

To DSS Planners and Policy Makers:

I am writing not as an Australian, but as a colleague of a number of people in Australia who work in disability services and community supports and as one who has been there several times to participate and speak in conferences related to inclusive and multidisciplinary supports for and with people with disabilities and their families. We have also had a number of Australians involved in the Institute on Theology and Disability here in the United States. I also write as a professional who has worked extensively in self-directed supports, building community inclusion, and developing collaborations and partnerships between public organizations, advocacy groups and faith-based organizations, including individual churches, synagogues and mosques. Thus, I had a long interest in the ways that public policy can be framed to engage and support that kind of collaboration focused around the expressed needs and dreams of people with disabilities and their families, as well as an interest in the growing research that shows the contribution of inclusive spiritual supports to their quality of life.

I have read the Position Paper for the National Disability Strategy for the next decade. It is an impressive and aspirational plan. I would like to make a short and specific suggestion for including the role of spirituality and faith communities in the Strategy.

First, you list six areas of life for the focus:

1. Economic security
2. Inclusive and accessible communities
3. Rights protection, justice and legislation
4. Personal and community support
5. Learning and skills
6. Health and wellbeing

Each of those is an area in which inclusive faith communities can and do make a difference in the lives of people with disabilities. The most obvious are # 2 and #4, but faith communities are also sites for life-long learning (#5) and, at times, communities that serve roles in advocacy for their members and/or appropriate social justice needs (#3). Many are also involved in the support of community services that help people who are poor and /or need vocational support. There are new models of congregational involvement in helping people with disabilities find jobs by using the social capital within a faith setting (#1). Finally, there is also increasing research around the world demonstrating the positive role that spiritual supports can play in the health and well-being of anyone, not just people with disabilities. More of that has focused on mental health than on physical or intellectual disabilities, but it is getting more attention because of the expressed interest of people with disabilities and their families. One impressive example is the work being done to integrate spirituality into professional care is Hammond Care, in New South Wales, where pastoral theological John Swinton has served as a consultant.

Second, you list five principles for the strategy:

1. **Involve and engage:** has the policy process or program design engaged with and listened to people with disability at all stages of planning and implementation and provided accessible information and opportunities for feedback?
2. **Design universally:** have the principles of universal design been applied where possible and has the project taken advantage of accessible and assistive technology where available?
3. **Engage the broader community:** how has the broader community been informed of, involved in and been made responsible for removing barriers and supporting the inclusion of people with disability?
4. **Address barriers faced by priority populations:** how have the priority populations noted by the National Disability Strategy been identified and what action has been taken to specifically address the barriers they may experience?
5. **Support carers and supporters:** how have the needs of the family, carers and circles of information and formal support for the person with disability been considered in the development of the policy or program?

Again, each of those could support the inclusion of spiritual needs and hopes in the design of person and family centered supports, especially #'s 1, 3, and 5) For example, effective person centered planning would determine a person's preference for addressing spirituality as a dimension of life, and, if a number of people supported by one care agency expressed interest in being more involved in faith communities, how might the faith communities be engaged to support the inclusion of people with disabilities. Whatever one thinks about the importance of spiritual supports, inclusion in faith communities can help develop friendships, relationships, and a supportive network, i.e, help a person feel a place of belonging. One of the key people doing some of this work in Australia is the Rev. Andy Calder of the Uniting Church in Victoria.

Third, and finally, you ask a series of questions, and this one in particular relates to all of the above.

1. **How do you think the Strategy should represent the role that the non-government sector plays in improving outcomes for people with disability?**
2. **(Examples of the non-government sector include big, medium and small businesses, community organisations, employees of these businesses, private research, investment organisations and individuals.)**

One very simple and obvious place that the role of faith communities could be included is in the list of examples from the non-government sector. You might say that they are included under "community organizations," but the importance of listing this arena of community life and support is that if it is not listed explicitly, people will too often not think about role and contribution to more inclusive and supportive communities over all.

If I can provide more information or suggestions, please feel free to contact me. I did not write this to push a product, but if you need a more thorough exploration of the importance and power of addressing inclusive spiritual supports, I am the author of a book entitled *Disability and Spirituality: Recovering Wholeness*. Baylor University Press. 2018, which looks at this over the life span.

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