

Theology and Disability¹

Introduction

The last two decades witnessed a growing body of literature that focuses on society and disability. Designated rather prosaically as ‘disability studies’, this field of academic work, which analyses issues affecting people with disabilities, is expanding rapidly and has taken a profoundly interdisciplinary character. Perhaps the oldest academic organisation specially dedicated to this field is The Society for Disability Studies, whose origins can be traced to 1982.²

Disability studies are particularly prominent in the academic settings of the humanities and social sciences. Scholars in this field have taken a variety of approaches and employed different methodologies to analyse the many facets of this complex phenomenon.³ Significantly, a number of scholars have come to recognise that to understand disabilities, the complex confluence of the physical and the cultural as well as the personal and the public cannot be ignored. Put differently, disability and impairment simply cannot be abstracted from their concrete historical and cultural milieu.

To be sure, Christians have also taken a keen interest in this subject. There are Christian writers on disability from all the major Christian traditions: Roman Catholic,⁴ Lutheran,⁵ Methodist,⁶ Anglican⁷ and Pentecostal.⁸ There are also Christian writers who have adopted feminist⁹ or liberationist¹⁰ approaches to discuss the question of disability. Some commentators have pointed out that although ‘disability studies’ is a term that is frequently used in different

¹ This paper is a revised version of a talk that I gave at a workshop on disability organised by the Anglican Diocese of Singapore for chaplains and Christian healthcare workers on 24 February 2017. I would like to thank Rev Foo Chee Meng and Rev King Chiew Kwang for the invitation to speak at this workshop.

² Philip M. Ferguson (2012), ‘Disability Studies: What Is It and What Difference Does It Make?’, *Research & Practice for Persons with Severe Disabilities*, Vol. 37, No. 2, 70-71.

³ P. Cushing and T. Smith (2009), ‘A Multinational Review of English-Language Disability Studies Degrees and Courses’, *Disabilities Studies Quarterly*, Vol. 29.

⁴ Jean Vanier (1989), *Community and Growth* (New York: Paulist Press).

⁵ Steward Govig (1989), *Strong and Broken Places: Persons with Disabilities in the Church* (Louisville: Westminster/John Knox Press).

⁶ Frances Young (1986), *Face to Face: A Narrative Essay in the Theology of Suffering* (London: Epworth).

⁷ John Gillibrand (2010), *Disabled Church – Disabled Society* (London: Jessica Kingsley Publishers).

⁸ Amos Yong (2007), *Theology and Down Syndrome: Reimagining Disability in Later Modernity* (Waco: Baylor University). John Swinton (2000), *Resurrecting the Person: Friendship and the Care of People with Severe Mental Problems* (Nashville: Abingdon Press).

⁹ Deborah Creamer (2009), *Disability and Christian Theology: Embodied Limits and Constructive Possibilities* (New York: Oxford University Press).

¹⁰ Nancy Eiseland (1994), *The Disabled God: Toward a Liberatory Theology of Disability* (Nashville: Abingdon Press).

disciplines, a consensus on what it means and entails has hitherto been rather elusive. The same can be said about disability theologies. For the purposes of this talk, I have elected to use the description of disability theology offered by John Swinton. In an article in the *Cambridge Dictionary of Christian Theology*, Swinton describes disability theology in this way:

Disability theology is the attempt by disabled and non-disabled Christians to understand and interpret the gospel of Jesus Christ, God, and humanity against the backdrop of the historical and contemporary experiences of people with disabilities. It has come to refer to a variety of perspectives and methods designed to give voice to the rich and diverse theological meanings of the human experiences of disability.¹¹

In this brief talk, I would like to reflect on disability from the Christian perspective under three broad headings: (1) Creation and Theological Anthropology, (2) Sin and Redemption and (3) Solidarity and Hospitality. But before we turn to the first theme, I would like to very briefly discuss the two models of disability that are often used in disability studies – the medical model and the social model.

Two Models

At the very outset, it is important to note that thinking about disability in terms of models has its advantages as well as its pitfalls. The advantage of this approach is that in arranging attitudes and perspectives within a broadly coherent framework, models facilitate the conceptualisation and analysis of the key issues surrounding disability. The problem, however, is that models can easily become procrustean beds that distort the very realities that we hope to understand. Additionally, although in theory attitudes and practices can be distinguished and neatly arranged in the medical or social model, in reality things are not quite so simple. Academic discussions and organisational practices in fact frequently draw from both models, although one may be privileged over the other.

The first model of disability is the Medical Model. This approach to disability can be traced to the European Enlightenment of the 18th century. It purportedly offers a scientific assessment of disability and places great confidence in medicine to provide the necessary cures. Disabled people who are deemed incurable are placed in institutions or special schools. The Medical Model also proposes a particular conception of ‘normality’ or ‘normalcy’ and assesses disability or impairment on the basis of this standard. Consequently, people with disabilities are viewed from the deficit standpoint, that is, on the basis of

¹¹ John Swinton (2011), ‘Disability Theology’, in Ian MacFarland, David Fergusson, Karen Kilby and Iain Torrance (eds.), *Cambridge Dictionary of Christian Theology* (London: Cambridge University Press), 140-141.

what they are unable to do instead of what they can do. Furthermore, as Kathryn Sullivan points out, according to this model, ‘the problems associated with disability are seen as lying solely within the individual and his or her medical condition or impairment’.¹²

The Medical Model therefore may be described as a disability-centric approach instead of person-centric one. It focuses primarily on the impairment of the individual, and identifies this as the main reason why he or she is unable to participate fully in society. Most significantly, in the Medical Model the role of society in relation to disabled people is almost totally neglected. Sullivan explains: ‘In the medical model, society is not seen as having any underlying responsibility to accommodate people with disabilities; people must instead adapt themselves to existing circumstances, usually with help from medical professionals who provide treatment and rehabilitation’.¹³

The second model of disability, the Social Model, is proposed as the direct critique of and counter to the Medical Model. This Model has become the predominant paradigm for understanding disability and has generated a huge and diverse caucus of academic writing, most significantly by writers who suffer from disabilities themselves. In essence this approach insists that disability must be socially situated and thus should be understood within the wider cultural nexus, including prevailing attitudes and assumptions, and not confined to condition of the disabled individual. Raymond Lang could therefore assert that ‘the social model gives precedence to the importance of politics, empowerment, citizenship and choice’.¹⁴ More importantly, according to the Social Model, disability is a social construct and therefore very much dependent on society’s assumptions of what is normal. The Social Model therefore addresses the serious deficiencies of the Medical Model by widening our conception of disability to include attitudinal, social, cultural, and political considerations. Although the Social Model may be said to be a critique and response to the Medical Model, it represents a variety of very different approaches and should not be reduced to a monolith.

In examining society’s attitudes and treatment of people with disability, the proponents of the Social Model also highlight and condemn the systematic oppression and exclusion of disabled people that invariably result in their discrimination. Addressing the American context, Harlan Hahn argues that the exclusion and discrimination of disabled people are due to:

... the failure of a structured social environment to adjust to the needs and aspirations of citizens with disabilities rather than from

¹² Kathryn Sullivan (2011), ‘The Prevalence of the Medical Model of Disability in Society’, *2011 AHS Capstone Projects*, Paper 13, 2.

¹³ *Ibid.*, 4-5.

¹⁴ Raymond Lang (2001), *The Development and Critique of the Social Model of Disability*. Available at: http://www.ucl.ac.uk/lc-ccr/lccstaff/raymond-lang/DEVELOPMENT_AND_CRITIQUE_OF_THE_SOCIAL_MODEL_OF_D.pdf.

the inability of the disable individual to adapt to the demands of society.¹⁵

Employing the Marxist concept of ‘false consciousness’, this model seeks to expose the dehumanising consequences of some forms of social attitudes towards the disabled. In Marxism, ‘false consciousness’ refers to a kind of social conditioning that causes certain groups of people to believe they are less worthy or capable than others. According to James Charlton, such conditioning ‘prevents people with disabilities from knowing their real selves, their real needs, and their real capabilities and from recognising options they in fact have’. ‘In this regard’, he adds, ‘people with disabilities have much in common with others who have internalised their own oppression’.¹⁶

According to some theorists, our physical and social environments are structured in a way that suits ‘normal’ people, that is, people who conform to our standards of normality. People with physical or mental impairments – who by the same standards are deemed ‘abnormal’ – are not accommodated by these structures. In this way, it is society that should be held responsible for disabling people with impairments, thereby preventing their fullest participation in the social life of the community. Indeed, academics working with the Social Model have drawn liberally from gender and racism studies.

Although the Social Model brings much insight to the discussion, some of its assumptions and trajectories must be called to question. Time allows me to just highlight one or two very briefly. Proponents of the Social Model often make the distinction between ‘impairment’ and ‘disability’ – the former refers to the physical defect (like lacking a limb) and the latter refers the social attitude that leads to exclusion and discrimination.¹⁷ But as some scholars have rightly pointed out, this binary division of the biological and social is untenable because everything is social. Put differently, ‘impairment is not a pre-social or pre-cultural substrate’ that can be distinguished from disability.¹⁸ The Social Model has led some of its proponents to ‘normalise’ disabilities in ways that are troubling. In addition, the way in which proponents commandeer the language of rights has led to the over politicisation of the issue. Thus, while the Social Model has many important things to say about disability, the ideologies that have subtly shaped some of its arguments must be subjected to sustained interrogation and serious critique.

Creation

¹⁵ Harlan Hahn (1986), ‘Public Support for Rehabilitation in Programs: The Analysis of US Disability Policy’, *Disability, Handicap and Society*, 1(2): 128.

¹⁶ James Charlton (1998), *Nothing About Us Without Us: Disability, Oppression and Empowerment* (Berkeley: University of California Press).

¹⁷ This distinction is analogous to the distinction between sex and gender.

¹⁸ Tom Shakespeare and Nicholas Watson (2002), ‘The Social Model of Disability: An Outdated Ideology?’ *Research in Social Science and Disability*, Vol. 2: 22.

We turn now to our first theological theme, namely, the doctrine of creation. In Genesis, we are told that God brought the world into being out of nothing. This means that God did not use any pre-existing material to fashion the world but created it by sheer *fiat*: ‘God said, “Let there be”, and there was’. As the account of creation in Genesis 1 unfolds, we are told that at every stage God was well pleased with his handiwork. And at the end of the sixth day, when God had completed his work of creation, Genesis says that ‘God saw everything that he had made, and behold, it was very good’ (1:31). The superlative language that we find at the end of the creation account shows that the world as God had originally created it was without defect. As the OT scholar von Rad explains, the expression ‘it was very good’ simply means ‘it was completely perfect’.¹⁹

The implication of the doctrine of creation is that disabilities of whatever kind did not exist in God’s prelapsarian creation because they were never part of God’s creational intention. All disabilities are therefore ruptures of the harmonious world that God had lovingly brought into being. Although this orthodox position may seem obvious and unproblematic for many of us, a growing number of Christian writers – especially those influenced by the social model – have come to challenge it. For a variety of reasons they have insisted that disability should not be seen as necessarily alien to God’s pristine creation before the fall. For example, in his book *Disabled Church – Disabled Society* John Gillibrand, in refusing to follow the medical model in associating disability with ill health and ill health with sinfulness, insists that disabilities existed before the fall.²⁰ Thomas E. Reynolds, in his book *Vulnerable Communion* associates disability not with the fall and its consequences but with the vulnerable nature of God’s original creation.²¹ In direct or tacit reaction against the discrimination of the disabled brought about by certain ideas of normality, these writers have eschewed the suggestion that disability points to a contradiction to God’s original intention.

Space does not allow us to explore this further. We turn now to the story of the creation of human beings, especially to that remarkable description of human beings as bearers of the image and likeness of God (Genesis 1:26-27). Theologians have proposed different ways of understanding what it means to say that humans are bearers of God’s image, and what constitutes that image. The dominant view is that the *imago* is that which distinguishes human beings from the other animals. Theologians from Irenaeus in the second century to Thomas Aquinas in the thirteenth have privileged what is described as the substantive view of the divine image. According to this view, the image of God is associated with man’s rational and spiritual qualities. Are disabled people – especially those who seemingly lack these qualities, for example, people with mental illness – bearers of the image of God?

¹⁹ Gerhard von Rad (1972), *Genesis*, Old Testament Library (London: SCM).

²⁰ John Gillibrand (2010), *Disabled Church – Disabled Society* (London: Jessica Kingsley Publishers).

²¹ Thomas E. Reynolds (2008), *Vulnerable Communion: A Theology of Disability and Hospitality* (Grand Rapids: Brazos Press).

The answer is affirmative: they are bearers of God's image because their disabilities have not made them less than human. This however means that in associating the imago with human rationality, we must not work with too narrow a view of what the latter entails, especially one that is tainted with intellectualistic or cognitive biases. But it also means that we must not think of the imago only in terms of certain faculties or capabilities, like reason. The image of God must instead be associated more profoundly with the special kind of creature that the human being is, its uniqueness, and therefore its ontological discontinuity with the other animals. If the image of God were tied to certain abilities, then the loss of those abilities would mean that that individual has ceased to be human since he can no longer be said to be a bearer of the divine image. A robust theological anthropology that is grounded in Scripture, however, prevents us from holding such a view. Thus, all disabled persons – regardless the severity of their disabilities – are bearers of God's image because their disabilities have not made them less than human. They must therefore always be treated with dignity and respect. As Bruce Waltke puts it:

God shapes every human being, including the malformed ... Furthermore, the Bible contains no thought that some of the malformed creatures of a woman's womb are less than human or that the imago Dei is relative to some standard of normalcy. All are the image of God and entitled to love and impartial justice.²²

Sin and Redemption

We turn now to our second theme, Sin and Redemption, and reflect on the question of disability in relation to the teachings of Scripture on these topics. What, if any, is the relationship between sin and disability? When we consult the NT in our attempt to answer this question, we are immediately confronted with the two different pictures it presents. The first is found in the story of the healing of the paralytic (probably a paraplegic) recorded in Luke 5: 17-26. In this story, the condition of the paraplegic is, it is suggested, the result of his personal sin since his healing is tied closely to forgiveness. Scripture therefore teaches that sickness and disability sometimes can be the result of the behaviour of the individual or that of others. For example, the blindness suffered by an individual caused by ocular syphilis could be the direct result of his or her sexual behaviour.

When we turn to John 9 and its account of Jesus healing the man born blind, we find a different but not contradictory answer to our question. In his reply to the question posed by his disciples regarding who is responsible for the man's

²² Bruce Waltke, 'Relating Personhood to the Health Sciences: An Old Testament Perspective' (unpublished paper presented at 'Relating Man in the Image of God to the Health Sciences'), 7. Quoted in Michael S. Beates (2012), *Disability and the Gospel: How God Uses Our Brokenness to Display His Grace* (Wheaton, Illinois: Crossway), 116.

blindness, Jesus said: ‘It was not that this man sinned, or his parents, but that the works of God might be displayed in him’ (9:3). The man’s blindness was not the result of his own sins, or those of his parents. Here, disability is not associated directly with personal sin but with Sin, the primeval rebellion of our first parents that brought about the distortion of human nature and the disordering of the world. Disability that is the result of some forms of infection or genetic disorder immediately comes to mind. For example, microcephaly and Duchenne muscular dystrophy (DMD) are caused by chromosomal disorders for which the sufferer cannot be held responsible. Thus, although not all disabilities are the result of personal sins, they are nonetheless the consequences of the fall and the manifestations of the disordered reality we all inhabit. The Vatican Committee for the Jubilee Day of the Community with Persons with Disabilities puts it thus:

Man in the beginning, created in the image and likeness of God, uses his freedom negatively for an alternative plan of mistrust, alienation, violence, dominion ...

Fragility, sickness, pain, disability, solitude and death are seen as acts of injustice by God, but it is precisely sin – the abuse of freedom – which causes these dramatic limitations.²³

Some Christian writers, however, seem to be moving away from this traditional and orthodox understanding of the relationship between the sin and disability. Eschewing the medical model of disability, John Gillibrand voices his ‘concern about associating disability with ill-health in a medical model of disability, and about the further step of associating ill-health with sinfulness’.²⁴ Others maintain that the traditional view presupposes a certain idea of normality, which then serves as a lens through which we read the biblical account. It is often because of our unchallenged notions of normality that lead us to think that disability is abnormal and therefore the consequence of the world disrupted by human sin. In *Disabled God*, Nancy Eiesland argues that ‘As long as disability is addressed in terms of sin-disability conflation, virtuous suffering, or charitable action, it will be seen primarily as a fate to be avoided, a tragedy to be explained, or a cause to be championed rather than an ordinary life to be lived’.²⁵ In similar vein, Jennie Weiss, in her book, *Copious Hosting* asserts that ‘We have our ideas about what is “normal” as well as “abnormal”. And normal almost never includes a disability’. She then associates this way of thinking about disability with the oppression of disabled persons: ‘As long as

²³ Committee for the Jubilee Day of the Community with Persons with Disabilities (2000), ‘Part One: The Person with Disabilities: The Image of God and a Place of his Wonders’, http://www.vatican.va/jubilee_2000/jubilevents/jub_disabled_20001203_scheda1_en.htm, accessed 22 December 2016.

²⁴ Gillibrand, *Disabled Church*, 56.

²⁵ Eiesland, *The Disabled God*, 75.

we think there is something wrong with using a wheelchair to get around, people with disabilities will always be oppressed'.²⁶

While the cult of normalcy prevalent in our culture must be subjected to criticism and its assumptions and constructs rejected, this must be done on the basis of God's revelation in Scripture. In addition, to associate the orthodox view of the relationship between sin and disability with the oppression of the disabled is simply mistaken. It is in some sense a failure to appreciate the rich and nuanced treatment of the issue of disability that the Christian faith makes possible and urges. The Christian doctrine of sin also underscores the point that it is impossible to achieve a true understanding of our humanity simply by looking at human beings and human sociality as they are and as they present themselves. This of course also means that disability and disabled people cannot serve as the 'hermeneutical key' to understanding human uniqueness and diversity. It is only through God's revelation in Christ that we can come to understand God's intentions for us when he created us in his image. Finally, the Christian doctrine of the fall tells us that things as they are are not what they should be, not what God had intended it to be. 'In biblical faith', writes Beldon Lane, 'brokenness is never celebrated as an end in itself'.²⁷ This includes disability. The Christian doctrine of sin tells us that this fallen world needs to be healed and restored. That is why for the Christian Faith, salvation is synonymous with deliverance and healing.

This brings us to the doctrine of salvation and to eschatology. Throughout his earthly ministry, Jesus went about healing the sick and the disabled – lepers, the blind, the deaf, and the lame. Together with the doctrine of creation sketched earlier, the healing ministry of Jesus shows that disabilities are not part of God's intention when he brought the world into being. They signal the fact that something had gone awry with the original creation. Theologians throughout the history of the Church have understood Jesus' miracles of healing and restoration as signalling the presence of the kingdom of God he came to inaugurate. This kingdom will be fully consummated with our Lord's return, and this sin-marred world will be transformed into the new heavens and the new earth where there will be no more tears (Rev 21:4). In Christianity, salvation has to do not only with the immortality of the soul but also the resurrection of the body. As Paul puts it, at the *eschaton*, the body that is sown perishable and weak will be raised imperishable and in power (1 Corinthians 15:42ff). Christian theologians have always taught that at the resurrection, all diseases and disabilities will be eradicated. Just as there will be no more cancers, so there will be no more deafness or motor neuron diseases. Disabled persons in this life will be raised whole.

²⁶ Jennie Weiss Block (2002), *Copious Hosting: A Theology of Access for People With Disabilities* (New York: Continuum International Publishing Group).

²⁷ Beldon Lane (1990), 'Grace and the Grotesque', *Christian Century* 107: 1068-9.

Once again, an increasing number of modern theologians are beginning to reject this view. These include the Methodist theologian Frances Young²⁸ and evangelical theologians like the Pentecostal Amos Yong. In his book, *Theology and Down Syndrome* Yong – whose brother suffers from the condition – argues that our identity and the meaning of our life are intimately and inextricably bound to our body. Therefore, he argues: ‘Precisely because the meanings of our lives are constituted by but irreducible to our bodies, so also will the resurrected body be the site through which the meaning of our narratives are transformed (and that, eternally)’.²⁹ In another part of the book Yong brings this point across with even greater clarity: ‘Living with disabilities shapes our lives, relationships, and identities in substantive rather than incidental ways ... To say that people with disabilities ... will no longer be disabled in heaven threatens the continuity between their present identities and that of their resurrected bodies’.³⁰ Thus, in Yong’s heaven the blind will continue to be sightless and thalidomide babies will continue to have deformed limbs for all eternity. Space does not allow me to offer a full critique of Yong’s view. Yong is obviously working with a rather narrow understanding of identity and meaning, influenced subtly by the very individualism that he tries elsewhere to eschew. Suffice to say that Paul is confident that the radical discontinuities of the spiritual bodies we will receive in the resurrection would not in any way result in an identity crisis.

Solidarity and Hospitality

We turn finally to how Christians should respond to people with disabilities. I will try to discuss this with respect to two profound concepts and attitudes that have long been part of the Christian theological and spiritual tradition: solidarity and hospitality. Although these two concepts are clearly distinguishable, they are of course inseparable. Let us take a look at each in turn before examining their profound relationship with each other.

Solidarity has to do primarily with the way of looking at the world we inhabit and how we should understand human relationships in such a world as this. The Christian idea of solidarity is informed and shaped by a robust vision of reality derived from God’s revelation in Jesus Christ. Christian solidarity is therefore premised on an understanding of the world that God has brought into being, a world that was subsequently fractured by sin, and thus in need of redemption and healing. Put differently, a Christian understanding of solidarity is based on a theological realism gleaned from Scripture. Solidarity urges us to reflect on human social relationships, acknowledging the good in them without dismissing the injustices and evil. But as a Christian virtue, solidarity also

²⁸ Frances Young (2013), *God’s Presence: A Contemporary Recapitulation of Early Christianity* (Cambridge: CUP); (2014), *Arthur’s Call: A Journey of Faith in the Face of Severe Learning Disability* (London: SPCK).

²⁹ Amos Yong (2007), *Theology and Down Syndrome: Reimagining Disability in Late Modernity* (Waco: Baylor University), 283.

³⁰ *Ibid.*, 269.

compels us to seek the good of the other, and to oppose all that is unjust and dehumanising in human sociality. As Pope John Paul II puts it in his 1987 encyclical *Sollicitudo Rei Socialis* ('Social Concern'), solidarity has to do with 'a commitment to the good of one's neighbour with the readiness, in the Gospel sense, to "lose oneself" for the sake of the other instead of exploiting him, and to "serve him" instead of oppressing him for one's own advantage'.³¹

Christian solidarity alerts us to the inalienable dignity of the 'other' – in this case, the disabled – that must always be respected and protected. It helps us to adopt a particular vision of society that underscores the fact that we are made for communion with each other and to share in the very life of triune God. In particular, it helps us to understand our relationship with the weak and the vulnerable, including people with disabilities.

But Christian solidarity also reminds us that we are all fallen creatures who live vulnerable lives in a world that is seriously fractured and disordered. In a profound sense, we may say that we are all in some fundamental way, disabled. As Jürgen Moltmann explains: 'There is no differentiation between the healthy and those with disabilities. For every human being has its limitations, vulnerabilities and weaknesses. We are born needy, and we die helpless. It is only the ideals of health of a society of the strong which condemns a part of humanity for being "disabled"'.³² This approach should not lead us to reject the valuable insights found in the medical model or deny the concrete reality of disabled people or their disabilities. Rather, it should remind us that there is some fundamental sense in which we who sometimes consider ourselves to be normal or powerful are in fact also broken and vulnerable, in need of salvation and healing. In addition, it should remind us that sooner or later, all of us would also acquire some form of disability – in the narrow sense – no matter how physically and mentally robust we presently are. It disabuses us of what Hauerwas calls 'the tyranny of normality' inspired by the myth of autonomous self-sufficiency.³³ The Christian understanding of solidarity should guide the Church to develop a more robust theology of brokenness and suffering – which is sorely needed today.

It is out of this profound sense of solidarity that we cultivate an ethic of hospitality. To offer hospitality is to recognise the dignity and value of the other as a human being created in the image of God. Offering hospitality to a stranger is an expression of the generous and self-forgetting love that the Bible calls agape. For to offer hospitality is to invite disruption into one's life and the

³¹ Pope John Paul II (1987), *Sollicitudo Rei Socialis*, paragraph 38. http://w2.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf_jp-ii_enc_30121987_sollicitudo-rei-socialis.html, accessed 27 December 2016.

³² Jürgen Moltmann (1998), 'Liberate Yourselves by Accepting One Another' in *Human Disability and the Service of God: Reassessing Religious Practice*, ed. Nancy J. Eisenland and Don E. Saliers (Nashville: Abingdon Press), 110.

³³ Stanley Hauerwas (2004), 'Community and Diversity: The Tyranny of Normality', in *Critical Reflections on Stanley Hauerwas' Theology of Disability: Disabling Society, Enabling Theology*, ed. John Swinton (Binghamton, NT: Haworth Pastoral Press), 37-43.

familiar routines associated with it. When a stranger is received in hospitality, things do not remain the same, and the ‘familiar is defamiliarised’, as one writer puts it. But hospitality must never be seen as merely a one-way process where the host gives and the guest merely receives. It is a form of relationality in which both the host and the guest give and receive. As Reynolds explains:

A liminal zone of mutual sharing is created, a kind of covenantal exchange that both receives and gives. And in this exchange something counterintuitive happens. As the host gives to the guest, the host paradoxically becomes honoured and enhanced. A larger mutual indebtedness emerges in which both host and guest remain distinct and yet fundamentally connected.³⁴

This is true when non-disabled persons offer genuine hospitality to people with disabilities. The Bible is full of episodes and examples of hospitality. But the most poignant account is surely the hospitality that Abraham and Sarah provided to the three weary travellers recorded in Genesis 18:1-15 that brought them a blessing they could not have expected or imagined. Thus, the author of Hebrews writes: ‘Do not neglect to show hospitality to strangers, for thereby some have entertained angels unawares’ (Hebrews 13:2). Most significantly, in providing hospitality we may encounter God and his grace in the other. As Jonathan Sacks asserts: ‘God creates difference; therefore it is in one-who-is-different that we meet God’.³⁵ In the same way, God may choose to speak to us about ourselves in our encounter with people with disabilities. ‘In the face of the retarded’, writes Hauerwas, ‘we are offered an opportunity to see God, for like God they offer us an opportunity of recognising the character of our neediness’.³⁶

Jesus Christ is the very embodiment of solidarity and hospitality. By taking up human flesh and by becoming world, the eternal and uncreated Son of God participates in our human condition. In Hebrews we are told that the eternal Son was ‘made like his brothers in every respect’, is able to ‘sympathise with our weakness’ and ‘was tempted in as we are’, except that he was without sin (Hebrews 2:17, 4:15). Jesus aligns himself in solidarity with sinners, with the weak and the vulnerable, and suffers with them. But Jesus is also the embodiment of hospitality, inviting and welcoming all to share in the divine banquet.

Solidarity and hospitality can appropriately address one of the most damaging realities surrounding people with disabilities – the stigma. A stigma may be defined as a mark of disgrace that sets the person with disabilities apart from the rest of society and that consequently makes him a victim of prejudice and

³⁴ Reynolds, *Vulnerable Communion*, 243.

³⁵ Jonathan Sacks (2002), *The Dignity of Difference: How to Avoid the Clash of Civilisations* (New York: Continuum), 59.

³⁶ Stanley Hauerwas (1986), *Suffering Presence: Theological Reflections on Medicine, the Mentally Handicapped, and the Church* (South Bend, IN: Notre Dame), 179.

discrimination. According to the Mental Health Commission of Western Australia, stigma brings with it experiences of shame, blame, hopelessness and distress.³⁷ With respect to mental illnesses, stigma, according to NAMI ‘erodes confidence that mental disorders are real, treatable health conditions’. Reflecting on the enormous social consequences of the stigma, it argues that ‘[w]e have allowed the stigma and a now unwarranted sense of hopelessness to erect attitudinal, structural and financial barriers to effective treatment and recovery. It is time to take these barriers down’.³⁸ Stigma creates an unfounded but debilitating and paralysing fear in both disabled and non-disabled persons. With reference to the stigma surrounding mental illness, Kathryn Greene-McCreight writes: ‘Stigma creates a fear on the part of the mentally ill and cycles the fear of those who are healthy against those who are ill’.³⁹ Unfortunately, such stigmas also exist within the Church, often inspired and energised by bad theology.⁴⁰ Solidarity with people with disabilities and the practice of true hospitality can overcome their stigmatisation and its ugly and destructive consequences.

Conclusion

Much more can be said about the Christian perspective on disability. But let me conclude. Reflection and discourse about disability is developing in many different sectors of our society – in academia, in healthcare and in politics. Christians should participate in this on-going conversation by drawing from their rich theological and spiritual traditions that are informed and shaped by Holy Scripture. It is from the inexhaustible resources that God has made available that the Church is able to offer her most useful critique, not just of society’s attitude to disability, but also her own. But the Church’s rich spiritual heritage also enables her to offer important insights and perspectives to the question of disability that are sometimes missed by secular approaches.

The role of the Church, however, cannot be limited only to her participation in the on-going conversation about disability, important though this is. The Church must be the very embodiment of the Gospel she proclaims and the unconditional love of God she bears witness to. The Church – and all her individual members – must show what true solidarity with people with disabilities looks like. She must be the very epiphany of God’s grace, mercy and love in her welcome and embrace of people with disability. In other words, the Church must be the sacrament of God’s love and grace, the efficacious sign

³⁷ Government of Western Australia Mental Health Commission, ‘What is Stigma?’ http://www.mentalhealth.wa.gov.au/mental_illness_and_health/mh_stigma.aspx, accessed 28 December 2016.

³⁸ ‘What is Mental Illness: Mental Illness Facts’, National Alliance on Mental Illness, National Alliance on Mental Illness. Quoted in Amy Simpson (2013), *Troubled Minds: Mental Illness and the Church’s Mission* (Downers Grove, ILL: IVP).

³⁹ Kathryn Greene-McCreight (2006), *Darkness if My Only Companion: A Christian Response to Mental Illness* (Grand Rapids: Brazos), 62.

⁴⁰ See Simpson, *Troubled Minds*, Chapter 7.

of that generous hospitality that reflects God's own hospitality. Only in this way can the Church be the sign of hope that God will, in his time, transfigure this broken and sin-marred world into the new heavens and the new earth (Revelation 21).

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