENT

1. Walk at a normal speed (one that is comfortable to both parties in terms of speed and length of stride).

2. The guide should avoid obstacles, allowing enough room for the combined width of the guide and follower.
NARROW PASSAGEWAYS

If the walking area is judged too narrow for the combined width of two people, the guide places his arm behind his back so that the follower can move in closer to the guide. Return to original position after passing through the narrow space.

DOORWAYS

1. Inform the person who is blind that you are approaching stairs, their approximate number, and direction (up/down).

2. Approach stairs squarely whenever possible. I not \_.

3. Pause slightly. Assist person in locating handrail if necessary. Allow time for the person to find the first step.

NOTE: For an escalator: the guide steps on first and the person who is blind follows, remaining on the step behind the guide and holding firmly onto railing. The guide steps off first and the person who is blind follows, maintaining position one-half step behind.

SEATING

Put the follower in contact with the chair (hand on the back edge of the chair or knees/shins in contact with the front edge of the seat).

Do not leave a person who is blind standing in an open space. If you are leaving him/her, place him/her in contact with a wall, a piece of furniture, etc.
The Xavier Society for the Blind provides free Braille, audiotape and large print materials for qualified individuals.

For more information visit
www.xaviersocietyfortheblind.org
or call (212) 473-7800 (800) 637-9193

If you have a parishioner who could use the services of the Xavier Society have the individual complete the form on the following page and submit to the Xavier Society for the blind at:

XAVIER SOCIETY FOR THE BLIND
2 Penn Plaza, Suite 1102
New York, NY 10121-1100
clientservices@xaviersocietyfortheblind.org

“Parishioners with disabilities are not looking for pity. They seek to serve the community and to enjoy their full baptismal rights as members of the church ... There can be no separate Church for parishioners with disabilities. We are one flock that serves a single shepherd.”

Pastoral Statement of U.S. Catholic Bishops on Parishioners of with Disabilities (par. 33)
PLEASE PRINT

Full Name _______________________________ Date of Birth __ / __ / __
Address ____________________________________________________________
City __________________ State/Province _____ Zip/ Postal Code__________
Country _______________________________ U.S. Veteran
Primary Phone (Home / Work / Cell) ___________________________________________
Alternate Phone (Home / Work / Cell) __________________________________________
E-Mail _______________________________@__________________

PLEASE CHECK ALL BOXES THAT APPLY
☐ I am able to read Braille ☐ I prefer MP3 Audio
☐ I have regular access to the Internet
☐ I am a student (Specify at what level) _________________________________
☐ I am currently employed (Specify type of work) ___________________________
☐ I am retired (Specify former type of work) ________________________________
☐ I live in a group residence (Specify) ______________________________________

For correspondence, which format should be used? ☐ Mail ☐ Braille ☐ E-Mail

CERTIFICATION
The certification may be supplied by a qualified professional, or by a representative of any
institution or agency engaged in working with the visually or physically impaired who has a
direct knowledge of the applicant’s condition.

Name of Certifier _________________________________________________________
Title (or professional degree) ______________________________________________
Agency or institution (if applicable) ___________________________________________
Office Address ___________________________________________________________
City____________________________ State/Prov. _______ Zip/Postal_______________
Office Phone ______________________________
I hereby certify that the following applicant, _________________
who is requesting free services from Xavier Society for the Blind, is (please check):
☐ (L)Legally Blind ☐ (V)Visually Impaired ☐ (P)Reading Disabled ☐ (D)Deaf/Blind
☐ (H)Physically Handicapped (please specify__________________) and cannot read
standard printed material.
Signature of certifier _______________________________ Date____________________
MENTAL ILLNESS

SUPPORTING FAMILIES WITH SERIOUS MENTAL ILLNESS

By Claire Griffin-Francell

When mental illness strikes a family it may appear slowly in the personality changes of a beloved child who starts to exhibit behaviors that are different than before.

Because the schizophrenias, the major affective disorders, and manic-depressive illnesses appear often during the teenage years, many families have difficulty separating out normal teenage behaviors from the signs of a major mental illness. Furthermore, medical help is often delayed because, unlike the warning signs of cancer, few people recognize the warning signs of these illnesses.

If mental illness strikes suddenly, it can turn lives upside down. I remember when my son left home to attend a well-known Catholic college in the mid-west; everyone was so happy that he was realizing a childhood ambition of being a member of this famous university’s band. Looking back, I think it was like Palm Sunday. We all rejoiced and celebrated his entrance into what looked like paradise. It had been that earlier for his older brother and sister.

Within a few weeks everything came apart. In words of the poet, “the center cannot hold.” He was plunged suddenly into enormous mental pain and suffering. His anxiety rose to panic proportions as his mood disorder swept him into the hell of prolonged intense depression.

While he struggled to regain his sanity with medications on the psychiatric unit of a local hospital, the world kept on turning for other. No one in the college community seemed to notice or care that he had gone to the hospital. What a strange contrast to the situation of students who are physically ill or have trauma from accidents. Their rooms are filled with well wishers, flowers, and get well cards.

No one sent a get well card, no one phoned, no one visited. I felt that we were abandoned. Perhaps the stigma prevents persons from reaching out in a caring manner to the psychiatrically wounded. Their pain is as acute as any other. When the chemistry within the brain changes, security is swept away. Perception of auditory and visual events may change dramatically, and the horror of not being able to count on your own mind trashes your self-esteem.

What does a family need from the religious community, especially from its leaders at that time?

In four words: awareness, engagement, presence, and compassion.
Awareness involves the realization that mental illness is a major public health problem. Adult education programs, prayers of the people, memorial services for those who have died as a result of mental illness will bring the unspeakable out of the darkness and allow the latest scientific-based knowledge to replace ignorance. It will also provide a climate in the parish for grieving families to come out of the closet and accept the comforting that a church community can give.

Engagement means that parishioners will reach out to all members to welcome them in church services, in social life, and in neighborhoods. Clergy and lay persons will visit persons with mental illness in acute care settings like hospitals or in community residences.

Families now in most places, feel shunned and abandoned. Wherever I travel in this country, I meet families who have left the Church because they say that in their hour of greatest need, their Church has left them.

Presence involves being there with the family and the person with mental illness when they need a friend. No one expects the clergy or other Catholics to work a cure or remove their illness. What they do want is the miracle of companions through the grief process.

Presence can be healing as one attempts to ease the unearned guilt and helplessness.

Lastly what the Church can offer to persons with major mental illness and their families is compassion. To be compassionate is to enter into another’s suffering. It is to experience the other’s pain in some small way.

It isn’t easy to remain a Catholic in these troubled times. Unless families meet awareness, engagement, presence, and compassion during their Good Fridays they may leave the Church community in bitterness. Then we will all be subject to God’s judgment for our hardness of heart and poverty of spirit.

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PASTORAL CARE AND MENTAL ILLNESS

Ministry has many components, one of which is pastoral care. Pastoral care brings together theology and psychology. The modern concept of pastoral care was introduced by Anton Boisen, a pastor who experienced mental illness. He was hospitalized a number of times and struggled to understand, both theologically and psychologically, his own experiences. In attempting to explain his experience and those of others, he developed a construct in which every person is viewed as a “living human document.” Boisen saw people not as case studies or people to be diagnosed, but rather as people whose stories revealed their humanity. Other theories have been created based on his work. However, what is important for a pastor, taking into account his understanding of theology and psychology, is creating a personal style of pastoral care.

Ministry, as expressed in pastoral care, is presence. This allows the minister to walk with a person without attempting to diagnose or treat. Diagnosis is the responsibility of the mental health professional. The minister’s responsibility is to be present with a person at a particular moment. A minister is present in the way he or she listens to and responds to the person’s story, witnessing to the chaos and confusion, the terror and the suffering, that mental illness can cause. The minister is called to be God’s ear in this situation, to listen, and make each story sacred.

National Catholic Partnership on Disability, Opening Doors, Chapter three, Sect E.3.g.

“The parish is the door to participation for persons with disabilities, and it is the responsibility of the pastor and lay leaders to make sure this door is always open.”

U. S. Catholic Conference of Bishops
Pastoral Statement on Persons with Disabilities #18
HELPING PEOPLE WITH SERIOUS PSYCHIATRIC DISORDERS: SUGGESTIONS FOR CARING CONGREGATIONS

Each Person is Unique

Many of us feel uncomfortable about psychiatric disorders or don’t know much about them. Often we focus on the ways people with psychiatric illnesses are different from us. Common stereotypes characterize persons with serious mental illnesses as lacking will power, or as homeless, jobless, or needing to be institutionalized. These ideas are often reinforced by the media.

Each person with a psychiatric disorder is a unique individual with unique accomplishments, needs, gifts, and challenges. Knowing people as individuals can help us break down barriers of fear and misunderstanding that keep us apart.

Partners in the Faith Community

While many people with psychiatric disorders and their families participate in our faith communities, many others have been turned away or are segregated at the margins. The time has come for people of faith to embrace those persons with special mental and emotional needs, welcoming them as worthy partners in our daily life within the parish. As a faith community, we must take a more active part in the network of people who care about those with psychiatric disorders.

Important Reminders for Each of Us

- Express your care by being emotionally and spiritually present. Be yourself and give the other person the same freedom.
- Cultivate your ability to listen. One’s spirit can come alive simply by being heard.
- Be sensitive to the way a person describes his or her emotional problem. Ask about whether the person would like the situation shared with others in the congregation and, if so, how.

National Catholic Partnership on Disability, Opening Doors, Chapter three, Sect. E.3.i.
RESOURCES IN THE ARCHDIOCESE OF CHICAGO
ARCHDIOCESE OF CHICAGO PASTORAL NETWORK WITH PERSONS WITH DISABILITIES

The Pastoral Network with Persons with Disabilities coordinates the various ministries of the Archdiocese of Chicago that provide for the participation of persons with disabilities in all aspects of parish life. Quarterly meetings bring together representatives of the Commission on Mental Illness, Misericordia Home, Office of the Deaf, Inclusion in Worship Ministry, SPRED as well as other interested individuals, to report on programs and to share ideas and information about disability issues.

Facilitator: Ms. Anne Grosklaus
Catholic Charities
721 N. LaSalle
Chicago, IL 60610
773-304-6912
agroskaus@catholiccharities.net

MISSION

The purpose of the Pastoral Network with Persons with Disabilities is to work for the full potential of persons with disabilities, their families, and those directly associated with them. It is equally important to sensitized the people of the Archdiocese of Chicago to the concerns, gifts and needs of all. Then persons with disabilities will be able to enjoy full, active participation in the life and mission of the church, enjoying their full baptismal rights, as well as contributing to the good of the church.

The Pastoral Network with Persons with Disabilities is currently comprised of the following ministries:

The Catholic Office of the Deaf
Commission on Mental Illness
Misericordia Home
Pathways.Org Inclusion In Worship
SPRED

A description of each ministry follows:
THE CATHOLIC OFFICE OF THE DEAF

The Office of the Deaf is responsible for the pastoral care of persons who are deaf and hard-of-hearing, as well as their families, in the Archdiocese of Chicago. This pastoral care of the deaf involves:

- sacramental ministry of the Church
- religious education of children
- advocacy
- information & referral
- spiritual guidance
- formation & training in ministerial leadership
- youth activities
- guarantee of communication access to worship and all other activities of the Catholic Church.

Director: Rev. Roberto Mercado  
Notre Dame De Chicago  
1335 W. Harrison St.  
Chicago, IL 60601  
jrm Mercado30@gmail.com

St. Francis Borgia Deaf Center  
http://deafchurchchicago.weconnect.com/

Retired Director of the Catholic Office of the Deaf:  
Reverend Joseph Mulcrone  
Wounded Warrior Project  
jmulcrone@archchicago.org
The Commission on Mental Illness educates and resource parishes on the spiritual and supportive needs of persons with serious mental illnesses such as bi-polar disease, major depressive illnesses, schizophrenia and personality disorders. Since mental illness not only affects the individual with the disease but also family members, the needs of the entire family are addressed.

The Commission is comprised of volunteers who include persons with mental illness, family members, mental health service providers, and trained pastoral leaders experienced in ministry to persons with major mental illness and their families. The Commission started as a grass roots effort of people with a shared interest in providing programs for and education about parishioners facing serious mental illnesses.

The work of the Commission on Mental Illness breaks down the barriers and the stigma that keep people with serious mental illness and their families from seeking support and compassion from their faith community. It raises the consciousness of clergy, religious, lay leaders, and all Catholics in the Archdiocese about the spiritual needs of people often pushed to the margins of society. Its mission is to bring people with mental illness back to the worshiping community and to full participation in the life of the Church.

The Commission on Mental Illness:

- organizes an annual Mass in celebration of the lives of persons with mental illness, their families, and mental health professionals
- presents workshops and seminars to priests, hospital chaplains, deacons, parish leaders and ministers
- works in partnership with Faith and Fellowship, a faith-sharing program that enables parishes to effectively provide spiritual and social support for adults with mental illness
- distributes a 12-part series of bulletin articles raising awareness and providing education on mental illness
- provides referrals and networking for people needing support in their struggle with mental illness
- distributes Mental Illness, What Can Faith Communities Do? a resource guide for parishes to reach out to parishioners with mental illness

Director: Deacon Tom Lambert
Our Lady of Mount Carmel
690 W. Belmont Ave.
Chicago, IL 60657
312-593-8690
Olmcinfo2@aol.com

Connie Rakitan
Faith and Fellowship
708-383-9276
Faith_fellowship@hotmail.com
MISERICORDIA HOME
www.misericordia.com

The Mission of Misericordia Home is to support individuals with developmental disabilities in maximizing their level of independence and self-determination within an environment that fosters spirituality, dignity, respect and enhancement of quality of life. We promote development of natural family and community support, community awareness, education and advocacy.

Operated by the Sisters of Mercy under the auspices of the Catholic Bishop of Chicago, Misericordia has been providing services for persons in need since 1921. Originally a home for unwed mothers, our current Mission began in 1954 when Misericordia opened its doors to infants and children with mental disabilities.

Chaplain: Reverend John Clair
6300 N. Ridge
Chicago, IL 60660
773-973-6300
frjack@misericordia.com

INCLUSION IN WORSHIP

A Ministry to Welcome Worshippers of All Abilities as Active Participants
www.InclusionInWorship.org

The Inclusion in Worship Ministry has worked in partnership with the Archdiocese of Chicago since 1996 to assist parishes to create worshipping communities where parishioners of all abilities are intentionally included and actively participate in liturgy, ministry, fellowship and religious education.

Inclusion In Worship:

♦ provides online inclusion in worship educational materials at www.InclusionInWorship.org.

♦ sponsors the annual Open Hearts Awards and Junior Open Hearts Awards for children to recognize access and inclusion efforts and provide grants of up to $1,000 for congregations seeking funding to welcome worshipers of all abilities into active membership.

♦ promotes Inclusion Awareness Day, an Archdiocese wide, parish-based event to celebrate the contributions parishioners of all abilities make when accommodations are provided.
INCLUSION IN WORSHIP (cont’d.)

◆ coordinates volunteer parish Inclusion Representatives to assist pastors with inclusion efforts.

Inclusion In Worship Program Manager:
Joanne Meyer
Pathways Center
2591 Compass Rd.
Glenview, IL 60026
1-800-955-2445
jmeyer@pathways.org

SPRED
www.spred.org

SPRED forms small communities of faith in parishes to welcome persons with developmental disabilities in order to foster participation in parish assemblies of worship. SPRED began in 1960 when Fr. James McCarthy from the Archdiocese of Chicago began to work with parents, special educators and catechist volunteers. In 1967 SPRED was established as an agency of the Archdiocese.

SPRED serves the residents of group homes and state facilities within the Archdiocese of Chicago through collaboration with twenty-one agencies that each has multiple housing sites. Parish based SPRED centers serve children, adolescents and adults who have developmental disabilities in the Archdiocese.

SPRED catechists complete thirty hours of training. Presently there are 850 active catechists working in 136 SPRED Centers in the Archdiocese of Chicago. One catechist sponsor is available for each person with special needs plus a leadership team.

Six hundred and seventy persons with developmental disabilities are served. SPRED also resources 22 dioceses in 8 countries.

Directors: Reverend James McCarthy
Sr. Mary Therese Harrington, SH
2956 S. Lowe
Chicago, IL 60616
312-842-1039
maryt_harrington@spred.org
STATE AND NATIONAL DISABILITY RESOURCES
CATHOLIC NATIONAL RESOURCES

The National Catholic Partnership on Disability, Washington D.C.,
www.NCPD.org

WEBSITES FOR INFORMATION AND SERVICES AVAILABLE IN ILLINOIS

Rehab Institute of Chicago Life Center
www.lifecenter.ric.org

United Cerebral Palsy of Greater Chicago 312-368-0380
www.ucpnet.org

Ramp Up Foundation
DME: Durable Medical Equipment Exchange

Illinois Assistive Technology Program 1-800-852-5110
www.iltech.org

Illinois Life Span Project 1-800-588-7002
www.illinoislifespan.org

Pathways.org 1-800-955-2445
www.pathwaysawareness.org

El Valor 312-666-4511 Serves the Latino community.
www.elvalor.org

WEBSITES FOR INFORMATION AND SERVICES AVAILABLE NATIONWIDE

Quality Mall
www.qualitymall.org

National Organization on Disability
www.nod.org

Universal Design
www.adaptiveenvironments.org

Center for Parent Information and Resources
www.parentcenterhub.org
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ABOUT PATHWAYS.ORG INCLUSION IN WORSHIP

The Inclusion Representative Resource Booklet is a publication of Pathways.org; a Chicago based non-profit organization dedicated to providing free tools to maximize child development. For more information visit www.pathways.org.

Inclusion In Worship is a national, interreligious program of Pathways.org that provides interfaith educational materials, events, and cash grants to assist congregations to welcome members of all abilities as active participants. When our houses of faith celebrate the unique gifts of all members we create stronger and more inclusive communities of faith.

FREE ONLINE RESOURCES AT www.InclusionInWorship.org:

- Open Hearts, Open Minds, Open Doors video
- The Vulnerable Journey by Henri Nouwen video
- Inclusion in worship handouts in the areas of affirmation, communication and accessibility
- Different Gifts, But the Same Spirit Lesson Plans
- Inclusion Awareness Day Workbook for Eastern Orthodox parishes
- Inclusion Awareness Day Workbooks for Roman Catholic parishes
- Inclusion Shabbat Workbook for Jewish congregations
- Inclusion Awareness Day Workbook for Episcopal parishes
- Inclusion Awareness Day Workbook for Protestant congregations