

PROTECTING RELIGIOUS FREEDOM :

THE CAREGIVER'S RESPONSIBILITY

by

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# Protecting Religious Freedom: The Caregiver's Responsibility

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# Protecting Religious Freedom:

## The Caregiver's Responsibility

### Introduction

Among the rights of people living in group homes which you as a staff member need to protect is the religious freedom which is guaranteed in the First Amendment of the U.S. Constitution. This paper discusses those rights and provides information which will help you guard the religious choices of those in your care. It represents the official viewpoint of Kent Client Services and should be taken as an interpretation of official policy.

### Supporting Choices

It is critical that you understand your job to be more than doing things for people to people. Rather your job is to **support people** in living as freely and as normally as possible in their residential environment and in the community. The support you provide will enhance people's independent living skills while recognizing everyone's interdependence with others, will enhance integration of persons with developmental disabilities into the community, and will promote a sense of personal satisfaction.

Supports for people who are developmentally disabled should be thought of as actions which promote the interests of the person and which enable them to gain access to information, activities, and relationships within typical community environments. Sometimes you will be the person who provides such support. At other times, your job will be to connect the person living in the group home to natural supports available from others such as family members, friends, co-workers, and members of churches and synagogues.

Historically, people with developmental disabilities have been denied their humanness in many ways. We still dehumanize people when remnants of our old attitudes keep us from recognizing the choice-making abilities of most adults with developmental disability. That, combined with the overly-protective attitudes of some parents, teachers, and other caregivers, results in rigidly programmed lives, where decisions about things like what and when to eat, about whom to spend time with, about what to watch on television, and about whether or not to go to church, or to pray at mealtimes, or to have private devotions are made **for** the person.

Persons who have a developmental disability have preferences just like anyone else. While there is sometimes risk in allowing someone to make choices, there is also dignity in making choices that often makes the risk involved acceptable to the person and to those who care about the person. For example, we know it is healthy for people to exercise; allowing the person who lives in a group home the freedom to choose not to exercise exposes the person to some risk, but no more so than that chosen by many of us "couch potatoes". As long as a choice does not interfere with someone else's rights, does not create an imminent threat to the persons or others, and does not break any laws, we generally should allow and support the individual person's freedom of choice and the dignity of risk.

It is clear that adult, developmentally disabled persons have preferences in their spiritual lives, though we have often denied or ignored this reality, much as has happened in other areas of their lives. Because we have denied them choices, some adults who have a developmental disability may have been unwilling participants in religious activity. It is likely that even more frequently adults with developmental disability have been given too few opportunities to express their spiritual selves.

### **Spirituality of Persons with Developmental Disabilities**

People who have not been around persons who are developmentally disabled often wonder if they are capable of understanding religious concepts, particularly if the person has mental retardation. Underlying this question is the tendency to assume that religious faith is mainly a rational set of ideas to be understood with the mind. A broader concept of faith and what it means to "grow" in faith is necessary.

Faith or religion cannot be equated with knowledge, though it is partly that, of course. Faith also involves the element of trust, loyalty, and commitment to someone or something. It is a matter of head and heart. It is part feeling, part idea, part commitment, and part action. It is something known, and it is also something experienced. We do not say that only adults who know a lot about doctrine and the church have faith; children also have faith and people continually grow in faith.

The majority of persons with developmental disabilities clearly are able to have faith knowledge and to grow in their understanding. Because they can understand religious concepts, they may identify with a particular faith group and make statements such as "I am Catholic" or "I am Jewish". Equally clear is the fact that persons with developmental disabilities can trust someone or something, can love and feel loved, can experience a sense of worthiness or affirmation, and can try to live by faith values. Faith, when understood in this dynamic way, is definitely not out of reach for persons with developmental disabilities, even for people with considerable intellectual impairments.

In recent years we have been learning more and more about the religious dimensions of life for persons with developmental disabilities. We are learning how faith concepts and behaviors develop in developmentally disabled persons (Hoeksema, 1993; Schurter, 1994; Webb-Mitchell, 1994). We know that mildly impaired persons will learn more faith concepts and be more interested in why people act like they do than will moderately impaired individuals who may be less questioning and be more interested in "belonging" to a group. We know that people with developmental disabilities express their beliefs in the same variety of ways as does the general population (American Association on Mental Retardation, 1992). We also know that the religious beliefs and values of persons with developmental disabilities help to guide their moral behavior (Coulter, 1991).

Perhaps, more importantly, we know that religion serves the same functions in the lives of people with developmental disabilities as it does for anyone else (Gaventa, 1986). Engaging in typical forms of religious expression and participating in life of a faith community provides many developmentally disabled persons with 1) a sense of comfort; 2) a sense of belonging and fellowship; 3) an opportunity to worship God; and 4) an opportunity to serve others. These are important dimensions of religious life for many people in our society; they should not be denied, nor should they be forced on, anyone.

## First Amendment Rights

The Bill of Rights which amended the United States Constitution includes in its First Amendment protections for free speech and freedom of religion. The people who approved this amendment remembered well the state church in England. With the First Amendment they sought to protect people from being forced to practice any religion at all and to protect people from not being allowed to practice the religion of their choice. The “free exercise” clause of the amendment guarantees *freedom of* individual choice in the particular form of religion to which a person is committed, and the “non-establishment” clause guarantees *freedom from* having any religion or religious practice imposed.

A common misrepresentation of the First Amendment is that it requires public agencies to keep their hands off religion, and so we have regular spats about whether a picture of Jesus may hang on a public school wall, or a menorah may be set up on a public plaza, or whether physical therapy services may be offered to children in a nonpublic school. Typically, the courts have tried to establish neutrality toward religion, but often they seem to have prohibited religious practice; that is, they have denied “free exercise”, out of fear of violating the “non-establishment” clause. One aspect of religious freedom—freedom from coercion—has been given precedence over another. Some citizens have been denied the free exercise of their religion in order to prevent others from being coerced to practice religion. This is not neutrality at all.

At least one recent decision of the U.S. Supreme Court has begun to recognize and correct this error (*Zobrest v. Catalina Foothills School District*, 1992). In this case the court found that, Jimmy Zobrest, a profoundly deaf high school student, was entitled under law to the services of a sign language interpreter paid by the public schools regardless of the fact that Jimmy attended a nonpublic, private school. To deny the services would not have been a neutral interpretation of the First Amendment’s two clauses but would have favored the non-establishment clause over the free exercise clause. Allowing Jimmy the use of an interpreter in a school of his choice does not advance but is neutral toward religion. To forbid use of an interpreter would be discriminatory against religion.

This case will help to correct deep and serious misconceptions about the nature of religious freedom far beyond the narrow confines of this case. The idea that religious practices must be removed from all areas of life in which

government is involved does not produce neutrality and pluralism but gives advantage to the secular and promotes hostility to the religious. The two clauses of the First Amendment need to be read as complementary. Together they ensure that government power will not be used to force the exercise of religion or suppress it.

The challenge for you in the group home context will be to enable individuals to decide whether or not to be involved in religious activities without creating incentives for them to choose either to exercise or not exercise religion. People must have equal freedom to make either choice. When you advance religious **choices**, you are protecting an individual's First Amendment rights.

### **Guidelines for Practices in Group Homes**

When group homes are operated by tax supported agencies and are therefore nonsectarian (not restricted to or dominated by any particular religious group), the challenge is to honor and support the choices regarding religious practice of all the people living in the home. Some will want to pray before meals, for example, or to participate in a Bible study class at the local church, while others will not. Informing the people about the choices they have as well as teaching them to respect the choices of others may be necessary in order to protect both "freedom of" and "freedom from" religion. Here are a few guidelines.

#### ***Guideline #1: Understand the influence of your own life experiences***

All of us come to our work with life experiences which may influence the ways in which we respond to the needs and choices of those people for whom we care. As you begin to deal with religious issues in your work, it will help if you recognize the influence of your own personal religious history. If your involvement with a faith community has been positive and you have a personal faith commitment, then you will be eager for others to have similar experiences. If you have not had a very active religious life, or if you have had very bad experiences with ministers or parochial schools, that probably would make you disinterested in encouraging other people to be very spiritually active. The point is to be very self-aware in order that you may support choices made by the adults in your care on the basis of their needs and preferences, not your own. In other words, the needs and preferences of the people living in the group home come first.

***Guideline #2: Religious practices are allowable in the group home as long as no one is coerced to participate and no single form of expression is favored over another.***

Your job is neither to prevent religious expression nor to compel certain behaviors; your job is simply to help people make the same choices you can make. Sometimes you will not need to ask about preferences because you will observe people already engaging in religious practices. At some times you may be asked for help in doing something like getting someone to church or synagogue. At other times you may need to take more initiative in order to learn what people's preferences are.

Since many people living in group homes come from families in which particular religious traditions are observed, it can be useful to talk with family members about an individual's habits. This is particularly true if the people living in the home where you are employed are severely impaired and have limited communication skills, though people who cannot talk may still be able to indicate their preferences nonverbally through facial expression, body language and behavioral changes. Some useful information to find out includes whether someone customarily goes to church, whether he or she has a habit of praying before meals or at bedtime, and whether he or she participates in any mid-week activities at church such as a religion education class. It is important to honor family values and traditions that the group home resident has grown up with whenever that person, or that person's guardian, indicates a desire to continue to practices; and you should not wait for the individual to take the initiative. You may take the initiative in supporting the religious practices. It is as legitimate to find out whether someone would like to go to church as it is to inquire about an interest in going swimming.

On some occasions people living in group homes may have conflicts over choices regarding religious practices. For example, one roommate may want a quiet devotional time before going to bed; the other might prefer to watch a little David Letterman before turning out the lights. Or some people may prefer to pray aloud before meals, while someone else objects to having to listen to another's prayer. As a staff person, you may be able to teach people to acknowledge and respect such differences, and to help them negotiate compromises.

Many of the principles and skills of self-advocacy which are often taught to persons with a disability can be applied to the specific issues around religious practices. People can be taught how to resist peer pressure to go to church, for example, and to say "No" and give their reasons; people also can be taught how to accept a "No" response from someone else. By teaching someone how to say "No", you help a person to do what he/she thinks is best. By teaching how to accept someone else's "No", the person living in the group home learns to respect the other person's choices and to avoid upsetting them. Other self-advocacy skills include asking for the reasons for the choices made by others, identifying when persuasion is not working, negotiating solutions (compromising), and similar conflict resolution and basic communication skills. Your job, essentially, is to make people aware of their choices and then to support them in the choices they make.

In contrast to the personal rights focus of self-advocacy approach, an alternative is to assist the people in the group home to live with each other's different choices regarding religious beliefs and practices by teaching them the principles of caring. From knowing what it is like to feel cared for, people can be helped to show others that they care. Caring for others as you care for yourself, or as you yourself want to be cared for, is a value which can be applied to many aspects of living in community with others.

***Guideline #3: Use natural support systems whenever you can to meet the religious needs of people who live in the group home. Connecting people to congregations is one excellent way to accomplish this.***

Agencies never have enough paid employees to be able to offer people in their care all of the support they may need or desire. Besides, if we are serious about embedding people in the community as opposed to just having them live here, then it is important for us to assist people in making connections. A tremendous source of natural relationships for many people is the church, parish or synagogue. Some group home staff have missed opportunities to enrich the lives of people living in the home and to increase the number of non-paid relationships they experience by failing to be more open to, and creative about, connecting people to neighborhood churches (or reconnecting people to the church in which they have grown up).

Consider the variety of ways that persons with developmental disabilities are being involved in local congregations across the country. Many faith groups offer religious education programs for adults with mental impairments. Over ten thousand adults with retardation are involved in over six hundred Friendships Groups, for example, and that represents the work of only one denomination, the Christian Reformed Church. Hundreds of congregations have created "disability concerns committees" as a way of identifying the needs and gifts of people within the congregation. Many denominations have national offices which assist local faith groups in welcoming persons with disabilities and in eliminating barriers in architecture and attitude. You may want to check out the Resource List at the end of this paper.

From the perspective of the person with disability, there are many more opportunities for developing and expressing their faith today than ever before. They not only worship alongside of non-disabled folks, but they minister to, and alongside of, other members of the faith community. People with disabilities are ushers, deacons, greeters, members of choirs, participants in adult education classes, volunteers in service projects, and active members of fellowship groups. These are fine examples of the principles of normalization and social role valorization in practice.

When they become known in a church or synagogue, persons with and without disabilities connect their lives in other ways too, not just on Sunday or Sabbath. People in churches function everyday as advocates, companions, job coaches, transportation coordinators, mentors, and friends. By supporting someone in the group home in their desire to be part of a faith community, you may free them from dependence on the paid services of an agency and connect them in a voluntary network that may last for years.

This is not a perfect world, of course. Some churches have little experience with people living in group homes and may need some encouragement to remove the stairs and the stares. A few strategies which you might consider are inviting local pastors to visit your home, visiting local churches for worship with one or two people from your home, and networking with a chaplain from a nearby rehabilitation agency. If you are interested in finding out more about how to link persons with faith communities, see the bibliography and other resources at the end of this paper.

## **Some Indicators That Things are Going Right**

When religious freedom is being protected in the home, there will be observable signs. Some of them are:

- 1) Residents will express their preferences to be involved or uninvolved in particular religious activities;
- 2) Residents will respect the choices of others and will experience freedom from harassment;
- 3) Staff will notice an absence of conflict and will find themselves naturally supporting each person's religious choices in the daily routines of the home;
- 4) Natural relationships will develop and deepen between people living in the group home and members of congregations who live elsewhere.

## **Conclusion**

Serving your fellow human beings through your work in a group home is a wonderful and awesome responsibility. Those you support are indeed whole persons with many dimensions, including spirituality. When you see them not only as persons to be served but also as people to be empowered as choice-makers, then you will have come a long way in making the care you provide effective.

## **A Final Note**

Applying the concepts discussed above to diverse situations and settings may not always be easy. The author welcomes contact from readers who wish to discuss their own efforts to support persons in their choices regarding religious practices. Suggestions for improvements in this document also are welcome. Please contact:

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*Zobrest v. Catalina Foothills School District*, U.S. Supreme Court, October, 1992.

# INTEGRATING SECULAR AND RELIGIOUS PERSPECTIVES IN THE GROUP HOME

by

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## **Session One:      Setting the Context**

- A.    Personal Introductions and Overview of Training
- B.    Why should we care about Religious Needs?
- C.    What does Religious Freedom Mean?
- D.    What is the impact of Personal Religious Beliefs?

## **Session Two:      Responding to Religious Needs Expressed by Persons with Developmental Disabilities**

- A.    Evidence of Faith in Persons who have DD
- B.    Ways of Looking at Faith Development
- C.    Participation in Faith Communities
- D.    The Church as Resource and Partner – Some Strategies for Linking People in Group Homes with Faith Communities

## **Session Three:      Applications and Problem Solving**

- A.    The Support Model vs. the Services Model
- B.    Incorporating Respect for Individual Differences and for Choice Into Life in the Group Home
- C.    Generating Some Guidelines for Practice
- D.    Indicators of Success

## **STAFF TRAINING MODULE**

### **“Integrating Secular and Religious Perspectives In the Group Home Context”**

**Participants: Resident Managers and Direct Care Staff  
Employed at the Gladiola Home**

#### **Session One: Setting the Context (75 minutes)**

- A. Introductions
  - 1. Personal
  - 2. Overview of three sessions
  - 3. Training for Other Groups
  
- B. Why are we interested in Religious Needs?
  - 1. Individual preference and choice
  - 2. Respecting the heritage and faith tradition of family homes
  
- C. What is the meaning of Religious Freedom?
  - 1. Sectarian vs. Non-sectarian group homes
  - 2. Constitutional Guarantees
    - a. Free exercise of religion
    - b. Non-establishment
  - 3. Misinterpretations
    - a. Hands Off – no religious practices allowed
    - b. Staff values are primary
    - c. Freedom *of* is more important than freedom *from*
  
- D. What is the Impact of Personal Religious Beliefs?
  - 1. The influence of one’s faith history
  - 2. Making personal choice for those living in home the primary concern
  - 3. Respecting staff needs

## **STAFF TRAINING MODULE**

### **“Integrating Secular and Religious Perspectives In the Group Home Context”**

#### **Session Two: Responding to Religious Needs Expressed by Persons with Developmental Disabilities (75 minutes)**

- A. Evidence of Faith in Persons with Developmental Disability
  1. Story of Pierre
  2. Individuals I have known
  3. Experience of Friendship groups
  4. Video excerpts: “Give it Away” (Friendship Foundation)
  5. Elicit stories from participants about spiritual lives of persons with DD whom they know
  
- B. Ways of Looking at Faith Development
  1. Fowler’s “stages”
  2. Westerhof’s “styles”
  
- C. Participation in Faith Communities
  1. What some congregations are doing to welcome and use the gifts of persons with DD
  2. Video: “Everyone Belongs” (Mennonite Disability Services)
  
- D. The Church as Resource and Partner – Strategies for Linking People in Group Homes with Faith Communities
  1. Using church-based circles of support to accomplish normalization.
  2. Participating in worship experiences
  3. Connecting with the “home” or “family” church
  4. Writing religious goals into individualized plans

## **STAFF TRAINING MODULE**

### **“Integrating Secular and Religious Perspectives In the Group Home Context”**

#### **Session Three: Applications and Problem Solving (75 minutes)**

- A. The Support Model vs. the Services Model
  - 1. The 1992 AAMR definition on retardation, especially types and intensity of support
  - 2. Teaching how to exercise choice
  
- B. Incorporating Respect for Individual Differences and for Choice into Daily Life in the Group Home
  - 1. Mealtime practices
  - 2. Personal devotional time
  - 3. Worship
  - 4. Sunday/Sabbath observance
  - 5. Bible Study
  - 6. Interpersonal behaviors of those living in home
  
- C. Guidelines for Practice
  - 1. Generalize from above discussion
    - a. Avoid paternalism
    - b. Allow dignity of risk
    - c. Protect those susceptible to influence
    - d. Enable and support choice
  - 2. Generate additional guidelines
  - 3. Resolving differences
  
- D. Indicators of Success (How will we know when we are doing things right?)
  - 1. People living in home will express satisfaction and freedom from coercion and harassment
  - 2. Parents and family members will report satisfaction
  - 3. Staff will experience absence of conflict and pleasure in supporting choices of those living in home.
  - 4. Residents of home will make personal choices regarding their participation, or non-participation, in religious activities.
  - 5. Natural systems of support will develop in congregations in which persons living in group home have chosen to participate.

## **SOME KEY INSIGHTS TO BE TAUGHT/LEARNED**

- I. Persons with developmental disabilities are capable of religious or spiritual expression, just like any one else.
- II. People with developmental disabilities have preferences in the religious dimension of life as they do in other areas and must be allowed and enabled to make choices.
- III. A public, non-sectarian home must protect the freedoms of everyone and coerce no one.
- IV. Staff rights, freedoms, and choices for their own lives are subservient to the rights, freedoms, and choices of those for whom they provide care. In other words, the needs of residents come first.
- V. Religious practices are allowable in the home as long as no one is coerced to participate and no single form of expression is given favored status
- VI. Connecting to people living in a group home with congregations is an excellent way to meet spiritual needs and enhance normalization.