

Exploring Faith and Religion in the Narratives of Individuals with Intellectual Disabilities

Katarzyna Ćwirynkało¹, Monika Parchomiuk², Agnieszka Żyta¹,
Katarzyna Andruszkiewicz³, Marta Kosecka³

¹ University of Warmia and Mazury in Olsztyn, Poland

² Maria Curie-Skłodowska University in Lublin, Poland

³ Polskie Stowarzyszenie na rzecz Osób z Niepełnosprawnością Intellektualną,
Warsztaty Terapii Zajęciowej w Ostródzie, Kąkrowo, Poland

HOW TO CITE:

Ćwirynkało, K., Parchomiuk, M.,
Żyta, A., Andruszkiewicz, K.,
& Kosecka, M. (2024).

Exploring Faith and Religion
in the Narratives of Individuals
with Intellectual Disabilities.

*International Journal
of Special Education*, 39(2), 178-187.

CORRESPONDING AUTHOR:

Katarzyna Ćwirynkało;
k.cwirynkało@uwm.edu.pl

DOI:

<https://doi.org/10.52291/ijse.2024.39.31>

ABSTRACT:

There is a lack of research on how individuals with intellectual disabilities perceive faith and religion, and the role these play in their own lives and in the lives of others with disabilities. This study aimed to explore how Polish adults with intellectual disabilities understand faith and religious practices. To achieve this, interviews were carried out with 34 adults who have intellectual disabilities. The interviews were audio-recorded, transcribed, and thematically analyzed. The study was inclusive, with co-researchers who also have intellectual disabilities actively involved in the research design, conducting interviews, and analyzing the data. We found that Polish adults with intellectual disabilities ascribe various meanings to faith and believe that faith plays a pivotal role in the lives of people with disabilities. Implications for further research and practice are discussed by both academic co-researchers and co-researchers with disabilities.

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Keywords: Disability, Intellectual Disability, Faith, Religion, Inclusive Research

INTRODUCTION

According to data from the Central Statistical Office (GUS, 2022), religious affiliation among Poles is quite varied. The largest group identifies as members of the Catholic Church (71.3%), followed by those reporting no religious affiliation (6.8%), and individuals belonging to the Orthodox Church, Jehovah's Witnesses, the Evangelical-Augsburg Church, the Greek Catholic Church, and others (each representing less than 1% of the National Census participants). Given the widespread expression of religious affiliation, it's expected that faith and religion play a significant role in the lives of many, including those with intellectual disabilities. Although research (Carter, 2024) shows that individuals with intellectual disabilities often see faith and religious participation as crucial to their well-being, there has been limited attention to this issue in Polish policy, practice, and research.

Research findings from international literature indicate that belief in God or a higher power is widespread among people with intellectual disabilities, and religious practices play a significant role in their lives (Liu et al., 2014; Shogren & Rye, 2005; Timmins et al., 2024; Turner et al., 2004). It gives them solace, especially when they are in poor health or distress (Timmins et al. 2024).

People with intellectual disabilities have various opportunities to engage in congregational participation, shaped by a combination of personal and environmental factors (Büssing et al., 2017; Carter et al., 2015; Liu et al., 2014; Shogren & Rye, 2005; Turner et al., 2004). Research indicates that individuals with disabilities, such as intellectual disabilities, value participating in faith communities, which can foster positive relationships and provide a sense of belonging through shared traditions and routines, especially in congregations that emphasize inclusivity for people with disabilities (Huggins & Copeland, 2023). Faith offers individuals with intellectual disabilities a sense of comfort, meaning, and integration (Timmins et al., 2024), reinforcing their personal and religious identity, as well as their connection to a community of people with shared social experiences (Carter et al., 2024; Sango & Forrester-Jones, 2017; Turner et al., 2004). In the context of religious communal experiences that fulfill various psychosocial needs, it's also worth noting the shift in how some view their disabilities, often seeing them in a positive light—as a gift (Liu et al., 2014). Some studies (e.g. Shogren & Rye, 2005) suggest that individuals with intellectual disabilities may develop clear religious beliefs and connect them with specific symbols. Additionally, they can articulate personal com-

mitments as members of their chosen faith (Turner et al., 2004), which may serve as a framework for evaluating their own and others' behavior.

A few Polish studies on this topic (Ćwirynkało, 2023; Parchomiuk et al., 2024; Żyta, 2023) suggest that adults with intellectual disabilities associate faith with concepts such as hope, salvation, opportunity, being a good Catholic, participating in religious practices, and belonging to a faith community. These studies also indicate that, while their participation in religious practices brings both positive and negative experiences, the majority identify themselves accurately as Catholics and are generally accepting of people from other denominations. Despite the importance of faith to people with intellectual disabilities, this dimension of their lives is under researched and often neglected in the areas of support (Carter, 2024). This is clearly visible in Poland.

Aim of the study

The current research aimed to understand how Polish adults with intellectual disabilities perceive faith and religious practices, focusing on how they conceptualize faith and the role they ascribe to it in their own lives and in the lives of other people with disabilities. We believe that understanding how these persons perceive these aspects can highlight their unique spiritual needs and experiences, which are often overlooked in research and practice. Additionally, this insight can inform more inclusive pastoral care and community support initiatives tailored to this group.

METHOD

Study Design

In this study, we applied a human rights-based model of disability (Arstein-Kerslake et al., 2020) to recognize the agency and expertise of individuals with intellectual disabilities. To achieve this, we adopted an inclusive research approach, which is defined as research conducted with people with intellectual disabilities, including them as active participants rather than subjects (Strnadová & Walmsley, 2018). This is made possible when they assume the roles of co-researchers, are adequately prepared for these roles, and receive the necessary support to fulfill them. This approach facilitates the sharing of personal experiences, and the insights drawn from these experiences significantly enhance the research (Armstrong et al., 2019; Ćwirynkało et al., 2024). Co-researchers with disabilities can be involved at various stages of the research process, including selecting research topics and

methods, recruiting participants, and participating in data analysis.

To ensure the project was genuinely inclusive, we followed the principles outlined by Walmsley and Johnson (2003). These principles include formulating the research problem with co-researchers with disabilities, advancing their interests through the research, involving them throughout the research process, giving them some control over it, and making the research questions, process and reports accessible to people with intellectual disabilities.

Research Team

The research project was launched by three academic researchers from two Polish universities in February 2022. They initiated educational partnerships with two organizations specializing in the social and vocational rehabilitation of persons with intellectual disabilities. The initial phase of this collaboration involved training for prospective co-researchers with disabilities, with 13 participants (including 7 self-advocates) agreeing to take part. After the training, the **Empowered Voices Group** was formed, comprising nine co-researchers with intellectual disabilities. One of the inclusive projects they conducted explored the meaning of faith and religion in the lives of individuals with intellectual disabilities, and the results of this project are partially presented in this article. Six co-researchers with disabilities participated in various stages of the project, with four contributing to specific phases, such as co-designing the questionnaire and co-conducting interviews. These four were not interested in being listed as co-authors of the article and did not give consent to this. The remaining two co-researchers were involved in all phases of the project, including data analysis and writing this report, and are credited as co-authors of this article.

Data Collection

Recruitment was conducted at four rehabilitation and sheltered employment centers across three cities in Poland. During brief meetings with the management of these institutions, the scope of the project was explained. Once managers gave their approval, individual meetings were held with people with intellectual disabilities to introduce the research team, explain the project, and emphasize that participation was entirely voluntary. Both researchers with and without intellectual disabilities were involved in this process.

This research employed individual semi-structured interviews to explore the religious beliefs and activities

of individuals with intellectual disabilities. The interview guide included questions such as, “Is faith important to you? Why?” and “What is the role of faith and religion for people with disabilities?” The interviews were conducted by teams comprising one academic researcher and 1–3 co-researchers with intellectual disabilities. At the outset, co-researchers explained the study’s purpose, outlined the recording process, emphasized the voluntary nature of participation, and informed participants of their right to withdraw at any time. Written consent was obtained using a form co-designed with the co-researchers with disabilities. Interviews lasted between 25 and 60 minutes, with follow-up questions and clarifications used to ensure accurate understanding of participants’ responses.

Participants

Potential participants had to fulfill the following criteria to be included in the study: (1) being 18 years or older, (2) having a diagnosed intellectual disability, and (3) the ability to provide informed consent to participate. In total, 34 individuals with intellectual disabilities (13 men and 21 women) were interviewed, ranging in age from 19 to 65 years (average age = 39). All of them were single and none had children. Twenty-eight participants lived in urban areas, most often with their parents, either both or one. Only three individuals lived independently—two in urban areas and one in a rural setting, with one receiving assistance from a support worker. Six participants were employed at a vocational activity center, while other 28 attended occupational therapy workshops.

Ethics

The research project received approval from The Scientific Research Ethics Committee of the University of Warmia and Mazury in Olsztyn, Poland (Decision No. 4/2022). To adhere to the principles of inclusive research, several key guidelines were followed: 1) Participation of co-researchers and participants was informed and voluntary at every stage, 2) Materials and information were made accessible and tailored to the cognitive abilities of individuals with intellectual disabilities, and 3) Methods and approaches were used that maximized the engagement and potential of both co-researchers with disabilities and participants.

Data Analysis

We employed reflexive thematic analysis (Braun & Clarke, 2022) to examine the data obtained from the interviews, following a six-step process. First, the authors familiarized themselves with the dataset (step 1). Next,

they coded the data by identifying sections that appeared relevant and meaningful (step 2). In the third step, they formed initial themes by grouping codes that represented similar ideas or concepts. Afterward, they refined and reviewed these themes (step 4), then further clarified, defined, and labeled them (step 5), and finally compiled the results into a report (step 6). All co-researchers with intellectual disabilities verbally consented to the use of this material, were informed about the article, and had the opportunity to provide feedback on it. Two actively participated in the data analysis and engaged in discussions about the findings. They also contributed to writing sections of this report, which are labeled “Co-researchers with disabilities’ perspective” to highlight their input.

Research process – co-researchers with disabilities’ perspective

We have already completed several research projects. Some were quite easy, and the participants were open. The project on faith was a bit more difficult and challenging for us. For us, faith is not a problematic subject. It’s something you can talk about, but others didn’t really want to discuss it. Sometimes they would shut down. We had to prompt and encourage them. Sometimes just one word was enough to get the person to open up. And we always said that we were there to support them, to help ease their nerves. What we wanted to convey was said in a very straightforward manner. Thanks to our presence, it was easier to reach some people and motivate them to talk. The university also played a big role in the faith project. Thanks to K. (one of the academic researchers),

we undertook the project together. Together, we helped these people open up. We feel that she helped us too because we feel appreciated. What we say is important to her. While studying people and talking with them, we felt distinguished, valued, and not rejected. And we could discuss the results. It wasn’t easy, but our voice mattered.

FINDINGS

The conducted analysis allowed for the identification of three superordinate themes: (1) The essence of faith, (2) Personal meanings ascribed to faith, and (3) The role of faith for people with disabilities, followed by several constituent themes (Table 1).

The first superordinate theme that was generated relates to the essence of faith, illustrating how participants understood and articulated their religious beliefs. For most participants, faith was deeply intertwined with both belief in God and the performance of religious practices. Their descriptions suggest a strong connection between faith and communal religious rituals, such as attending church services, receiving communion, celebrating religious holidays (e.g., participating in Christmas Midnight Mass), and engaging in prayer. These activities appear to serve not only as expressions of faith but also as reinforcements of their identity as believers. The emphasis on these outward practices highlights the role of structured religious participation as a core element of faith for many individuals with intellectual disabilities.

Interestingly, participants often provided tautological or circular definitions of faith, equating it with being

Table 1. Superordinate and constituent themes

The essence of faith
Being a believer and a practicing person – tautological explanations Good deeds: Acting for the benefit of others Belief in the existence of God (a higher power)
Personal meanings ascribed to faith
Gaining blessings and prosperity Source of personal transformation and strength Sense of community (with God and people) Faith provides space for activities one enjoys Obligation to certain actions – mission to convert non-believers Necessity of faith
The role of faith for people with disabilities
Community of suffering – the transcendent dimension of faith and disability Faith as a source of support and strength in experiencing disability Faith as a source of healing

a believer or someone who engages in religious practices. For instance, 15-M48 explained that faith means, “going to church, always praying,” which points to a view where religious participation itself defines belief. This suggests that, for many, faith is seen as inseparable from the rituals and behaviors associated with it. The notion that “those who don’t go to church don’t know what faith is” (15-M48) reflects the strong social and communal dimension of faith within this group, where belonging to the religious community through participation is critical to their understanding of belief.

In addition to ritual and communal practice, some participants framed faith in terms of ethical behavior, particularly the importance of good deeds and helping others. This shift from ritual to ethical action broadens the understanding of faith beyond formal religious practices to include moral responsibilities. For instance, 16-F49 described faith as “helping others, including people with disabilities or those who need help,” which reflects a view of faith as active compassion and service. This interpretation aligns faith with the concept of love and care for others, suggesting that religious belief also carries a moral imperative to act for the benefit of those in need.

Several participants expressed a more abstract view of faith, identifying it primarily as belief in the existence of God or a higher power, without necessarily tying it directly to specific practices or moral actions. For example, 7-F43 explained faith as simply “to believe in God. To believe in what’s up there,” reflecting a more contemplative or existential understanding of belief. Similarly, 15-M48 added, “Faith is important, you have to love God. Because God gives us health,” which ties belief in God to tangible benefits such as health and well-being, suggesting that for some, faith is also about trust in the divine providence.

The second superordinate theme focused on the personal meanings participants ascribed to faith. This theme explored the importance of faith and its perceived influence on interviewees. For many, faith was seen as a crucial element of life, providing blessings, strength, a sense of community, and a sense of well-being. The predominant constituent theme in this sphere was linked to gaining blessings and prosperity. Many participants expressed a deep conviction in the value of faith, identifying numerous benefits that come from being both a believer and a practicing member of the faith community:

Faith is important. Yes. It helps. Faith is the most important thing in life. Because every person has only one life. God takes care of others. He takes care of me. He helps in my heart. I feel good. (21-F31)

Faith is very important; you have to love God. Because God gives us health. (15-M48)

For some interviewees, faith was not only a source of divine favor but also a means of personal protection, giving them a sense of security. They believed that faith could shield them from misfortune and provide reassurance in times of uncertainty. For example, one participant shared a personal experience about how prayer seemed to protect her from an accident:

Well, it gives me a sense of calm. I know that nothing bad will happen afterward. Especially when I have important things to take care of. For example, the day before yesterday, I prayed not to slip on the ice, and, God forbid, I used to fall on the ice every year, but yesterday someone was watching over me, I don’t know if it was my dad or God, but someone was definitely watching over me. Yesterday, I didn’t even slip a bit! (29-F32)

For some, receiving these blessings and benefits was contingent on a deep belief and trust in God. Faith was seen as requiring an active commitment, not just passive belief, as one participant explained:

It depends because some people say they believe in God but don’t practice, meaning they don’t go to church. But for me personally, as a believer, you need to have trust. For example, a few years ago, I made a vow to go to Częstochowa, and I was there for two days. I have epilepsy, and I was there for two days. And for six months afterward, because you need to trust in Our Lady and the Lord Jesus... For six months after I came back, I didn’t have any seizures, no seizures... But you need to trust. You simply need to believe! (18-F54)

For many participants, faith also offered a sense of connection not only with God but also with others. This sense of community appeared in both an abstract form (a spiritual connection with God) and in more tangible ways, such as through social support and religious activities. One participant described a religious group he belonged to, emphasizing the importance of shared rituals and companionship:

I go to church myself, and I also belong to the ‘Faith and Light’ [Foi et Lumière] group here [...]. When I go there, I go with my mom. We go there on the fourth Sunday of the month. We have both meetings and Masses there. We also go on trips. [...] It costs money, whether it’s a small or large amount, but when I go with my mom... Last year we went for a week. This year we’ll go for 10 days. We can get away from the city smell. There’s a beautiful forest

there. You can explore a lot. Although there's a lot of prayer, there's also entertainment and various events, like bonfires, etc. We discuss everything, when we have meetings, ask the priest, and about the church. There's also a lot of prayer, but that's the point! [...] And sometimes we can take the priest aside, ask him, and talk about problems, and he really helps. (31-M41)

Faith also served as a powerful force for personal transformation and inner strength. For many participants, it was not only a source of support but also a catalyst for self-improvement, boosting their self-worth and motivating them to become better people. One participant described faith as enhancing their sense of value, "*Faith enhances a person's worth.*" (9-M45)

Another participant echoed this by sharing how faith gave them the strength to face challenges, "*It gives me strength. I believe that if I pray, things will definitely get better tomorrow.*" (29-F32).

Faith was also seen as a way to elevate one's mood and develop interpersonal skills. Through faith, participants reported learning to become more empathetic and open toward others:

On days when I feel sad, I pray and I feel better, much better. (28-F24)

I have learned to be open to people, not to be selfish, but to help others when they need it. (16-F49)

In addition to personal development, faith provided participants with enjoyable activities, such as attending church, singing religious songs, and participating in rituals. For many, these activities offered a positive and structured outlet for social engagement:

Faith is important; it's such a great thing. If someone doesn't believe, they don't celebrate Easter, Christmas, New Year's Eve... But someone who has faith believes! For example, they believe in Santa Claus, their own God, the Lord Jesus. (...) Faith is important to me because I enjoy praying, I like singing religious songs. When I had my First Communion, I also had Confirmation, and I like to sing these songs. I still sing them. (6-F34)

You go to church. And if there were no church, where would you go? You'd just sit around... But with the church, there are weddings and everything. (25-F27)

An intriguing aspect within this context was the significance attributed to disability. Faith was seen as a great equalizer, where physical limitations no longer defined a person's worth. Instead, participants believed that faith erased the distinction between those with disabilities and

those without:

For me, the Catholic faith shows that even people with limitations, with disabilities, are important. Faith does not impose limits. Everyone can believe, both in church and at home. There are no limitations imposed by faith. (17-F35)

This perspective suggested that, through faith, the divide between individuals with and without disabilities was replaced by another, more inclusive distinction: believers versus non-believers. For people with disabilities, faith provided a sense of belonging and inclusion, uniting them with others in a community that transcended physical barriers.

For some interviewees, faith was also seen as a call to action, particularly a mission to convert others. As one participant shared:

It's a big responsibility because there are different faiths, including Jehovah's Witnesses. Therefore, it is necessary to convert others to the Catholic faith. (11-F50)

Lastly, a recurring theme was the notion of faith as a necessity in life. Several participants emphasized that believing in something was essential for everyone, providing purpose and guidance:

I think you need to believe in something. That's what faith provides. Everyone must believe in something. (34-F45)

The third superordinate theme focused on the role of faith for people with disabilities. It comprised three constituent themes, out of which the first one referred to a sense of belonging to a community of suffering – the transcendent dimension of faith and disability. Some participants noticed similarities between how they suffered as people with disabilities and/or illnesses and how Jesus suffered, dying for people:

The third superordinate theme explored the role of faith for people with disabilities, highlighting how faith provides a sense of belonging, strength, and healing for these individuals. This theme comprises three key aspects.

First, participants emphasized a connection between their suffering and the suffering of Jesus, creating a sense of belonging to a 'community of suffering'. They related their own experiences of illness and disability to the transcendent nature of Jesus' sacrifice, feeling that their suffering brought them closer to God: "*I think that faith is important for people with disabilities because they can connect their suffering with God. They can entrust their suffering to God in their illness.*" (9-M45)

Second, faith was seen as a vital source of strength and support in experiencing disability. In times of weakness,

participants believed that turning to God through prayer or attending church masses provided them with motivation and the emotional resilience to endure. This was particularly important in the context of rehabilitation, where faith was perceived as helping to boost courage and persistence in overcoming physical challenges:

You can pray if you are sick, or if... if someone can't manage on their own, they can pray. (7-F43)

From the perspective of a person with a disability, faith in God is important in rehabilitation. [...] It can provide strength in rehabilitation and make a person braver and stronger. [...] But one wants to live and continue fighting. And also give strength to others with their own faith. (17-F35)

The third aspect focused on faith as a source of healing, often rooted in a belief in miracles. Participants expressed hope that their disabilities could be reversed or that they might become 'normal' through divine intervention. This belief in miraculous healing was deeply ingrained for some, who shared personal experiences of improvement attributed to faith:

I think a person should believe that one day they will become like others, like a normal person who works. You simply need to believe that a miracle will happen someday, just like in my case. I had a contracture in my right hand, and because of the pandemic, I took medication, and a miracle happened. (34-F45)

The theme also delved into whether faith held greater significance for people with disabilities than for those without. Some participants believed that faith was especially important for people with disabilities because of their unique struggles and hopes for a better life, including the hope that they would be free from their disabilities in the afterlife:

Faith is important for people with disabilities. Maybe when we are in heaven, we will be healthy? We will walk... we will jump... Here on earth, we are condemned... Faith is more important for people with disabilities. Because they have hope that one day they will be healthy, they won't need to use wheelchairs or any other equipment. (19-M24)

Certain participants also believed that people with disabilities were more likely to remain close to their faith compared to individuals without disabilities, attributing this to the strength and guidance they received through their beliefs:

Unfortunately, able-bodied people have turned away from the Church, but people with disabilities have remained in their faith, believing that it gives us strength, a smile, and guides us along the simpler path because life consists of different paths. (17-F35)

However, not all participants agreed with this perspective. Some argued that faith was equally important for both people with and without disabilities, suggesting that faith is a universal experience that transcends physical ability:

Faith is important for people with disabilities, but it doesn't matter much whether they have a disability or not. What significance does it have? When we reach God, we will still be disabled, only without a wheelchair. (24-M36)

Finally, many participants underscored the equal right of people with disabilities to have faith and engage in religious practices:

It is very important because people with disabilities also want to believe in God. (5-M64)

It is important for everyone. Not just for those who are disabled or able-bodied. (12-F31)

DISCUSSION

The current study shows that for many adults with intellectual disabilities, faith is a multifaceted concept, encompassing religious rituals, ethical behavior, and abstract belief in a higher power. Communal practices like church attendance were central to many participants' sense of faith, which does not seem to align with prior research (Büssing et al. 2017), in which praying, and church attendance were stated rather seldom by persons with intellectual disabilities. In the present study, however, there was also space for more personal and individualized interpretations of what it means to believe. This diversity in perceptions reflects the broader complexity of faith as a lived experience, where both social participation and personal convictions play key roles in shaping religious identity.

Consistent with previous studies (e.g. Ćwirynkało, 2023; Liu et al., 2014; Timmins et al., 2024; Turner et al., 2004), faith was seen as essential, offering blessings, protection, and a sense of security. Many participants believed that faith strengthened them, both physically and emotionally, and could bring about miracles, as well as a sense of divine care and guidance.

Faith also fostered a sense of community, connecting participants to both God and others, particularly through religious groups and rituals. Similar to other studies (Huggins & Copeland, 2023; Żyta, 2023), it was observed that this community aspect of faith is especially meaningful, providing social support, companionship, and opportunities for personal development. This study, however, added to the current state of knowledge by

indicating that for several participants, faith motivated self-improvement, giving them strength, boosting self-worth, and encouraging empathy toward others. It also provided a space for enjoyable activities such as singing, praying, and attending church, which serves as a positive alternative to a more limited range of entertainment options. Importantly, faith was viewed as inclusive, with participants highlighting its power to erase the divide between individuals with and without disabilities. For some, faith was linked to a responsibility to convert others to the Catholic faith, while others saw it as a necessary part of life, offering meaning and direction for everyone.

The current study also explored the role of faith for people with disabilities, highlighting three key themes: shared suffering, strength and support, and faith as a source of healing. Some participants related their disabilities and suffering to the suffering of Jesus, seeing their challenges as a spiritual connection to God. Faith provided a sense of belonging to this 'community of suffering.' Faith was also viewed as a source of strength, especially in moments of weakness. For many, prayer and religious practices helped them endure physical challenges, boosting motivation during rehabilitation and providing emotional support. This aligns with previous research (e.g., Huggins & Copeland, 2023), which highlights the positive impact of faith community involvement on individuals with intellectual and developmental disabilities.

Lastly, some participants saw faith as a source of healing, expressing a belief in miracles and hope that disabilities could be reversed, either on earth or in the afterlife. While some believed faith was more significant for people with disabilities, others felt faith was equally important for everyone, regardless of ability. The analysis highlights the role of faith in offering hope, strength, and a sense of community. While it is difficult to determine if these benefits apply universally across all denominations, it is important to note that for Christians (the majority of participants in this study identified as such), the concepts of hope and "healing" through resurrection are central themes in disability theology (Sloane, 2023).

co-researchers with disabilities' perspective

People have different approaches to faith. Not everyone believes in God, but many do. Faith is very important for people with disabilities. They sometimes go to church, but it can be difficult, or they don't want to. Some use formal prayers, others don't. Some individuals talk to God in a personal way. It's hard to understand why some people feel compelled to profess their faith. We think it depends on their parents. And sometimes people they

meet in church. Anyone can try to convince others of their faith, but whether someone accepts those beliefs depends on the individual.

Limitations

The current study had several methodological, content, and organizational limitations. First, the sample was relatively homogeneous, consisting primarily of individuals with mild to moderate intellectual disabilities, with only a few cases diagnosed with severe intellectual disabilities and none with profound disabilities. Additionally, most participants were raised in the Catholic tradition, which likely shaped their perspectives when discussing faith. Including a more diverse group, such as individuals from other religious backgrounds or non-believers, could have enriched the findings with a wider range of insights on faith among people with intellectual disabilities. Furthermore, as noted by co-researchers with disabilities, some participants may have found the interview topic difficult due to its intimate and abstract nature, requiring careful handling to ensure their comfort and confidence during discussions. Lastly, there were organizational challenges, particularly in accessing participants in institutional settings.

Implications for Further Research and Practice

Based on the findings of this study, there are several implications regarding the role of faith in the lives of adults with intellectual disabilities. Further research could explore personalized faith experiences, delving deeper into understanding how personal interpretations of faith develop, what shapes these diverse perceptions of faith, and how they are influenced by cultural, familial, or institutional factors. Given that many participants saw faith as providing emotional strength, protection, and security, future studies could examine the psychological impact of faith in this population. Longitudinal research could investigate how religious belief and practice impact emotional well-being, coping strategies, and mental health outcomes for individuals with intellectual disabilities. Also, the finding that faith boosts motivation during rehabilitation offers a promising area of research. Future studies could investigate the role of faith-based interventions in rehabilitation programs and how religious beliefs affect compliance with treatment and physical health outcomes among individuals with intellectual disabilities. Similarly, since the idea that faith can bridge the divide between people with and without disabilities opens avenues for research on inclusive religious communities, future studies could examine how religious institu-

tions can better foster inclusion and a sense of belonging among adults with intellectual disabilities.

There are also some implications for practice. Given that faith offers emotional support, social connection, and a sense of belonging, caregivers and support workers might consider incorporating faith-based practices into support programs for adults with intellectual disabilities. Providing access to religious communities or individualized spiritual support could foster well-being and personal development. Religious organizations can play a key role in promoting inclusivity by ensuring that their spaces, rituals, and programs are accessible to individuals with intellectual disabilities. Developing adaptive worship practices, training clergy and congregants on disability inclusion, and facilitating social engagement within faith-based groups can enhance the participation of individuals with intellectual disabilities in religious life.

Recommendations on how to improve accessibility within the Church are already well-documented in the literature (Carter et al., 2023). Service providers could collaborate with religious institutions to create spaces where individuals with intellectual disabilities can engage in communal activities, such as church services, group prayers, or community events, that enhance their social networks and promote inclusion. Finally, given the belief in miracles and hope for physical healing expressed by some participants, practitioners may need to navigate delicate conversations around faith, disability, and expectations. They should be prepared to support individuals with intellectual disabilities in managing the emotional and psychological aspects of these beliefs while promoting realistic perspectives on health and healing.

Implications – co-researchers with disabilities’ perspective

Maybe it will be difficult to convince workers and parents that faith can help. However they should not limit the opportunities for people with disabilities to attend church. They should know that faith can motivate people with disabilities.

We think it would be important to teach students about the religiosity of people with disabilities. The goal is for them to understand that faith is important for people with disabilities, and to consider how to encourage them in their faith, even in moments of doubt, when people’s faith may waver. This is important because faith helps people overcome their weaknesses and gives them strength to continue functioning, even with limitations.

CONCLUSION

In summary, the study’s findings suggest that faith plays a critical and multifaceted role in the lives of adults with intellectual disabilities. Therefore, the study recommends that future research should explore the nuanced experiences of faith, its impact on mental and physical health, and how faith intersects with disability identity.

ACKNOWLEDGEMENT

The authors thank the adults with intellectual disabilities for their willingness to participate in the study.

DECLARATION OF INTEREST STATEMENT

The authors reported no potential conflict of interest.

FUNDING

This research was funded by the National Science Centre (Warsaw, PL) grant number: 2023/51/B/HS6/00295.

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