

Negotiating The Tension Between Healing and Inclusion of People with Mild Intellectual Disabilities

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Abbreviation

ID- Intellectual Disability

NPC-Nigerian Pentecostal Churches

PTHU-Protestantse Theologische Universiteit Utrecht

PID- People with Intellectual Disabilities

PWD- People with Disability

MID- Mild Intellectual Disability

RCCG- Redeemed Christian Church of God

DSM-5-Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition

NVivo-Qualitative Data Analysis Software

WCC-World Council of Churches

GDPR- General Data Protection Regulation

Abstract

People with intellectual disabilities are often marginalized within Nigerian Pentecostal churches due to cultural and theological misconceptions. This study explores the situation of inclusion or exclusion of people with intellectual disabilities within Nigerian Pentecostal churches in the Netherlands. It examines barriers such as societal stigma, theological perspectives, and institutional limitations that hinder inclusion and seeks to uncover the gaps that affect participation in church life.

The results of the qualitative enquiry, derived from semi-structured interviews with church leaders, church members, families, and people with intellectual disability, reveal that Nigerian Pentecostal churches in the Netherlands affirm the dignity of all believers. However, their practices, often shaped by healing-centered theology and cultural stigmas, frequently create barriers to full participation for people with intellectual disabilities.

The research emphasizes the need for a theological framework that recognizes the dignity and gifts of people with intellectual disability, advocating for a shift toward a more inclusive, biblically grounded approach that encourages belonging and full active participation.

Keywords: Intellectual disability, Nigeria Pentecostal Churches, healing, practice of inclusion, disability theology

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CHAPTER ONE- INTRODUCTION

1.1. Introduction

The inclusion of people with mild intellectual disabilities in religious communities remains a significant challenge, particularly within Nigerian Pentecostal churches in the Netherlands, where theological, cultural, and structural barriers often hinder meaningful engagement. In Pentecostal traditions, the concept of divine healing holds a central place in theological practice and conviction. For Nigerian Pentecostal churches, healing is often seen not only as a sign of God's power but also as a core marker of spiritual vitality.¹

However, this deeply rooted theology of healing presents a complex challenge when it comes to the inclusion of people with intellectual disabilities, particularly those with mild forms who may not display visible physical impairments but whose cognitive differences still carry stigma. The theological emphasis on healing can unintentionally reinforce exclusion, framing disability as something to be overcome rather than embraced, and positioning those with ID as spiritually incomplete or lacking faith.² As Nigerian Pentecostal churches in the Netherlands navigate a different socio-cultural and theological environment, some shifts in their approach to disability are emerging. Studies on African immigrant churches in Europe indicate that migration forces churches to engage with new cultural and theological paradigms, including human rights discourses and disability inclusion policies.³ Are the Nigerian Pentecostal churches adapting or resisting the theology of inclusion in their new context? Does the theology of healing change in this Western context?

While many churches affirm the dignity of all people as created in the image of God (Genesis 1:27), the lived reality for people with ID often reflects exclusion, misunderstanding, and limited participation in worship, discipleship, and church leadership.⁴ A key step toward addressing these challenges is fostering open conversations between church leaders, congregations, and people with ID about the attitudes and practices that shape inclusion.

¹ Asamoah-Gyadu, J. K. (2013). Sighs and signs of the Spirit: Ghanaian perspectives on Pentecostalism and renewal in Africa. Wipf and Stock.

 $^{^2}$ lbid

³Adedibu, B. A. (2013). Reverse mission or migrant sanctuaries? Migration, symbolic mapping, and missionary challenges of Britain's Black Majority Churches. Pneuma, 35(3), 405–423.

⁴ Eiesland, N. L. (1994). The disabled God: Toward a liberatory theology of disability. Abingdon Press.

Beyond theological barriers, cultural attitudes toward disability among Nigerian migrants further complicate the issue. Many traditional Nigerian beliefs associate disability with ancestral curses, witchcraft, or personal sin, leading to stigma and exclusion. These deeply ingrained views influence church teachings and community perceptions, making it difficult for people with ID to be fully accepted as equal members of the faith community. Without addressing these cultural biases, efforts to create a theology of belonging may face resistance from both church leadership and congregants.

By exploring the lived experiences of pastors, caregivers, and people with ID, this research seeks to uncover how healing and inclusion coexist, conflict, or complement each other in practice, and what steps can be taken to reconcile this tension through the lens of disability theology.

This research examines how Nigerian Pentecostal churches in the Netherlands engage with the theology of inclusion for people with intellectual disabilities, evaluating their convictions and practices in light of disability theology and broader intercultural influences. The convictions and practices of these churches are the focus of this study. By analyzing how these churches are adapting to their Western context, this study contributes to the ongoing discourse on migration, theology, and inclusion within global Pentecostalism.

1.2. Focus and Scope of Research

This study focuses specifically on the convictions and practices within Nigerian Pentecostal churches in the Netherlands toward the inclusion of people with mild intellectual disabilities. While general research exists on disability theology and Pentecostal healing, this research narrows it to the intersection; how Nigerian Pentecostal churches in a European diasporic context negotiate the tension between traditional healing theology and inclusive ecclesiology.

The research concentrates on mild intellectual disabilities, characterized by challenges in reasoning, learning, and adaptive behavior, but often with the capacity for social participation. People with mild ID are particularly vulnerable to exclusion within faith communities, their disabilities are not always visible, and they often lack appropriate support systems within churches to help them participate fully in worship, discipleship, and leadership.

1.2.1. The scope of the study includes

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⁵ Omenyo, C. N. & Wilhelmina Arthur. (2013). *The Pentecostal Concept of Healing and Its Impact on African Christianity*. Exchange, vol. 42, no. 1, pp. 1-22

Geographical Focus: Nigerian Pentecostal churches located in the Netherlands. These include branches of major churches such as the Redeemed Christian Church of God (RCCG), Winners Chapel International, and Mountain of Fire Miracles Ministry.

Theological Framework: The study draws on disability theology to assess the theological and spiritual narratives that either resist or adapt toward inclusive faith communities.

Cultural Context: Nigerian Pentecostalism is analyzed within both its African theological heritage and its diasporic transformation in the Netherlands, where it encounters Western values of human rights and inclusion

Ecclesial Practices: Emphasis is placed on liturgy, leadership, preaching, community interactions, and pastoral care structures as they relate to people with intellectual disability.

Methodological Boundaries: The study is qualitative, using semi-structured interviews, focus groups, observations, and document analysis (e.g., sermons, church programs, policies).

The research does not aim to generalize findings to all Nigerian churches or all disability categories but rather offers a focused case study to understand how theology and culture intersect in shaping inclusion practices for people with mild intellectual disabilities in Pentecostal diaspora settings.

1.3. Current State of Knowledge on this Research

This research argument is about the tension between healing and inclusion. Scholars debate the extent to which healing-centered theology aligns with inclusivity. While miraculous healing is central to Pentecostalism, critics argue that this focus risks alienating those who do not experience healing and perpetuating exclusionary attitudes.

The ongoing struggle between cultural stigmas and Western influences, according to Etieyibo and Omiegbe, highlights how traditional African beliefs about disability, such as associations with ancestral curses or divine judgment, shape exclusionary practices.⁶ Pentecostal traditions associate disability with spiritual oppression or demonic influence, leading to healing and deliverance sessions aimed at casting out perceived afflictions. However, exposure to Western disability rights movements introduces conflicting narratives that challenge these cultural stigmas, creating an ongoing dialogue within diaspora churches.

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⁶ Etieyibo, E. & Omiegbe O. Religion, Culture, and Discrimination Against Persons with Disabilities in Nigeria. *African Journal of Disability*, vol. 5, no. 1, 2016, p. 192

1.3.1. Gaps in existing knowledge

The literature reveals several gaps in understanding how Nigerian Pentecostal churches in the Netherlands navigate cultural transitions while preserving their African Pentecostal identity. Research on cultural adaptation is limited, particularly regarding how these churches reconcile traditional African theological perspectives with Western disability inclusion frameworks. Also, while theological and cultural frameworks have been studied, there is a lack of qualitative data capturing the personal experiences of people with intellectual disabilities within these church communities. Many studies focus on doctrinal positions and leadership perspectives rather than the lived realities of people with disabilities. Although African disability theology has been explored in various contexts, its application within European diaspora churches remains under-researched. Understanding how these congregations adapt and respond to disability inclusion within a Western socio-religious environment is crucial for developing more inclusive faith communities.

Conclusion

This review synthesises contributions from disability theology, Pentecostal traditions, and cultural studies, identifying gaps that this research aims to address. By examining personal narratives, church practices, and the impact of Western inclusion discourses, the study aims to enhance our understanding of inclusivity within Nigerian Pentecostal churches in the Netherlands.

1.4. Research Problem

This research addresses the inclusion of people with intellectual disabilities within Nigerian Pentecostal church communities, where theological conceptions and cultural stigmas might hinder their full participation. Despite Christian teachings affirming that all people are made in the image of God (Genesis 1:27), many churches continue to view people with ID as objects of care and prayer rather than active members of the faith community. The dominance of healing-centered theology further marginalizes them, as those who do not experience miraculous healing may be seen as lacking faith. Additionally, cultural beliefs associate disability with ancestral curses, sin, or demonic oppression, reinforcing exclusion. This research seeks to examine the convictions and practices within Nigerian Pentecostal churches in the Netherlands regarding the inclusion of people with intellectual disabilities. It examines the current situation of African churches in a Western context in light of Disability.

⁷ Sande, N., & Ringson, J. (2021). Do persons with disability need healing? An African Pentecostal perspective within the selected African Pentecostal churches in Zimbabwe. Journal of Pentecostal

⁸ Etieyibo & Omiegbe, Religion, Culture, 2016

1.5. Research Question

This research will be guided by one primary question, but three secondary research questions with Osmer's four-task model of Practical Theology.⁹

The research question: How do the convictions and practices within Nigerian Pentecostal churches in the Netherlands toward people with intellectual disabilities align with or challenge the principles of disability theology and inclusive faith communities?

1.6. Research Sub-questions:

- What are the current convictions and practices within Nigerian Pentecostal churches in the Netherlands towards people with intellectual disability
- What cultural, theological, or social influences contribute to these convictions and practices within Nigerian Pentecostal churches in the Netherlands?
- What are the convictions and practices of inclusive faith communities taken from disability theology perspective?

Research Objectives

This study aims to investigate how Nigerian Pentecostal churches in the Netherlands engage with the inclusion of people with mild intellectual disabilities, particularly in light of disability theology and the vision of inclusive faith communities. The research seeks to understand both the convictions and practical realities that shape this engagement.

To achieve this aim, the study sets out the following objectives:

- To describe the current convictions and practices within Nigerian Pentecostal churches in the Netherlands towards people with intellectual disability in church practices
- To investigate the cultural, theological, and social factors that influence these convictions and practices within Nigerian Pentecostal churches in the Netherlands towards people with intellectual disability
- To explore the theological framework of disability theology and its application to inclusive faith communities.

⁹ Osmer, R. R. (2008). Practical theology: an introduction. Grand Rapids: Eerdmans

1.7. Justification and Contribution of Research

This study contributes new insights into how Nigerian Pentecostal churches in the Netherlands approach the inclusion of people with intellectual disabilities. While disability theology and African cultural perspectives on disability are established fields, limited research exists on how these frameworks are applied in diaspora contexts, particularly in Europe. By focusing on the lived experiences of people with intellectual disability, their families, church leaders, advocates, and congregation members, this research highlights personal narratives that are often overlooked in existing studies. It advances the understanding of how disability theology intersects with Pentecostal traditions in an African diaspora setting.

The research is worth undertaking because it addresses critical gaps in knowledge about the intersection of theology, cultural beliefs, and inclusivity practices within diaspora churches. it analyses how healing theology and biblical interpretation, cultural stigma shape exclusion. By exploring how Nigerian Pentecostal churches navigate the tension between traditional beliefs and Western disability rights discourses, the study contributes to developing strategies that can foster inclusive faith communities globally. It emphasizes the dignity, agency, and belonging of people with intellectual disability, advancing both theological understanding and practical inclusion.

The novelty of this research lies in its focus on Nigerian churches in the Netherlands, a topic with limited scholarly attention. It introduces disability theology into the African diasporic experience in Europe while amplifying the voices of intellectually disabled people.

Assessment of Strengths and Weaknesses in Previous Research

Strengths	Weaknesses
Rich theological reflections that advocate inclusion and	Most works are grounded in
affirm human dignity (Yong, Eiesland).	Western theological traditions and
	lack African Pentecostal contextual
	application.
Some African authors (e.g., Kabue, Etieyibo) begin	There is minimal empirical research
contextualizing theology of disability in African	involving people with ID within
sociocultural frameworks.	Nigerian Pentecostal churches,
	especially in diasporic settings like
	Europe.

Theoretical works on pastoral care and inclusion offer	Limited investigation into how actual
practical frameworks (Shurley).	church practices align or conflict
	with stated theology in African
	Pentecostal communities.
Included and Valued (Hathaway & Kishekwa) excels in	It is limited by a lack of focus on
contextualizing disability inclusion within African faith	intellectual disability specifically and
ommunities, offering practical strategies and broader Pentecostal perspective	
theological depth rooted in local realities. Its strength lies	
in blending theology with case studies.	

Conclusions Based on the Assessment of Previous Research

The assessment of previous research highlights both theological richness and practical gaps in the study of disability inclusion within Nigerian Pentecostal churches. While Western theological works (e.g., Yong, Eiesland)¹⁰ provide compelling arguments for inclusion, they often lack contextual relevance to African Pentecostal traditions. African scholars such as Kabue¹¹ and Etieyibo¹² have begun integrating disability theology into African sociocultural frameworks, but there remains limited empirical research specifically on intellectual disabilities within Nigerian Pentecostal churches, particularly in European diaspora settings.

Additionally, while pastoral care and inclusion models exist in theoretical discourse, there is little analysis on whether Nigerian Pentecostal churches implement these frameworks. Cultural perspectives such as beliefs surrounding witchcraft and ancestral curses are acknowledged in existing literature, but first-person narratives from people with intellectual disabilities and their families are largely absent. Even practical theological works (e.g., Included and Valued by Hathaway & Kishekwa)¹³ provide valuable insights, but they do not fully address intellectual disabilities within Pentecostal healing-centered contexts.

Eiesland, N. L. (1994). The Disabled God: Toward a Liberatory Theology of Disability. Nashville, TN: Abingdon Press. pp. 69-119

¹⁰ Yong, A. (2007). Theology and Down Syndrome: Reimagining Disability in Late Modernity. Baylor University Press, 2007.

¹¹ Kabue, S., Amanze, J., & Landman, C. (2016). Disability in Africa: Resource book for theology and religious studies. Acton Publishers.

¹² Etieyibo, E. & Omiegbe, O. (2016). Religion, culture, and discrimination against persons with disabilities in Nigeria. African Journal of Disability, 5(1), Article 192.

¹³ Hathaway, B. & Kishekwa, F. (2019). Included and valued: A practical theology of disability. Acton Publishers

How These Findings Influence My Project

These gaps shape the direction of my research, leading to three key responses:

Contextualizing Disability Theology Within African Pentecostalism

Instead of relying solely on Western disability theology, my research integrates African Pentecostal theological perspectives on healing, spiritual warfare, and community engagement to assess inclusion strategies within diaspora churches.

• Filling the Empirical Research Gap

Since few studies have examined real-life church practices, my research incorporates interviews, focus groups, and direct observations to evaluate how Nigerian Pentecostal churches in Europe implement or resist inclusion efforts.

Prioritizing Lived Experiences

To address the lack of first-person narratives, my research collects testimonies from people with intellectual disabilities and their families, ensuring their voices shape theological discourse and practical recommendations.

By addressing these weaknesses, my study moves beyond theoretical discussions, offering empirical evidence and culturally relevant theological insights to encourage practical change within Nigerian Pentecostal churches.

1.8. Key Terms and Concepts

Intellectual Disability

Defined by the American Psychiatric Association (DSM-5), intellectual disability is a neurodevelopmental condition marked by significant limitations in intellectual functioning (e.g., reasoning, problem-solving) and adaptive behaviour. This study focuses on mild ID, where individuals can often engage in community life but may face social and cognitive challenges.

Disability Theology

Disability theology reclaims the place of people with disabilities in the church, arguing that all people, regardless of ability, reflect the imago Dei (Genesis 1:27). The work of scholars like Amos Yong and Nancy Eiesland emphasize the spiritual giftedness, agency, and belonging of disabled people as essential members of the body of Christ.

Theology of Healing

A central theme in Pentecostalism, healing theology emphasizes divine intervention through prayer, faith, and the Holy Spirit.¹⁴ While empowering, this framework can unintentionally marginalize people with disabilities by framing healing as the only path to spiritual wholeness.

Theology of Belonging

In contrast to healing-centred models, a theology of belonging affirms that all people are already whole and loved by God. It prioritizes inclusion, mutual participation, and relational presence in church life, not merely the hope for a miracle.¹⁵

Inclusive Faith Communities

These are congregations that go beyond physical access to foster full spiritual and social inclusion in worship, leadership, decision-making, and relational belonging. ¹⁶ Such communities challenge ableist theology and adopt practices that affirm diversity in ability.

Disability in the Netherlands: Context and Characteristics

In the Netherlands, disability is increasingly understood through a social model, emphasizing inclusion and participation. While laws support accessibility and equality, people with intellectual disabilities still face exclusion in education, work, and church life. Despite progress, cultural attitudes and practical integration remain ongoing challenges, especially within religious communities.¹⁷

1.9. Overview of Thesis Structure

Chapter 2 – Literature Review

This chapter examines existing theoretical and cultural perspectives, with a particular focus on intellectual disability within religious contexts. It provides a critical review of significant works in disability theology, African Pentecostal doctrine, sermons, and sociocultural approaches to inclusion. The aim is to establish a clear rationale for the empirical and theological focus of this study.

Chapter 3 – Methodology

This chapter outlines the qualitative research design of the study. It explains the choice of Osmer's four-task model of practical theology and details the data collection methods, including

¹⁴ Asamoah-Gyadu, Sighs and signs of the Spirit, 2013.

¹⁵ Reynolds, Vulnerable Communion, 2008.

¹⁶ Eiesland, The disabled God, 1994.

¹⁷ College voor de Rechten van de Mens. (2018). Implementation of the UN Convention on the Rights of Persons with Disabilities in the Netherlands: Initial report. https://www.mensenrechten.nl

interviews, focus groups, and church observations. The chapter also discusses ethical considerations, the study population, and the rationale for using a qualitative empirical approach.

Chapter 4 – Empirical Findings and Analysis (Results)

This chapter presents the empirical data gathered from the focus groups, interviews, and observations. It describes the convictions and practices within Nigerian Pentecostal churches in the Netherlands regarding people with mild intellectual disabilities. The chapter is structured around Osmer's descriptive tasks, identifying patterns and underlying theological and cultural convictions.

Chapter 5 – Theological Reflection (Discussion)

The final chapter discusses the main findings, theological insights, and practical contributions of the research. It revisits the research questions, assesses the implications for Nigerian Pentecostal churches, and offers recommendations for future research, ministry training, and church policy development.

CHAPTER TWO-THEORETICAL FRAMEWORK

2.1. Introduction

This chapter analyses existing theological, cultural, and empirical research on disability, focusing on intellectual disability in religious contexts. It critically reviews key works in disability theology, African Pentecostal doctrine, sermons and sociocultural approaches to inclusion, to establish a clear rationale for the empirical and theological focus. The review is organized into four thematic areas: theological foundations, Pentecostal perspectives on healing, cultural-religious attitudes in Nigeria, and practical church responses. It answered the theoretical aspect of the sub-questions of this research.

This research focuses on mild intellectual disability because people within this group often face unique challenges that are both overlooked and misunderstood, particularly in faith-based and cultural contexts. People with mild intellectual disabilities may appear capable in many social situations, yet they often struggle with abstract reasoning, adaptive behavior, and social communication. This "invisible" nature of their disability can lead to unrealistic expectations, misjudgment, or spiritual neglect within church settings.

In Nigerian Pentecostal communities, where spiritual competence is often measured by verbal fluency, moral behavior, or participation in healing and deliverance activities, those with MID may be marginalized or even labelled as spiritually deficient. This focus enables churches to better understand the nuanced needs of this group and to foster more supportive, inclusive, and spiritually affirming communities for all members.

2.2. What are the current convictions and practices within Nigerian Pentecostal churches in the Netherlands towards people with mild intellectual disability?

Many scholars have studied Pentecostal beliefs and practices regarding disabilities, focusing on how they interpret and respond to human suffering within their context. The ongoing research on Pentecostalism and disability in Africa is delving deeper:

2.2.1. The current conviction of Pentecostals toward people with mild intellectual disabilities.

Pentecostal theology interprets human suffering, including sickness and disability, as an arena in which divine power must be manifested. Within Nigerian Pentecostal traditions, miraculous healing and deliverance constitute foundational pillars, shaping theological perspectives on affliction and restoration. These practices reflect a worldview that integrates supernatural intervention, spiritual warfare, and the transformative power of the Holy Spirit.

Nigerian Pentecostal churches often regard physical, emotional, and spiritual ailments as rooted in demonic affliction or generational curses. Consequently, healing and deliverance are enacted through fervent prayer, fasting, and the exercise of spiritual authority. Central to this belief is the conviction that healing is a provision of Christ's atonement, accessible to believers through faith. Enenche references Luke 10:19 and Isaiah 53:5 to affirm that divine healing is both a spiritual and covenantal right. Healing services frequently involve testimonies, altar calls, anointing, and prophetic declarations, reinforcing a theology of supernatural intervention. Enenche also promotes "mantle" theology, wherein consecrated garments are believed to carry healing power and divine presence. As he asserts, "Jesus did not only come to save but also to heal and deliver." ¹⁸

Pentecostal convictions are deeply intertwined with spiritual warfare theology, which posits that human suffering, including illness, stagnation, and mental disorders such as intellectual disability often originates from satanic attacks, witchcraft, or generational iniquities. Deliverance theology is grounded in scriptures such as 2 Corinthians 10:4-5 and Ephesians 6:12, emphasizes believers' authority to break yokes and uproot spiritual afflictions. Accordingly, Nigerian Pentecostal churches conduct mass deliverance sessions and teach members to engage in aggressive prayer against perceived spiritual adversaries. The categorization of intellectual disabilities within this framework has historically led to perceptions that such conditions must be eradicated through spiritual warfare rather than embraced within faith communities.¹⁹

Dr. Olukoya underscores this perspective by saying, "Deliverance is not a gentle laying on of hands but a battle against the powers of darkness... A person may suffer from mental, physical, and emotional bondage without realizing the spiritual root." Such theological interpretations have influenced how Nigerian Pentecostal churches approach disability, often emphasizing healing over inclusion.

However, Adenekan-Koevoets suggests that beliefs are subject to change through exposure to new knowledge and perspectives. She argues that faith practices, both in worship and daily living, evolve when people encounter alternative theological frameworks.²¹ If this assertion holds,

¹⁸ Enenche, Paul. "The Word and Faith for Health and Healing." Dunamis TV, uploaded by Dunamis International Gospel Centre, 3 Apr. 2021, www.youtube.com/watch?v=3zSg9JYI

¹⁹ Olukoya, Daniel Kolawole. 70 Seventy Days Prayer and Fasting Programme 2021 Edition: Prayer Battle 2. Mountain of Fire and Miracles Ministries, 5 Aug. 2021

²⁰ Olukoya, Daniel Kolawole. 101 Weapons of Spiritual Warfare. The Battle Cry Christian Ministries, 12 Nov. 2013

²¹ Adenekan-Koevoets, B. (2021). Nigerian Pentecostal Diasporic Missions and Intergenerational Conflicts: Case Studies from Amsterdam and London." Mission Studies, vol. 38, no. 3, pp. 424-447. https://doi.org/10.1163/15733831-12341812.

Nigerian Pentecostal churches in the Netherlands may undergo shifts in their perspectives on intellectual disability within their diaspora context. The following section explores the practice of healing within Pentecostal traditions.

2.2.2. Practice of healing within Pentecostal churches

In Nigerian Pentecostal churches, there is a deep theological emphasis on divine healing as a core expression of faith. Drawing on biblical narratives of Jesus healing the sick (Mark 2:1-12), healing is often interpreted as a demonstration of God's power and grace. However, this healing-centric theology can create tension with the call for inclusion for people with disabilities. When healing does not occur, individuals are often left feeling excluded, stigmatized, or blamed for their condition. According to Jacobs and Richardson, many Christians genuinely believe that healing ministries are motivated by love and reflect the compassion Jesus showed toward those He healed.²² Healing is seen not merely as a physical restoration, but as an expression of divine mercy. However, this compassionate narrative becomes deeply problematic when healing does not occur. The experience of Mama Francesca, a woman who wheels her daughter with cerebral palsy to church for prayer, painfully illustrates this tension. When no healing took place, instead of receiving continued support, she was met with judgment. Church members accused her of harboring sin, insinuating that her daughter's condition was a consequence of her spiritual failings. She returned home feeling rejected and burdened with guilt. "I know I sin," she confessed to herself, "but I always ask God for forgiveness."

This response reflects a damaging theological assumption often embedded within Pentecostal healing ministries, that unhealed sickness is a result of hidden sin or insufficient faith. Such beliefs can inflict deep spiritual and emotional wounds, particularly on caregivers who are already grappling with the challenges of disability. Instead of fostering hope and inclusion, healing-centered ministries can, when narrowly applied, lead to shame, spiritual isolation, and stigmatization of both the people with intellectual disability and their families. As Shane Clifton writes that the disabled people he interviewed about healing 'describe feelings of disappointment, frustration, confusion, anger, and guilt' in response to healing ministries, which should be motivated by compassion and love.²⁴

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²² Jacobs, N. L. and Richardson, E. (2022). At the Gates: Disability, Justice and the Churches. Darton, Longman & Todd, p. 161

²³ Hathaway, B. and Kishekwa, F. (2019). Included and Valued: A Practical Theology of Disability. Acton Publishers.

²⁴ Clifton, S. (2014) "The Dark Side of Prayer for Healing: Toward a Theology of Well-Being." Pneuma, vol. 36, no. 2, 2014, pp. 204–225. doi:10.1163/15700747-03602003 p. 224

The story of Mama Francesca echoes countless others in which the failure of miraculous healing becomes a source of theological confusion, social exclusion, and personal despair. In Shane Clifton's observation, those who remain unhealed often become "the elephant in the room", their presence a silent contradiction to a theology that prioritizes miraculous intervention.²⁵ The unspoken assumption is that persistent disability signals spiritual deficiency, weak faith, or unconfessed sin. This can lead to alienation, guilt, and exclusion, both for people with disabilities and their families.

Rather than fostering community, this model risks turning the church into a performance space, where healing becomes a "party trick" and disability is seen as failure. Clifton proposes a shift toward a theology of well-being, one that embraces human fragility and values inclusion over cure. Inclusion means recognizing the dignity and spiritual contributions of disabled people, not as objects of ministry, but as full members of the Body of Christ. This reframing allows churches to move from healing as spectacle to healing as shared life, where flourishing is possible even without a cure.

The downside of this theological framework is that disability is often perceived not as a natural expression of human diversity, but as a spiritual condition to be overcome, or even as a punishment from God. In many Nigerian Pentecostal churches, messages surrounding disability have consistently carried negative connotations, reinforcing stigma and shame. Another mother, reflecting on her experience, shared how deeply these narratives affected her response to her son's diagnosis. "I grew up in a church where all the messages and views on disability revolved around it being a curse or punishment. Disabled children were perceived as a form of divine retribution," she recalled, after her son was diagnosed with Down syndrome.

She went on to describe the emotional toll this theology took on her:

"I shut myself in and cried endlessly, hoping for a miracle or divine intervention from God, I was lost, completely lost, burdened with guilt over Tolu's condition and blaming myself for the circumstances surrounding his early days, I suspected he had jaundice after the diagnosis but I rejected him, I don't want to touch him, I was angry with God wondered why He is punishing me. At that moment, I saw my son not as a gift, but as a punishment from God. By the fifth day, when I finally sought medical help, it was already too late. In the hospital, he was presumed dead. Eventually, the doctor resuscitated him but hinted of possible brain damage."²⁷

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²⁵ Ibid

²⁶ Clifton, the Dark, p. 225.

²⁷ Okorie, K. (2024, February 2). Mothers struggle to raise children with special needs in Nigeria. Public Health. https://www.publichealth.com.ng/mothers-struggle-to-raise-children-with-special-needs-in-nigeria

Such testimonies reveal the deep psychological and spiritual burden placed on families of children with intellectual disabilities within religious frameworks that prioritize healing over acceptance. The emphasis on deliverance and miraculous intervention, while offering hope, can simultaneously lead to guilt, self-blame, and emotional isolation when healing does not occur. The lack of theological teaching that embraces disability as part of the image of God fosters rejection rather than inclusion, often placing families in a spiritual and emotional crisis. This healing-centered narrative, when unbalanced by compassion and inclusion, risks not only endangering the lives of people with intellectual disabilities through delayed medical care, but also promoting depression, stigma, and abandonment among their caregivers.

This has significant implications for how people with disabilities are treated in the church. Instead of being seen as full members of the Body of Christ with gifts and callings (1 Corinthians 12), they are often viewed as subjects of healing ministry or objects of pity. These patterns reflect systemic barriers that hinder full inclusion and belonging in many faith communities. In Nigerian culture, people with intellectual disabilities are often perceived as a source of shame and punishment, something to be hidden away. This stigma can lead families to hide their relatives with intellectual disabilities at home, driven by feelings of embarrassment and societal pressure.²⁸

This approach can foster exclusion, even if unintentional. When healing is emphasized as the only form of spiritual engagement for people with intellectual disabilities, their continued disability may be interpreted as a lack of faith, hidden sin, or spiritual failure. As Eiesland argues in *The Disabled God*, churches must move from a theology of cure to a theology of inclusion, wherein people with disabilities are not waiting to be fixed but are embraced as whole beings created in God's image.²⁹

In the book "At the Gates: Disability, Justice and the churches," the authors reflect on the stories of healing practices in the churches that marginalized or ignored the needs of people with disabilities. When church people imagine that the people with disabilities need a cure or healing more than the toilet, they center their own priorities, rather than asking PWD what they need.³⁰ The authors recount the tragic story of Sig, who stopped taking his epilepsy medication after his church assured him that faith alone could heal him. Unfortunately, Sig died from a seizure that his medication could have prevented.³¹

²⁸ Eskay, Michael, Victor C. Onu, Joseph N. Igbo, N. Obiyo, and L. Ugwuanyi. (2012). Disability Within the African Culture. U.S.-China Education Review, vol. B4, 2012, pp. 473 –484. p478

²⁹ Eiesland, The Disabled God, p.70

³⁰ Ibid

³¹ Jacobs & Richardson, At the Gates, 15

Pentecostals still beliefs in the ancient idea that disability is a punishment or consequence of sin (Mark 2:5b), or spirit of inheritance (genetics) that needs to be checked back to hell, the constants pressure to build up their faith and seek a cure left many people with endless deferred hope and self-blame and pity. There is no guidance on living with disability here or now. Like the story of Tolu's mother abandoning her son, which worsens his disability. The belief that all problems lie within the disabled person is rooted in assumptions of faithlessness; this places a harmful burden on individuals who are already marginalized. When disability is interpreted as a punishment or a sign of spiritual attack, it does not strengthen faith but damages it. People with intellectual disabilities may begin to see themselves as unworthy of healing, internalizing the idea that their condition persists because they lack sufficient faith. Rather than experiencing the love and grace of God, they are left feeling excluded, blamed, and spiritually deficient.³²

2.2.3. Spiritual Guilt and the Burden of Unanswered Healing

Pentecostal theology often highlights miraculous healing as a sign of faith. This emphasis can create profound spiritual guilt when healing does not occur. Families of people with disabilities may experience self-blame, feeling that their own lack of faith or hidden sins are preventing their loved ones from healing. Such theological expectations can result in chronic emotional distress as individuals grapple with feelings of spiritual inadequacy.³³ Many parents internalize narratives suggesting that disability equates to spiritual weakness, leading them to believe they have failed to "pray hard enough" for healing.³⁴

Additionally, there is significant pressure for families to seek continuous prayer. Many attends multiple healing services in the hope of experiencing a breakthrough that never arrives, which can lead to emotional exhaustion and a sense of deferred hope.³⁵ When healing does not manifest, individuals may begin to question their faith, resulting in religious alienation and a spiritual crisis.³⁶

2.2.4. Comparison of African Pentecostal Churches in Europe: Lessons for Inclusion

African Pentecostal churches in Europe have differing approaches to disability inclusion. South African Pentecostal churches in Europe integrate social justice frameworks, creating community support systems and collaborating with European disability advocacy groups. They focus on

³² Jacobs & Richardson, At the Gates, 159

 $^{^{\}mbox{\tiny 33}}$ Clifton, The darkside, pp. 204-225

³⁴ Miles, M., and S. Miles. Disability in Global Pentecostalism: The Challenge of Healing and Inclusion. Routledge, 2018

³⁵ Hathaway & Kishekwa, Included, p.78

³⁶ Black, Kathy. A Healing Homiletic: Preaching and Disability. Abingdon Press, 1996. p.51

practical assistance and include people with disabilities in worship and leadership roles, rather than just faith healing. Conversely, Nigerian churches prioritize strict adherence to healing theology, limiting leadership opportunities for people with disabilities. A shift towards a theology of belonging, alongside the establishment of formal disability ministries and revised practices, could foster greater inclusion. By adopting South African models, Nigerian churches could better embrace disability inclusion as a theological imperative.³⁷

Conclusion

The Pentecostal conviction toward people with intellectual disabilities, especially within Nigerian contexts, is deeply shaped by theological emphases on spiritual warfare, divine healing, and deliverance. These beliefs, while grounded in a desire for wholeness and restoration, often lead to the marginalization of those who do not experience miraculous healing. Intellectual disabilities are frequently interpreted as consequences of sin, curses, or demonic oppression, resulting in harmful spiritual narratives that place undue burden on individuals and their families. The result is often a cycle of stigma, exclusion, and spiritual guilt, as caregivers and people with disabilities internalize the failure to be healed as personal or spiritual inadequacy.

Testimonies such as those of Mama Francesca and Tolu's mother reveal the emotional and theological toll exacted by a healing-centric approach. Rather than promoting compassion, these practices can isolate families and distort the image of God in people with disabilities. Theologies that centre on cure rather than inclusion often fail to address the lived realities of disability, offering little guidance or support for flourishing in the here and now. As observed by scholars like Clifton and Eiesland, what is needed is a theological reorientation, from healing as spectacle to healing as community, from deliverance as battle to inclusion as belonging.

In contrast, African Pentecostal churches in Europe, particularly those from South Africa, offer hopeful models of change. By integrating social justice frameworks and advocating for disability inclusion in leadership and worship, they demonstrate how theology can evolve in response to new cultural contexts and knowledge. These churches show that it is possible to retain a Pentecostal identity while embracing people with disabilities as full and valued members of the Body of Christ.

For Nigerian Pentecostal churches, particularly those in the diaspora, there is an urgent need to move toward a theology of belonging, one that recognizes the image of God in all people,

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³⁷ Van Dijk, R. "Having Faith in the Impossible: How African-Initiated Pentecostalism Shape Dutch Cities." Cultural Encounters, 2021. Available at: [https://www.culturalencounters.nl/algemeen/having-faith-in-the-impossible-how-african-initiated-pentecostalism-shapes-dutchcities

including those with intellectual disabilities. This shift requires intentional theological education, reimagining healing as part of broader well-being, and creating space for the voices and leadership of people with disabilities. Only then can the church truly reflect the inclusive love of Christ, not by fixing people, but by welcoming them fully into the life of the community.

2.3. What cultural, theological, or social influences contribute to these convictions and practices within Nigerian Pentecostal churches in the Netherlands?

The second sub-question of the research is, "What cultural, theological, or social influences contribute to these convictions and practices within Nigerian Pentecostal churches in the Netherlands?" It emphasises how Pentecostal healing theology, Nigerian cultural beliefs, and biblical interpretations contribute to the exclusion of people with intellectual disabilities. It examines how Pentecostal teachings often frame intellectual disabilities as needing divine intervention rather than as a part of human diversity. The study aims to understand why some churches resist inclusive practices despite being exposed to disability-inclusive theology, taking into account factors such as doctrinal beliefs, leadership views, and congregational attitudes.

2.3.1. Cultural Influences: Stigma and Traditional Nigerian Beliefs

How do cultural beliefs influence perspectives on disability? 'Belief' is a fundamental aspect of culture. Belief can be defined as the acceptance or affirmation of a proposition, idea, or opinion as true or real. As Schwitzgebel explains, belief refers to "the attitude we have, roughly, whenever we take something to be the case or regard it as true." In this sense, beliefs shape how individuals and communities interpret reality, guiding their practices, values, and responses to the world around them. These convictions are deeply rooted in the cultural framework of Nigerian society, where disability is often understood through spiritual and metaphysical interpretations rather than as a developmental condition. Intellectual disabilities are frequently linked to ancestral punishment, witchcraft, or curses, reflecting entrenched traditional cosmologies. Oduyoye stated that illness in African contexts is often attributed to the influence of witches or malevolent spiritual forces.

These cultural assumptions often spill into religious life, shaping how churches interpret and respond to disability. Within Pentecostalism, intellectual disability is frequently linked to demonic

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³⁸ Etieyibo & Omiegbe, Religion, p. 192

³⁹ Oduyoye, Mercy Amba. African Women's Theologies, Spirituality, and Healing: Theological Perspectives from the Circle of Concerned African Women Theologians. Paulist Press, 2019. p.115

possession or generational sin, mirroring the spiritual warfare worldview common in the tradition.⁴⁰ This theological orientation prioritizes healing and deliverance, often reducing people with intellectual disabilities to subjects of prayer and miracles, rather than recognizing them as full and valuable members of the body of Christ.

The integration of these cultural beliefs into church practice has resulted in both harmful and redemptive outcomes. On one hand, exclusion from leadership, blame directed at families, and spiritual guilt are common when healing does not occur.⁴¹ On the other hand, exposure to inclusive models in countries like the Netherlands is gradually challenging these perspectives, offering opportunities for theological renewal.⁴²

The persistence of cultural stigma within the church reflects a lack of theological resistance. Many churches do not challenge societal misconceptions but instead reinforce them, pointing to an urgent need for disability theology that affirms dignity, embraces inclusion, and reshapes discipleship for a more just ecclesial community.

2.3.2. Societal Attitude: Punishment or Sin

Disability in African societies is deeply influenced by traditional, cultural, theological, and socio-economic factors, all of which shape societal attitudes and treatment of people with disabilities. In many parts of Africa, disability is often not viewed through a medical or social lens but is interpreted through spiritual and supernatural frameworks, significantly affecting how people with intellectual disabilities are perceived and included in society.

Historically, African communities have tended to associate disability, particularly intellectual and developmental disabilities, with misfortune, ancestral punishment, curses, witchcraft, or divine retribution.⁴³ In Brain's testimony.

I have encountered the idea that my Cerebral Palsy is punishment from God for some sin in my life. I have had some people pray for my healing. Most of the time, it was forced upon me. I was told that first, I needed to confess the sin(s) for which I was being punished. People have prayed for me to be healed, and nothing has changed in me physically. I was once told that God wouldn't heal me because I had a selfish need to be

43 Ibid

⁴⁰ Kabue, S., Amanze, J., & Landman, C. Disability in Africa: Resource Book for Theology and Religious Studies. Acton Publishers, 2016

⁴¹ Miles & Miles, Disability, p.4

⁴² Burgess, Richard. "Pentecostals and Immigration in Europe." Pentecostal Public Theology, edited by Simo Frestadius and Mark J. Cartledge, Palgrave Macmillan, 2024, pp.279-306

pitied. Unfortunately, some in the church today continue to teach the idea that disabilities are a punishment for sin through the way they talk about healing passages.⁴⁴

These beliefs are widespread and persist even in urban and educated settings. As a result, people with intellectual disabilities are frequently stigmatized, hidden, or excluded from communal life. In many cultures, children born with disabilities may be seen as "bad omens" or as evidence of parental sin or spiritual failure.⁴⁵ This has led to discriminatory practices such as social isolation, infanticide in extreme cases, denial of education, and exclusion from religious and public life. Language and naming practices reflect and reinforce stigma. "*kunu*" (retarded in Hausa) are still commonly used, especially for people with intellectual or developmental disabilities. These labels not only reflect the depth of societal stigma but also serve to dehumanize and exclude people from equal participation.⁴⁶

One participant for this research relocated to the Netherlands after her son was diagnosed with an intellectual impairment, driven by her understanding of Nigerian societal beliefs and attitudes toward disability. This mother wishes to shield her son from a dehumanizing environment.⁴⁷

2.3.3. Theological Reflections on Disability

Theological reflection on disability seeks to understand how faith traditions, particularly Christianity, interpret the presence of disability in human life and how such interpretations shape community responses. Eiesland identified three theological themes that have posed obstacles for people with disabilities. The first conflates disability with sin, while the second regards disability as virtuous suffering. The third theme perceives people with disabilities as cases of charity.⁴⁸ Historically, disability has been misinterpreted within Christian communities as evidence of moral or spiritual failure.⁴⁹

These perspectives are not only culturally ingrained but also theologically reinforced through selective interpretations of Scripture. Biblical narratives have historically contributed to a discriminatory and exclusionary approach to disability, often framing it as a consequence of sin. In the Old Testament, disability is sometimes portrayed as a consequence of sin or divine judgment. For example, Deuteronomy 28:27-29 lists blindness and madness as curses for disobedience. Similarly, Gehazi's leprosy in 2 Kings 5:27 is linked to greed. These texts reflect

⁴⁴ Brain, B. Wondrously Wounded: Theology, Disability, and the Body of Christ Account: ehost. 2019. pp. 40-42

⁴⁵ Miles & Miles, Disability, p.4

⁴⁶ Etieyibo & Omiegbe, Religion, pp.3-6

⁴⁷ see page 89 for her interview.

⁴⁸ Eiesland, The disabled, pp. 73-74

⁴⁹ Kabue, Amanze & Landman, Disability in Africa, 2016

an ancient worldview that associated suffering with moral failure (Deut. 28:27–29; 2 Kings 5:27). When Jesus healed the man at the pool of Bethesda, *His words "Behold, thou art made whole: sin no more, lest a worse thing come unto thee"* (John 5:14 KJV) have been interpreted by some as a link between sin and disability. Similarly, passages such as Mark 2:5,⁵⁰ where Jesus connects sin and healing, are sometimes used to suggest that disability stems from spiritual defect. The belief that disability is a punishment from God stems from theological misinterpretations that link sin and suffering, often drawing from Old Testament texts where illness or impairment is seen as divine judgment. However, such views have been strongly critiqued by disability theologians. In John 9:1-3, Jesus rejects this notion, declaring that a man's blindness was not due to sin but so "the works of God might be revealed." Amos Yong argues that linking disability to divine punishment perpetuates exclusion and undermines the full humanity of disabled persons. Instead, theology must affirm their dignity and divine image.⁵¹

As a result, many African churches, particularly within Pentecostal and evangelical traditions, prioritize healing and deliverance as the primary response to disability, often neglecting inclusion, support, and empowerment.⁵² Within Nigerian Pentecostal theology, affliction, including physical illness, emotional distress, and intellectual disabilities, is frequently attributed to demonic activity. Grounded in spiritual warfare theology, this worldview positions Satan as the architect of suffering and Jesus as the liberator who restores health through divine intervention. Scriptures such as Matthew 17:18 "Jesus rebuked the demon, and it came out of the boy, and he was healed at that moment", are frequently cited to reinforce this perspective.

• Healing-centric theology

Nigerian Pentecostal churches often view deliverance as the divine remedy for all forms of suffering, including intellectual disabilities. Such conditions are frequently interpreted through the lens of spiritual warfare, demonic affliction, or generational curses. This raises critical theological questions: Does Jesus' healing ministry imply a direct connection between disability and sin, or does it reveal a broader vision of divine compassion and authority?

In Luke 5:20, Jesus forgives the sins of a paralyzed man before healing him, not to conflate sin with illness, but to demonstrate His authority to both forgive and heal. Similarly, in Mark 9:17-27, Jesus heals a boy with convulsions whom others associate with demonic possession. These passages affirm Jesus' power over both physical and spiritual affliction, yet they do not support a

⁵⁰ When Jesus saw their faith, He said to the paralytic, "Son, your sins are forgiven you" (NKJV)

⁵¹ Yong, Theology, p.14

⁵² Etievibo & Omiegbe, 2016

simplistic equation of disability with personal sin or demonic control. Rather, they show that healing is a manifestation of divine mercy, not condemnation.

Within Nigerian Pentecostalism, Satan is often seen as the source of all misfortune, including disability. Referencing John 10:10, believers are taught to combat affliction through spiritual warfare, fasting, and deliverance prayers aimed at "casting out the spirit of affliction." This worldview significantly shapes how disability is perceived, both in Nigeria and among diaspora communities.⁵³

Regardless of how one interprets the healing narratives in the New Testament, it is essential to recognize the dangers of attributing disabling conditions solely to demonic forces. Such interpretations can obstruct inclusion and ignore the dignity of persons with disabilities as bearers of God's image.⁵⁴

While this perspective is biblically grounded and pastorally sincere, I believe it requires theological refinement. The danger in applying demonology indiscriminately is that it reduces disability to a spiritual defect, which can lead to stigma, exclusion, and blame. People with intellectual disabilities may be wrongly labeled as spiritually contaminated, and their families may carry unwarranted guilt. Moreover, when healing does not occur, the person's faith, or that of their family, is often questioned.

African theologians and practitioners are increasingly advocating for a contextualized disability theology that recognizes both cultural realities and biblical truth. The Ecumenical Disability Advocates Network (EDAN) and resources such as Disability in Africa: Resource Book for Theology and Religious Studies have made significant contributions toward this goal. These works call the church to reimagine its theology and practice, not as spaces of exclusion or pity, but of mutual belonging and spiritual dignity.⁵⁵

2.3.4. The Role of Church Hierarchy in Shaping Theological Practice

The diaspora setting of Nigerian Pentecostal churches in the Netherlands adds another interpretative dimension. While migration often creates opportunities for cultural exchange and transformation, it can also lead to cultural preservation, particularly among faith communities that serve as both spiritual and social hubs. Nigerian Pentecostal churches in Europe serve as spaces

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⁵³ Owoeye, S. A. (2012). Healing in some Pentecostal churches in South-Western Nigeria. European Scientific Journal, 8(30), 95–113.

⁵⁴ Kelley, T. Disability and Healing: Rethinking the Church's Role in Suffering. Baker Academic, 2011.

⁵⁵ Kabue et al., Disability, 2016

where Nigerian migrants maintain cultural continuity and community identity. In this role, churches often reinforce traditional Nigerian worldviews, including stigmatized views of disability, as part of preserving a shared heritage in a foreign land.

Many Nigerian Pentecostal churches operating in the diaspora face structural and institutional constraints that hinder their ability to implement inclusive practices, particularly concerning people with intellectual disabilities. These churches often function as extensions or branches of mother churches in Nigeria and therefore operate within strict hierarchical systems where autonomy is limited. As such, pastors and leaders in the diaspora may recognize the need for inclusion but are often unable to enact significant changes without explicit approval from the denominational headquarters in Nigeria.

Nwabuisi highlights this challenge in his study on disability and the Nigerian church, noting that while some clergy may desire to promote inclusion and accessibility, they are bound by doctrinal and administrative policies shaped by the theological orientation of their parent bodies.⁵⁶ The emphasis on healing, deliverance, and spiritual warfare, deeply embedded in Nigerian Pentecostal theology, leaves little room for the development of a disability theology that affirms difference without seeing it as a spiritual defect.

• Barriers to Change Due to Church Hierarchy

Nigerian Pentecostal churches in the diaspora often operate as extensions of larger mother-church institutions based in Nigeria. These organizations maintain strict doctrinal oversight, influencing how theology is applied across different branches. Church leadership structures are often highly centralized, meaning that pastors in the diaspora have limited autonomy in adapting theological perspectives, including disability inclusion. This strict adherence to established doctrine affects the diaspora churches as they follow spiritual directives from Nigerian headquarters, making deviations from healing-centered theology difficult. The limited decision-making power means that pastors in European branches must align with official teachings, restricting their ability to introduce alternative theological frameworks such as disability theology. Fear of institutional consequences makes leaders wary of reprimand or loss of pastoral legitimacy if they advocate theological changes that challenge mainstream Pentecostal healing narratives.⁵⁷

⁵⁶ Nwabuisi, G. U. Disability and Nigerian church: Bridging the gap between orthodoxy and orthopraxis. Trinitarian International Journal of Arts and Humanities, 2021. 1(1),

⁵⁷ Adedibu, Babatunde A. "Reverse Mission or Migrant Sanctuaries? Migration, Symbolic Mapping, and Missionary Challenges of Britain's Black Majority Churches." Pneuma, vol. 35, no. 3, 2013, pp. 405–423.

• Structural Limitations and Policy Challenges

A key factor in the limited inclusion of people with intellectual disabilities in Nigerian Pentecostal churches is the lack of formal policies promoting their participation in worship and community life. While churches may offer welfare programs and prayers, these are often charity-focused rather than aimed at creating a community where people with ID are recognized as full members of the body of Christ. Pentecostal churches in the diaspora provide financial assistance or prayers but lack structured frameworks for active involvement and leadership. Institutional barriers such as hierarchical control and doctrinal rigidity hinder the necessary theological adaptations. To address this, churches need greater pastoral autonomy and formal inclusion policies that emphasize belonging over merely faith healing.⁵⁸

This theological disengagement leads to unintentional exclusion of individuals with intellectual disabilities. The silence and lack of initiative-taking strategies highlight a significant gap that must be bridged. As Eiesland's "Disabled God" suggests, churches must transition from a theology of cure to one of inclusion, recognizing disability as part of the divine image rather than something to be fixed.⁵⁹

Embodied Experience and Emotional Realities

Finally, understanding why the current situation exists also requires attention to personal and communal emotions within these churches. The desire for healing is not merely doctrinal, it is often rooted in love, desperation, and hope. Many caregivers genuinely believe that prayer will change their situation and bring healing to their children. However, when healing fails to occur, the same theological system that once offered hope can become a source of emotional devastation. This emotional reality explains why many families struggle with guilt, self-blame, and spiritual disillusionment, as seen in the story of the mother whose son was nearly lost due to delayed medical care and Mama Francesca, who felt rejected by her church community after her daughter remained unhealed, illustrate how a healing-centric theology can cause spiritual and emotional harm when it fails to accommodate ongoing human fragility.

At the same time, people with intellectual disabilities in the study expressed a deep sense of being loved by God and enjoying community,⁶⁰ especially when not subjected to invasive prayer rituals. This points to the possibility of reframing theology from performance and deliverance to presence

⁵⁸ Ibid

⁵⁹ Eiesland, the disabled God, p.74

⁶⁰ See page 65

and relationship, where God's love is experienced through belonging, not through the pressure to be healed.

Conclusion

This research reveals significant tensions between cultural and theological convictions regarding disability within Nigerian Pentecostal churches in the Netherlands. Cultural beliefs, deeply rooted in traditional Nigerian society, often interpret intellectual disabilities through metaphysical and spiritual frameworks, reinforcing stigma and exclusion. Simultaneously, Pentecostal healing theology emphasizes deliverance, sometimes at the expense of inclusive practices, contributing to contradictions within theological perspectives.

Beyond these tensions, hierarchical structures within Nigerian Pentecostal churches present additional barriers to change. Many diaspora churches operate under the doctrinal oversight of their mother churches in Nigeria, limiting their autonomy to adopt disability-inclusive theology. Leadership constraints, strict adherence to healing-centric teachings, and institutional rigidity make theological adaptations challenging, often prioritizing faith healing over structural inclusion.

The persistence of these cultural and theological tensions, coupled with hierarchical constraints, underscores the need for deeper theological reflection and practical reforms. Addressing these issues requires a shift toward a disability theology that embraces inclusion, affirms dignity, and reimagines discipleship beyond healing-centered frameworks.

2.4. What are the convictions and practices of inclusive faith communities taken from disability theology perspective?

What should be going on in inclusive faith communities from a disability theology perspective? To address this question, the theology of disability and inclusive communities was examined. The theology of disability challenges the way Christian churches have interpreted disability within their midst and how they have engaged with people with disabilities.

The sub-question three of this research reflects theologically on the disability theology, inclusive faith communities and biblical principles.

Disability theology is a branch of theological reflection that centres the lived experiences, bodies, and spiritual insights of people with disabilities in understanding God, the Church, and human flourishing. It challenges traditional theologies that have often marginalized or pathologized disability, offering instead a vision of theological anthropology that recognizes disabled people as full bearers of God's image and agents of theological insight.

Liberation theology on disability theology seeks to free marginalized people from oppressive theological and social structures. Eiesland's "The Disabled God" reimagines the resurrected Christ as a disabled God who remains wounded, thus affirming the sanctity of disabled bodies and offering a liberative image that counters narratives of deficiency.⁶¹ While African Pentecostal churches emphasize faith healing, liberation theology argues that healing should extend beyond physical restoration to address structural exclusion and social justice. 62 Scholars like Amos Yong integrate disability into broader theological systems. In Theology and Down Syndrome, Yong constructs a pneumatological theology that includes people with intellectual disabilities, showing how doctrines of creation, salvation, and eschatology are enriched by their perspectives.63 Disability theology also has a pastoral dimension, seeking to reshape church practices. John Swinton's work emphasizes how churches can become communities of belonging, not just inclusion, through practices that affirm disabled people's spiritual gifts and worth. Disability theology does not speak with one voice. Some scholars, like Reynolds, argue that disability invites a rethinking of relational theology and vulnerability as theological strengths.⁶⁴ Others, like Clifton, push back against the "over-spiritualization" of suffering, emphasizing the importance of joy, wellbeing, and flourishing even amidst disability. There is also a critical perspective that challenges ableism in liturgy, scripture, and church architecture. Scholars like Creamer argue for a "limits model" of disability, which accepts human limitations as normal rather than exceptional, offering an alternative to the dominant medical or moral models.65

Disability theology challenges both by affirming disability as a valued human condition, not a tragedy or error. It reinterprets healing stories not as proof of disabled people's need to be cured, but as signs of God's inclusive kingdom. Eiesland critiques the idea of healing as the only valid spiritual engagement with disability, arguing instead for ecclesial spaces where disabled people can belong as they are.

In conclusion, disability theology is both critical and constructive. It critiques traditional theologies that marginalize disabled persons while offering a transformative vision of the church as a place of radical hospitality, mutuality, and theological richness. It does not dismiss suffering but reframes it within a broader theology of presence, dignity, and relationality.

2.4.1. Disability and society

⁶¹ Ibid

⁶² Gutiérrez, Gustavo. A Theology of Liberation: History, Politics, and Salvation. Orbis Books, 1988

⁶³ Yong, Theology and Down, pp.11-14

⁶⁴ Reynolds, p.19

⁶⁵ Creamer, Deborah B. Disability and Christian Theology: Embodied Limits and Constructive Possibilities. Oxford University Press, 2009

Scholars and practitioners have defined disability from various disciplinary angles. Disability refers to a permanent physical or mental impairment that limits part or complete use of one's body. However, the core challenge for people with disabilities is often not the impairment itself, but the negative social attitudes and systemic barriers they face. Disability is frequently perceived as a deviation from what is considered a "normal" human experience, leading to views that cast disabled people as abnormal or deficient. Such forms of recognition, more precisely, misrecognition, extend beyond the personal realm and shape broader cultural, religious, and social frameworks through which people engage with one another.⁶⁶

As Yong stated, "Whatever else disability is, it is also the experience of discrimination, marginalization, and exclusion from the social, cultural, political, and economic domains of human life." This framing moves disability beyond a medical or biological issue and into the realm of justice and inclusion. Advocates of the social model of disability emphasize a critical distinction between *impairment* and *disability*. While impairment refers to a physical, mental, or emotional condition that diverges from normative functioning and can be diagnosed, disability refers to the social disadvantages and exclusions experienced by individuals with impairments due to structural and attitudinal barriers. 68

Aligned closely with this is the cultural model of disability, which also challenges the view of disability as an individual deficit. Instead, it emphasizes how everyday behaviours, language, and institutional practices work together to marginalize people with impairments. Together, these models advocate for a reconceptualization of disability that centers on dignity, participation, and transformation, both within society and the church.

2.4.2. Disability in the New Testament

For centuries, disability has often been viewed within Christian communities as a sign of sin, punishment, or divine displeasure. However, a closer examination of the New Testament reveals more nuanced and redemptive theological perspectives that challenge these assumptions. The intersection of theology and disability is a vital area of study because Christian theology has historically contributed both to the marginalization and, more recently, the affirmation of people with disabilities. For centuries, theological interpretations often linked disability with sin, divine

⁶⁶ Sande, N., & Ringson, J. (2021). Do persons with disability need healing? An African Pentecostal perspective within the selected African Pentecostal churches in Zimbabwe. Journal of Pentecostal Theology, 30(1), 162–180

⁶⁷ Yong, Theology, p.99

⁶⁸ Moss, C., and Jeremy Schipper. Disability Studies and Biblical Literature. Society of Biblical Literature, 2011., pp. 3–4

punishment, or moral failing, rooted in the misreading of biblical texts.⁶⁹ These views led to the exclusion of disabled people from full participation in the life of the church and society. Nancy Eiesland argues that disabled people have often been perceived as objects of charity rather than as theological subjects with spiritual agency.⁷⁰ Furthermore, disability theology seeks to reframe traditional doctrines, such as creation, sin, healing, and embodiment, from the lived experience of disabled people, thus challenging ableist norms embedded in the theological system.⁷¹ Studying disability theologically is not only an academic task but also a justice-oriented one, aiming to recover the dignity, presence, and voice of people with disabilities within faith communities.

Yong critiques traditional readings that moralize or pathologize disability, arguing instead for a pneumatological and inclusive ecclesiology. He emphasizes that disability should not be seen as a deviation from divine intention, but as part of human diversity in creation. Specifically, Yong argues that Jesus' statement in John 9:3 "Neither this man nor his parents sinned..." decouples disability from sin and reframes it as an opportunity for divine revelation, not condemnation. Plack in A Healing Homiletic address how preaching has often reinforced negative theological assumptions about disability. She critiques sermons that portray healing miracles as symbols of spiritual purity or moral restoration. Instead, she calls for a hermeneutic that hears the voices of people with disabilities and recognizes healing as relational and communal, rather than as a mere "cure." Both scholars insist that disability is not the result of individual or familial sin, and both call for theological frameworks that affirm the full humanity and spiritual agency of disabled people within the church.

The inclusive faith communities are shaped by theological convictions and practices that affirm the full humanity, dignity, and giftedness of people with disabilities, not despite their disabilities, but in and through them. Healing is not always about the cure, but healing as restoration to community, affirmation of wholeness, and the presence of God in suffering. The healing narrative in Nigerian Pentecostal churches is rooted in the ministry of Jesus, who "healed all that were oppressed by the devil." This raises the question: What is healing, and what constitutes a cure?

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⁶⁹ Brock, B. The Disabled Church: Toward a Theology of Disability. Hendrickson Publishers, 1994. Yong, Theology and Down, 2007

⁷⁰ Eiesland, The Disabled, pp. 71-75

⁷¹ Creamer, Deborah B. Disability and Christian Theology: Embodied Limits and Constructive Possibilities. Oxford University Press, 2009.

⁷² Yong, A. Disability and the Gifts of the Spirit: Pentecost and the Renewal of the Church. Journal of Pentecostal Theology, 2010. 19(1), 76-93. https://doi.org/10.1163/174552510X489973

⁷³ Black, A Healing Homiletic, p.51

2.4.3. Theology of Healing

Healing theology is a central feature in many Christian traditions, especially Pentecostalism, where divine healing is viewed as a manifestation of God's power and love. Rooted in scriptures like Isaiah 53:5 and James 5:14-16, this theology teaches that healing is available to believers through faith and the redemptive work of Christ. Pentecostals often hold that Jesus not only came to save but also to heal and deliver, with healing seen as a covenant promise.⁷⁴

However, scholars have critiqued the unbalanced application of healing theology. Eiesland argues that when healing becomes the sole theological response to disability, it reduces individuals to "problems" to be fixed, rather than whole persons bearing God's image. Similarly, Clifton highlights that people with chronic illnesses or disabilities often feel disappointment and guilt when healing does not occur, leading to spiritual alienation. The expectation of miraculous healing can stigmatize those who remain unhealed, implying that their faith is insufficient or that they are spiritually flawed.⁷⁵

In the story of Mama Francesca, a mother who sought healing for her daughter with cerebral palsy. Her hope, shared by the prayer team, was for a physical cure, a visible transformation that would signal divine intervention. However, when no such change occurred, disappointment followed. Was this a failure? Church members assumed her daughter's continued disability must be due to unconfessed sin or insufficient faith, and so blamed and shamed both mother and child. In reality, this kind of spiritual "blame game" compounds suffering and can even be a form of abuse, driving vulnerable people away from faith communities rather than drawing them closer to God.⁷⁶

Black, in her book "A Healing Homiletic", identifies two basic approaches to managing illness: cure and healing. When preaching the healing narrative, homileticians often use these terms interchangeably or, at the very least, use the term "healing" when what they really mean is "cure."⁷⁷ These are two distinct concepts; cure refers to the elimination of at least the symptom, if not the disease itself. Healing, on the other hand, has many meanings attached to it. According to Louw, healing is not limited to the physical cure of disease, but involves the restoration of human dignity, spiritual meaning, relationships, and a sense of identity before God. Cure is physical or clinical, but healing is spiritual, emotional, and relational. One can be healed without

Kärkkäinen, Veli-Matti, ed. The Spirit in the World: Emerging Pentecostal Theologies in Global Contexts. Grand Rapids, MI: Wm. B. Eerdmans Publishing Co. 2009, p. 117

⁷⁵ Clifton, The darker side, p. 209

⁷⁶ Hathaways, Included, p.78

⁷⁷ Black, A healing, p. 50

being cured, when love, acceptance, meaning, and peace are restored. Healing is also about affirming the dignity and worth of people, especially those marginalized by disability, illness, or social exclusion. It involves pastoral care that restores their place in the community and reminds them they are made in God's image.⁷⁸

Jesus' ministry suggests otherwise. While Jesus did perform many physical healings (e.g., Mark 1:40-42, Luke 7:22), He also offered healing that went far deeper than the body, healing of shame, exclusion, and broken relationships. For example, in John 9, when Jesus heals a man born blind, the story makes clear that the man's condition was not due to sin, but that "the works of God might be displayed in him" (John 9:3). Healing, then, is not always about fixing what is wrong but revealing what is divine.

This perspective helps to reframe Mama Francesca's experience. Although her daughter was not physically cured, this does not mean that she was untouched by God. As described in *Included and Valued: A Practical Theology of Disability*, Pastor Emmanuel later visited Mama Francesca after her long absence from the congregation. He prayed with her and her daughter, and in that moment, Mama Francesca came to recognize that healing can take forms beyond the physical. Sometimes, God chooses to work through a people's disability rather than remove it. This reflects the experience of the Apostle Paul, who, in 2 Corinthians 12:9, recalls God's words to him: "My grace is sufficient for you, for my power is made perfect in weakness." Although Paul did not receive the cure he had prayed for, he was healed in a deeper sense, through spiritual acceptance, divine empowerment, and a renewed sense of purpose.

By expecting only physical cure, we may be limiting God to our human frameworks. Healing in Jesus' ministry included restoration to community, the affirmation of identity, and the embodiment of God's image, even in those the world saw as broken. Psalm 139 reminds us that each person is "fearfully and wonderfully made" (v.14), regardless of ability or disability.

Therefore, the absence of a cure in Mama Francesca's story is not necessarily a sign of failure or sin or lack of faith. Louw emphasizes that healing is related to the Hebrew concept of *shalom*, which implies wholeness, peace, harmony, and well-being. It's not just the absence of illness, but the presence of restored relationships with God, self, others, and the world.⁷⁹ This perspective invites the Nigerian Pentecostal churches to broaden their understanding of healing, to seek not only what we think is best, but to recognize and honour the image of God already present in each

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⁷⁸ Louw, Daniël. Cura Vitae: Illness and the Healing of Life in Pastoral Care and Counselling. Lux Verbi Publishers, 2008. p.10

⁷⁹ Louw, Cura Vitae, p.14

person. From a theological perspective, disability must be understood through the doctrine of the *Imago Dei*. Every person, regardless of ability, is made in the image of God (Genesis 1:27). This includes people with intellectual and physical disabilities. Eiesland further reimagines divine embodiment in her concept of the "disabled God," suggesting that God identifies with human vulnerability and limitation.⁸⁰

2.4.4. Theology of Belonging

This is a growing theological perspective that emphasizes mutual inclusion, dignity, and relational participation within the Body of Christ, especially for marginalized groups such as people with disabilities. Scholars argue that mere inclusion is insufficient without genuine belonging, which requires recognition, relationship, and shared responsibility.⁸¹ Swinton contends that belonging is not just about being physically present but about being known, loved, and missed when absent.⁸² He critiques churches that include disabled people without creating relational spaces where their presence matters. Reynolds adds that Christian community should embrace vulnerability and interdependence, challenging cultural ideals of independence and perfection.⁸³ In his view, belonging arises when the church values people not for productivity but for who they are.

Together, these scholars call for a theology that moves beyond inclusion to full, relational, and transformative belonging in the life of the church.

2.4.5. Inclusive Faith Communities

Inclusive faith communities are religious spaces that intentionally welcome, affirm, and engage all individuals, regardless of ability, gender, race, or social status, recognizing the inherent dignity and spiritual worth of every person. Within the context of disability, inclusive faith communities seek to dismantle barriers that marginalize people with disabilities and instead foster belonging, participation, and leadership. Eiesland, in *The Disabled God* argues that traditional Christian theology often renders disabled bodies invisible or associates them with brokenness and sin. She further argues that a broken body is the miracle of the Eucharist, at the table, we remember the physical reality of that body broken for people.⁸⁴ This vision reimagines the church as a space where difference is not merely tolerated but celebrated as a reflection of divine diversity. Amos

⁸⁰ Eiesland, the disabled, p. 75

⁸¹ Swinton, John. From Inclusion to Belonging: A Practical Theology of Community, Disability, and Humanness. Journal of Religion, Disability & Health. 2012.

⁸² Ibid

⁸³ Reynolds, Thomas. Vulnerable Communion: A Theology of Disability and Hospitality. Brazos Press 2008. pp.46-55

⁸⁴ Eiesland, The Disabled, p.114

Yong in *Theology and Down Syndrome* contends that inclusive ecclesiology must recognize people with disabilities as bearers of God's image and contributors to the theological imagination. ⁸⁵ He critiques the ableist assumptions underlying many Pentecostal and Evangelical theologies and calls for a pneumatological approach that honours the gifts of all believers, including those with intellectual disabilities. The *World Council of Churches* (WCC) supports this inclusive vision, stating that the church must become "a community of belonging for people of all abilities." This requires structural changes, such as accessible liturgies, inclusive leadership, and theological education that embraces disability as part of human diversity.

In conclusion, inclusive faith communities challenge the church to embody God's hospitality by affirming the full humanity of every person. As Eiesland notes, "The disabled God is not a distant healer, but the God who shares in our humanity." Thus, inclusion is not optional, it is central to faithful discipleship.

2.4.6. Biblical Principle towards inclusive faith communities

The following Bible passages elaborate on inclusive faith communities

Pneumatology and Disability

Acts 2:17-18 emphasizes the outpouring of the Spirit on "all flesh," providing a theological foundation for the universal accessibility of spiritual empowerment. This passage supports a pneumatology that is central to Pentecostal theology, which highlights the active and inclusive work of the Holy Spirit in the life of the church. Pentecostals believe that all believers are empowered by the Holy Spirit for ministry; however, in practice, participation and leadership are often limited by ableist assumptions that marginalise people with disabilities.⁵⁷ The teaching of 1 Corinthians 12:4-11 further reinforces the doctrine of equal spiritual giftedness, asserting that the Spirit distributes gifts to each believer as He wills, without qualification based on physical or cognitive ability. Such scriptural affirmations challenge ecclesial structures and cultural biases that exclude disabled individuals from full participation in ministry. Yong advances a theology of disability that reframes people with disabilities not as passive recipients of healing but as prophetic witnesses, active agents who bring distinct and necessary contributions to the church. This perspective calls for a reimagining of ecclesial inclusion that aligns with the Spirit's indiscriminate

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⁸⁵ Yong, theology and down, p.155

⁸⁶ Van Dijk, R. (2021). Having faith in the impossible: How African-initiated Pentecostalism shapes Dutch cities. Cultural Encounters.

World Council of Churches. (2003). A church of all and for all: An interim statement. WCC Publications

⁸⁷ Yong, Theology and down, p.14

empowerment and the biblical vision of the body of Christ as comprised of diverse, interdependent members.88

Luke 14:13 Leave no one behind

Inclusive faith communities embody the vision that Jesus illustrated in Luke 14:13. Drawing from Amos Yong's *The Bible, Disability, and the Church*,⁸⁹ this passage serves as a biblical foundation for advocating inclusion within Nigerian Pentecostal churches. Jesus commands his followers, "But when you give a banquet, invite the poor, the crippled, the lame, the blind" a radical reversal of social norms that typically marginalize such individuals. Yong interprets this as a vision of the church, where the hospitality of God's kingdom is extended precisely to those whom society deems unworthy or burdensome.

Yong urges churches not merely to tolerate people with intellectual disabilities but to prioritize their presence, recognizing them as central to the Spirit-filled community. For people with intellectual disabilities, this means having a voice in church decisions, being invited into leadership roles, and participating in spiritual practices without feeling like outsiders. Inclusion, therefore, is not merely an act of charity but an expression of spiritual fidelity, obedience to the kingdom patterns that Jesus himself set. In the vibrant, Spirit-oriented atmosphere of Pentecostal worship, churches must create spaces where people with disabilities can minister, prophesy, lead, and fully engage as co-bearers of the Holy Spirit.90 Also, in Disability and the Gospel, David W. Anderson and Dale Lund challenge the dominant Christian assumption that the goal for people with disabilities is physical or mental healing.91 Instead, they argue that the gospel proclaims the value of all people as they are, with disabilities not as defects to be erased, but as conditions in which God's grace is revealed. Their theological approach complements Luke 14:13, where Jesus commands his followers to invite "the poor, the crippled, the lame, the blind" into fellowship, not after they are healed, but in their current state. Anderson and Lund insist that such inclusion reflects the very character of God's kingdom, where participation is not conditional on wholeness or productivity. This insight is critical for Nigerian Pentecostal churches, where the strong emphasis on miracles and healing can inadvertently marginalize those whose disabilities remain. The authors call churches to go beyond the miracle mindset, recognizing that inclusion, love, and belonging are themselves signs of the Spirit's presence. In this view, disabled people are not

⁸⁸ Ibid

⁸⁹ Yong, Amos. The Bible, Disability, and the Church: A New Vision of the People of God. Eerdmans, 2011. p.70

⁹⁰ Yong, Theology and down, p.14

⁹¹ Anderson, D. W., & Lund, D. (2011). Disability and the gospel: How God uses our brokenness to display his grace. Crossway

"projects of healing" but co-bearers of the gospel, witnesses of divine strength in weakness (2 Cor. 12:9).

1 Corinthians 12:21-26 Disability and Ecclesial Identity

The Apostle Paul presents a radical vision of ecclesial identity, portraying the church as a body composed of diverse and interdependent members. Crucially, he asserts that "the members of the body that seem to be weaker are indispensable" (1 Cor. 12:22, NRSV), and that such members should receive "greater honour" (v. 23). This passage challenges societal norms that devalue weakness or difference, offering instead a theological anthropology grounded in mutual care, visibility, and shared dignity.

Amos Yong draws on this text to argue that people with disabilities are not peripheral to the church; they are central to its very identity. He critiques ecclesial models that treat disabled people as passive recipients of ministry and proposes a pneumatological vision of the church, where all members, including those deemed "weak," are empowered by the Spirit and gifted for ministry. According to Yong, these "weaker" members are not to be healed or fixed before they belong; they are already indispensable to the body of Christ, just as they are. 92 Similarly, Eiesland uses 1 Corinthians 12 to argue for a church that not only includes but reconstructs its identity around disabled experiences. She challenges the romanticization of suffering or weakness, emphasizing instead the theological agency and dignity of disabled people. Eiesland asserts that in a truly inclusive church, the parts often hidden or shamed in public life are lifted in the community of Christ, not as objects of pity but as witnesses of divine presence and relational wholeness. Her concept of the "disabled God," who continues to bear the marks of his wounds, suggests that divine embodiment itself includes disability. 93

Together, Yong and Eiesland call the church to move beyond tokenistic inclusion and toward a radical reordering of ecclesial values. Strength, in their view, is found not in uniformity or perfection but in interdependence. Their theological vision challenges ableist structures in many churches, including within Nigerian Pentecostal contexts, by affirming that the presence of people with intellectual disabilities is not a problem to be solved, but a theological gift to be received.

An inclusive faith community must recognize people with intellectual disabilities not as marginal participants, but as full members of the Body of Christ. Theologically, this vision is grounded in Paul's statement that "those members of the body that seem to be weaker are indispensable" (1

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⁹² Yong, Disability, p.91

⁹³ Eiesland, The Disabled, p.110

Corinthians 12:22, NRSV). This passage reorients communal life around those typically seen as "lesser," affirming their vital role in the church's identity and mission.

Yong emphasizes that the Holy Spirit is not restricted by intellectual or communicative capacity. In his Pentecostal theology of disability, he argues that people with intellectual disabilities must be seen as Spirit-filled agents within the community of faith. According to Yong, true ecclesial inclusion involves recognizing that all persons, including those with intellectual disability, bear gifts that enrich the church. The Spirit does not conform to neurotypical expectations but reveals God's presence through diverse human embodiments and experiences.⁹⁴

Eiesland challenges the dominant theological paradigms that equate worth with cognitive ability. She asserts that disabled people are not merely recipients of care or healing but are full theological subjects whose lived experience offers unique and necessary insights into the divine. Her concept of the "disabled God" invites churches to move beyond normative models of healing and embrace a theology of presence, participation, and mutual transformation.

In many Nigerian Pentecostal contexts, disability is frequently framed in terms of healing or spiritual warfare. While this reflects deep spiritual concern, it can inadvertently marginalize people with intellectual disability when healing does not occur. This reinforces the idea that their full inclusion is contingent upon change, rather than recognition of their intrinsic worth. As Creamer notes, such frameworks often fail to acknowledge the theological richness of disabled lives as they are. Inclusion is not simply a matter of physical or programmatic accessibility. It requires a theological shift toward seeing people with intellectual disabilities as integral to the body of Christ. Their presence is not a problem to be solved but a gift to be received. As Yong suggests, "people with intellectual disabilities are not only part of the church, but they also help define what the church is and ought to be." 96

Conclusion

The literature review has illuminated the complex theological, cultural, and social dimensions shaping the perceptions and treatment of people with mild intellectual disabilities within Nigerian Pentecostal churches. From the deeply embedded healing theology that prioritizes deliverance over inclusion to the cultural stigmatization of disability as a spiritual deficiency, these frameworks significantly impact church practices and beliefs. The discussion has shown that while healing-centered theology offers hope, it also creates exclusionary narratives when miraculous

⁹⁴ Yong, Theology and Down, p.13

⁹⁵ Creamer, Disability and Christian theology, p.55

⁹⁶ Yong, the Bible, disability, p.93

intervention does not occur, often leaving individuals and their families burdened with guilt, blame, and spiritual alienation.

The theological reflections explored in this review call for a shift from a model of healing-as-cure to one of healing-as-belonging. Disability theology, particularly the insights from scholars like Nancy Eiesland and Amos Yong, emphasizes the need for churches to embrace intellectual disability as part of human diversity, rather than a spiritual condition to be eradicated. The case studies and testimonies examined further underscore the importance of moving beyond healing ministries toward creating an inclusive faith community where all members, regardless of ability, are affirmed in their dignity, spiritual value, and participation.

The comparative analysis of African Pentecostal churches in Europe highlights potential pathways for transformation, with South African churches demonstrating more progressive approaches to inclusion. This suggests that Nigerian Pentecostal churches in the Netherlands can evolve in their theological engagement with disability, particularly through exposure to new perspectives and contextual shifts within the diaspora setting.

This literature review provides a strong foundation for the methodology chapter. Having established the theological and cultural influences that shape current practices, the next stage of the research focus on empirical data. The forthcoming chapter therefore introduce the methodological framework, examining how these convictions are lived out and experienced within Pentecostal churches in the Netherlands. By exploring the practices, narratives, and theological reflections of church leaders, caregivers, and individuals with intellectual disabilities, the study aims to identify ways in which inclusion can be fostered within faith communities still shaped by healing-centered theologies.

CHAPTER THREE- METHODOLOGY

3.1. Introduction

This study adopts a qualitative research methodology to investigate the inclusivity of Nigerian Pentecostal churches in the Netherlands toward people with intellectual disabilities. A qualitative approach is suitable given the current gaps in existing knowledge on this topic, especially within the specific cultural and theological context of Nigerian Pentecostalism in the Netherlands. Furthermore, the research seeks to capture convictions and practices and their relationship to inclusion and reflections related to this complex theme. By prioritizing in-depth data, this methodology allows for a nuanced understanding of how individual beliefs, cultural narratives, and theological frameworks converge to influence church practices. A qualitative approach offers critical insights into the underlying reasons and dynamics that shape whether and how these churches foster inclusion.

The methodology used to answer this research question is Osmer's model of practical theology, which provides a structured way to examine this question. The fourth task of Osmer's model of practical theology, which is the pragmatic task: how should we respond, is not the scope of this research. This research covers the three tasks below:

- The descriptive-empirical task examines the current situation: "What is going on?
- The interpretative task tries to understand from a literature study of various related documents what influences the conviction and practice of inclusion, "Why is it going on?"
- The normative task consists of normative scripture that describes the desired condition: "What ought to be going on?

3.2. Descriptive-Empirical Task: "What is going on?"

To attain the first sub-question proposed for this study, which is to gain a clear picture of the current situation, it involves gathering data through semi-structured interviews and observation to understand the current convictions and practices within Nigerian Pentecostal churches in the Netherlands regarding the inclusion of people with intellectual disabilities.

According to Mason in *Qualitative Researching*, semi-structured interviews balance rigor and spontaneity in qualitative research.⁹⁷ By using a semi-standardized set of questions, I maintain consistency across participants while remaining flexible to explore emerging themes. This

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⁹⁷ Mason, J. (2002). Qualitative Researching (2nd ed., p. 54). SAGE Publications

approach is useful for this research as it ensures all key issues are addressed while allowing for natural conversation flow.

Mason emphasizes tailoring data collection methods to the characteristics and needs of different participant groups. By conducting separate interviews with people with mild intellectual disabilities using customized questions, I create a more inclusive environment that respects varied communication styles. This leads to more authentic perspectives and aligns with ethical considerations, allowing participants to express their experiences fully.⁹⁸

Additionally, Mason advocates for an iterative approach to qualitative inquiry. Initial semi-structured interviews with key stakeholders can inform further exploration in focus group discussions. This strategy enhances the depth of understanding regarding inclusion practices and is essential for creating a comprehensive narrative of complex social phenomena, ensuring core themes are consistently examined while capturing the multifaceted realities of inclusion.⁹⁹

In the methodology chapter, different sources and data play specific, strategic roles in addressing the research questions. Here's an explanation of how each type of source and data is used:

Primary Data Collection:

Interviews and Focus Groups:

Semi-structured interviews and focus group discussions are conducted with pastors, church leaders, congregants, and families of people with intellectual disabilities. These personal narratives provide firsthand insights into how Nigerian Pentecostal churches in the Netherlands implement or resist disability inclusion in daily practice. This qualitative data is essential to understanding the emotional, spiritual, and operational dimensions of church practices.

Participant Observation

Observations in church settings are used to capture the dynamics of worship, pastoral care, and inclusion (or lack thereof) in real time. This method helps verify whether stated church doctrines and policies, inferred from interviews and literature, translate into observable actions and interactions during services and community events.

Secondary Data and Theoretical Sources:

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⁹⁸ Mason, Qualitative Researching, p. 60

⁹⁹ Ibid

Theological and Academic Literature:

Texts by scholars such as Yong, Eiesland, and Kabue, among others, are thoroughly reviewed to develop the theoretical framework. These sources outline existing perspectives on disability theology, inclusive faith communities, and contextual challenges in African Pentecostalism. They help anchor the primary data analysis within established scholarly debates and reveal gaps that the present research aims to fill.

Document and Policy Analysis:

Official church documents, policy manuals, and published sermons are analysed to understand how institutional structures and doctrinal stances shape practices. This documentary data provides a backdrop against which the empirical data interviews and observations are interpreted.

Data Integration and Analysis

The methodology chapter describes how the multiple data types are triangulated to build a cohesive picture. For example, primary data from interviews and observations are thematically coded and compared with the insights drawn from secondary literature. This process ensures that the research captures both the lived experiences (the "what" and "how") and the theoretical underpinnings (the "why") of disability inclusion within Nigerian Pentecostal churches in the diaspora.

Study population

Nigerian Pentecostal churches in Europe have grown significantly over the past few decades, driven by migration, missionary efforts, and the global expansion of African Pentecostalism. Nigerian Pentecostalism gained momentum in the 1970s and 1980s, with churches like the Redeemed Christian Church of God, Deeper Life Bible Church, and Living Faith Chapel leading missionary efforts. By the 1990s, Nigerian Pentecostal churches began establishing branches in Europe, particularly in the United Kingdom, the Netherlands, and Germany, as part of a broader reverse mission, bringing Christianity back to the West. The RCCG, one of Nigeria's largest Pentecostal movements, expanded aggressively across Europe, setting up congregations in major cities. Nigerian Pentecostal churches became spiritual and social hubs for African migrants, offering community support, cultural continuity, and religious identity.¹⁰⁰

¹⁰⁰ Adenekan-Koevoets, Nigerian Pentecostal Diasporic Missions, pp.427-447

Participants for this research were chosen from Nigerian Pentecostal churches in the Netherlands, such as RCCG Netherlands Mission Den Haag, Winners Chapel International Amsterdam based on their relevance to the study's themes and their ability to provide diverse perspectives. Sampling ensures representation from leadership, families, community, advocacy, and lived experience. The church leaders, the families of people with ID, members of the congregation and advocates of PID were chosen as participants because:

Mason advocates for purposive, in-depth sampling methods that prioritise "information richness" over statistical representativeness. She emphasizes that qualitative sampling should deliberately include participants who have the most to contribute to understanding the phenomenon under investigation.¹⁰¹ This approach ensures that the selected cases illuminate the nuances and complexities of the issue, the church's inclusivity of people with intellectual disabilities.

- Church Leaders: church leaders are crucial decision-makers, selected not for numerical representation but for their pivotal roles. Their insights are vital for understanding the formulation and implementation of doctrines, particularly regarding disability inclusion.
- Families of People with Intellectual Disabilities: these families are essential, as they
 provide firsthand accounts of how church practices affect them. Their lived experiences
 shed light on support systems and how policies impact community belonging.
- Members of the Congregation: Congregation members align with Mason's approach of capturing diverse perspectives. Their grassroots insights reveal the day-to-day realities of church integration efforts, contrasting top-down influences from leaders with communal experiences of inclusion or exclusion.
- Advocates: Incorporating advocates adds an external perspective that can critique church practices often taken for granted. Mason's purposive sampling effectively selects knowledgeable individuals who are invested in the cause, enriching the study with critical insight.
- Voices of People with Intellectual Disabilities: The direct perspectives of people with intellectual disabilities are vital. Tailoring interview questions to their communication styles ensures their voices are authentically represented. Mason emphasizes that qualitative research benefits from varied viewpoints, strengthening the narrative of inclusivity.

Participant Recruitment and Sampling Strategy

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¹⁰¹ Mason, Qualitative Researching, p. 54

Following Mason's perspective in *Qualitative Researching*, the researcher has deliberately sought out participants who can contribute deep, context-rich insights into the church's approach to inclusivity for people with intellectual disabilities. Rather than emphasizing statistical representativeness, this purposive sampling strategy focuses on gathering diverse viewpoints through information-rich cases, thereby enhancing the overall quality of the study.

Study Sample:

A total of 7 participants were engaged, representing a wide array of stakeholder groups:

- Church Leaders (n = 2)
- Families of People with Intellectual Disabilities (n = 2)
- Members of the Congregation (n = 1).
- People with Intellectual Disabilities (n = 2).

Data Collection Approach:

Initially, 7 participants will engage in semi-structured interviews. This flexible format allows for both consistency (through a semi-standardized set of questions) and the opportunity to probe deeper into emergent themes. The rich data from these interviews serves as a foundation for focus group discussions, enabling a more nuanced exploration of the issues across different perspectives.

Recruitment Process:

Initial Outreach:

The researcher has established contact with Pentecostal church leaders and key disability advocates to assess their willingness to participate.

Community Networks:

Families with lived experience of intellectual disabilities have been identified through existing church networks. This approach ensures that the sample incorporates voices directly affected by, and intimately involved in, the study's focal concern.

Research Instrument

This research involves interviewing participants using 3 key questions and sub-questions to explore the convictions and practices of pastors, members, and families of people with intellectual disabilities. The goal is to gather insights that guide a subsequent focus group, where diverse viewpoints and interactions were observed. During the interviews, note was maintained for personal impressions. The focus group aims to clarify areas needing further exploration, allowing participants to reflect on preliminary findings, challenge insights, and foster dynamic discussions.

By engaging participants with initial discoveries, the focus group seeks to refine understanding and ensure that findings accurately reflect their experiences. This process enriches the research by promoting critical dialogue and recognizing participants as co-creators of knowledge. Initial observations of Nigerian Pentecostal churches served as a foundational step to familiarize myself with the context, providing essential background that informs the analysis of themes and experiences shared by participants.

Data Analysis

Qualitative data was analyzed using thematic coding to identify recurring patterns, themes, and tensions. Thematic exploration combining descriptive, emotion, values, and pattern coding is effective for this research. ¹⁰² In addition to individual interviews, focus groups were conducted to explore collective perceptions of disability within Nigerian Pentecostal churches. These discussions provided insights into shared experiences and highlighted group dynamics influencing theological and cultural beliefs. Observational insights provide context to interpret participants' narratives. Detailing the different types of data, the transcription and coding processes, and demonstrating how the four coding types were applied below.

Types of Data and Data Preparation

Data Sources:

- Recordings: The primary data are audio recordings from semi-structured interviews and focus group discussions. In addition, observational field notes gathered during the sessions provide supplementary insights.
- Transcripts: All audio recordings have been transcribed verbatim. This ensures that
 every word and nuance is captured. Transcripts serve as the main basis for textual
 analysis, while field notes are used to contextualize the narratives.

Data Scope:

 Coding Coverage: In line with a comprehensive qualitative analysis, the entire body of text has been coded rather than just selections. This exhaustive approach helps ensure that all emergent themes, tensions, and subtleties are identified.

Coding Strategy and Order

¹⁰² Saldana, The coding, p.175

I combine four types of coding, descriptive, emotion, values, and pattern coding, to capture both the explicit content and the underlying sentiments and values expressed by participants. The process is largely inductive, letting themes emerge from the data, though informed by the conceptual framework suggested by Saldana.¹⁰³ Here's the general sequential process:

Descriptive Coding:

- Objective: Label the basic "what" of the data, the topics, activities, or events described.
- Activity: Read through the transcript and mark segments that indicate specific actions, events, or straightforward descriptions.

Emotion Coding:

- Objective: Capture the affective tone and the feelings communicated by the participants.
- Activity: Identify words or expressions that reveal the participants' emotions (e.g., "lonely," "overlooked," or "rejected") to clarify the emotional undercurrents in the narrative.

Values Coding:

- Objective: Highlight the values, beliefs, or attitudes underlying the statements.
- Activity: Tag segments that carry implications about what is seen as important (e.g., "belonging," "inclusivity," or "community acceptance"). This step helps us understand the participants' motivational and normative frameworks.

Pattern Coding:

- Objective: Synthesize the initial codes into broader themes and categories.
- Activity: Group together similar descriptive, emotional, and value-based codes to identify patterns (such as recurring issues of exclusion, marginalization, or systemic neglect).

Integration and Iterative Refinement

Coding Order: Although the steps are presented sequentially (descriptive → emotion → values → pattern), in practice, these coding types are often applied iteratively. Early descriptive codes help highlight emotional cues or values that may warrant additional descriptive detail, and as new insights emerge

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¹⁰³ Ibid

- Data-Driven and Theory-Informed: The initial coding is largely inductive, allowing these
 themes to surface naturally, while the guidance from Saldana provides a structure that
 helps ensure consistency and depth across cases.¹⁰⁴
- Software and Manual Coding: Qualitative data analysis software NVivo assists in this
 iterative process by allowing researchers to tag segments with multiple codes and then
 group and analyse these codes systematically.

Conclusion

This comprehensive data analysis strategy, which incorporates multiple coding types, ensures that both the overt content and the deeper emotional and value-laden dimensions of the participants' narratives are captured. The use of inductive coding, informed by existing frameworks, guarantees that no significant detail is overlooked and that emergent themes such as exclusion or a lack of belonging are methodically identified.

Ethical clearance /Consent form

This ethics section is designed to assist in understanding the underlying principles and issues involved in the conduct of research in an ethical manner. These principles apply to a wide variety of settings. The study will adhere to the Helsinki Declaration, the Code of Ethics for Research in the Social and Behavioral Sciences, and the VSNU Netherlands Code of Conduct for Research Integrity.

Participants are informed of their right to withdraw at any time without consequences, and all data will be anonymized and securely stored in compliance with GDPR regulations.

Written consent was obtained from PTHU to obtain permission from the prospective subjects to participate in this research. Every participant received an informed consent form to complete.

Informed consent is a method of ascertaining the voluntary consent of the subjects to participate in the research after having been fully informed about the purpose of the proposed research, their role, risks, and their right to give consent to participate in the research and to voluntarily share private information before them being included in the research. The researcher explained the following in the informed consent letter:

• The nature of the research is academic.

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¹⁰⁴ Saldana, The coding, p.176

- What was expected of them?
- The benefits of the research.
- The expected duration of their participation.
- The confidentiality levels.
- Information on how the outcomes of the research would be dealt with.
- They have the right to withdraw from the study for any reason at any stage without reprisal.

The purpose of this consent was to provide full information on the research and what their participation would mean for them. The researcher contacted the participants after they had been identified by the gatekeepers who were assigned to assist the researcher. Between the provision of information and obtaining consent, the participants were granted sufficient time to consider whether to consent and to ask questions.

Data Management Plan and Declaration Sheet

The researcher has obtained a data management plan and a Declaration Sheet. The DMP, compiled in the initial research phase, outlines how data will be collected, stored, and managed ethically and securely. An approved DMP (co-signed by the supervisor) is submitted in the final meeting. The interviews will be audio-recorded with a digital recorder to ensure the accurate reproduction and processing of the data. The data management declaration sheet is under the Appendix.

3.3. Research Challenges and Methodological Reflections

3.3.1. Difficulty in Finding Participants with Intellectual Disabilities

One of the most significant challenges was locating people with mild intellectual disabilities who attend Nigerian Pentecostal churches in the Netherlands. Many congregations do not have visible or openly acknowledged members with ID, and in some cases, church leaders were unaware of any such individuals within their community.

Response:

To address this, the researcher travelled to multiple NPC congregations across different cities in the Netherlands, engaging directly with pastors and church networks to inquire sensitively about the presence of people with ID. This involved extensive networking, multiple visits, and building trust within each community before identifying suitable participants.

3.3.2. Scheduling Interviews Amid Busy Lives

Another challenge was the availability of participants, particularly families of people with ID and caregivers, many of whom juggle demanding work schedules and caregiving responsibilities. For church leaders and parents alike, weekday availability was extremely limited, and interviews could only be arranged before or after church services, when participants were often tired or pressed for time.

Response:

The research schedule was adapted to fit around church calendars and participants' convenience. Most interviews were conducted on Sundays, with the researcher arriving early before services or staying afterwards to speak with individuals in short sessions. In some cases, brief follow-up conversations were arranged through WhatsApp or phone calls, with consent.

3.3.3. Variability in Church Demographics

Not all churches visited had congregants with ID. In some cases, churches expressed interest in the study but noted they did not currently serve any individuals with intellectual disabilities, which narrowed the potential participant pool.

Response:

The researcher focused on churches that had existing connections with families affected by ID, even if only one or two members. These smaller but valuable interactions provided deep insight into the lived experiences and theological contexts of inclusion and exclusion.

Effectiveness of the Approach

Despite these challenges, the adaptable, qualitative approach proved effective. By remaining flexible and responsive to real-world limitations, the research was able to:

- Prioritize ethical participation and consent.
- Capture authentic, context-specific insight.

The intentional focus on mild intellectual disability within diasporic Pentecostal settings remains a rarely explored area, making this study a valuable contribution, even with a modest sample size, because of its depth of theological reflection and its commitment to centering marginalised voices.

Conclusion

This chapter outlines the comprehensive qualitative methodology employed to explore how Nigerian Pentecostal churches in the Netherlands engage with people with intellectual disabilities. By adopting Osmer's model of practical theology, this research was structured to investigate not only current practices and convictions (descriptive-empirical) but also the underlying influences (interpretive) and theological ideals (normative). The combination of semi-structured interviews, focus groups, and participant observation allowed for a nuanced, multidimensional understanding of inclusivity in these religious communities.

The purposive sampling strategy, informed by Mason's emphasis on "information-rich" cases, enabled the inclusion of diverse voices, from church leaders, congregants, families and people with intellectual disabilities themselves. The use of thematic coding, drawn from Saldana's framework, provided a robust tool for analyzing the emotional, value-driven, and patterned dimensions of the data. The ethical framework and data management strategies ensured that all aspects of the research were conducted with integrity, transparency, and respect for participant autonomy.

Despite the challenges of recruitment and scheduling, the adaptive approach and sustained community engagement enabled the collection of deep, context-specific insights. The methodology thus not only supports the study's objectives but also aligns with its broader theological commitment to inclusion and justice. This approach lays a strong foundation for interpreting the lived experiences of marginalized individuals within faith communities and contributes meaningfully to the discourse on disability theology in diasporic African contexts.

Having established the methodological framework for this study, including the rationale for using a qualitative approach, the data collection methods, and the analytical strategies employed, I will now present the empirical findings. The following chapter explores the lived experiences, theological reflections, and practical realities discovered through interviews, focus groups, and observations conducted within Nigerian Pentecostal churches in the Netherlands. The findings are organized thematically, guided by the research questions and informed by the descriptive, interpretive, and normative tasks identified in the existing literature. These themes reflect the diversity and complexity of perspectives on intellectual disability and inclusion within diasporic faith communities.

CHAPTER FOUR- EMPIRICAL RESULTS AND ANALYSIS

4.1. Introduction

This chapter presents empirical results and analyzes data gathered through semi-structured interviews and participant observations conducted in selected Nigerian Pentecostal churches in the Netherlands. The chapter is structured using the first tasks of Osmer's four-task model of practical theology, the descriptive-empirical.¹⁰⁵ These tasks serve as a framework for data collection in a theologically informed and context-sensitive manner.

Pentecostal churches are powerful religious spaces where the Holy Spirit, healing, and spiritual warfare are central to worship and theology. Yet, within this framework, the inclusion of people with intellectual disabilities is misunderstood. Disability theology challenges these communities to view people with disabilities not as problems to be solved or healed but as full participants in the life of the church. This chapter explores Nigerian Pentecostal churches' current convictions and practices toward people with disability in the Netherlands. The question about their convictions and practices is answered particularly in practices towards disability; are they resisting or adapting to the inclusive faith communities in the Netherlands? The findings from interviews and the experiences of people will be analyzed.

4.2. The practices within Nigerian Pentecostal churches in the Netherlands

The experiences of people with intellectual disabilities in Nigerian Pentecostal churches in the Netherlands are shaped by a complex interplay of theological beliefs, cultural attitudes, and diaspora dynamics. Observations conducted in four Nigerian Pentecostal churches located in Amsterdam, Wageningen, and Den Hague revealed a significant lack of inclusion programs for people with intellectual disabilities within their services and general programming. Towards the end of services, prayers were offered broadly for "anyone in need of prayer," but there were no specific accommodations or efforts to include people with intellectual disabilities in a meaningful way. This pattern suggests that many Nigerian Pentecostal churches in the Netherlands may be unintentionally resisting the development of disabilities theology of inclusive faith communities.

Notably, one of the research participants was in the service with her daughter, who has been diagnosed with mild autism. The lady was accompanied by her mother to join the queue for prayer. This experience highlights a common trend in which disability is approached through healing prayers, rather than through intentional inclusion or support within church life.

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¹⁰⁵Osmer, Practical Theology, p.8

The interview that followed these observations provided deeper insight into the experiences of families and individuals navigating these church environments.

Empirical data offers insights into the challenges and possibilities of inclusion. The questions were answered by applying qualitative research. According to Swinton, qualitative research is empirical research that produces empirical knowledge.

Empirical research is a method of investigation that generates new knowledge based on experiences and data collected through our senses. A study is considered empirical when it relies on real-world evidence gathered through experimentation, statistical analysis, or observation to explore its chosen topic.¹⁰⁶

To know the convictions and practices of people with disability within Nigerian Pentecostal churches in the Netherlands, the interview was used to generate what needs to be known in the light of disability theology of inclusive faith communities. To gather this information, an interview was conducted with church leaders, church members, and families of people with intellectual disabilities and PID. The focus group proceeded after the interview; the interview laid the foundation for the open dialogue. I seek to develop a deeper understanding of the conviction and practice of inclusion of people with intellectual disability within Nigerian Pentecostal churches in the Netherlands. The aim is to examine the current convictions and practices within Nigerian Pentecostal churches in light of the disability theology of inclusive faith communities.

4.3. Result

This initial step involves a systematic description of the raw interview data. It centers on summarizing participants' responses to key sub-questions in three thematic areas:

- Theological View: How do you think God views people with intellectual disabilities? what Bible stories shape your God's view on PID. How do you envision God's relationship with PID prompt participants to reveal their personal spiritual identity and experiences.
- Cultural Viewpoints: How does your culture perceive people with intellectual disabilities?
 What are the traditional beliefs and names that exist concerning PID. The personal feelings elicited by such labels provide a window into the cultural context.

¹⁰⁶ Swinton, John, Empirical research, theological limits, and possibilities. In P. Ward & K. Tveitereid (Eds.), The Wiley Blackwell companion to theology and qualitative research (pp.84). John Wiley & Sons. 2022.

Church and Inclusion: In what ways does your church include people with intellectual

disabilities? Are there policies, services, or programs designed for People with intellectual

disability? What does inclusion mean within your church community? it detailed insights

into how individuals experience community and inclusion during worship.

The processed data are presented below as the outcome of the systematic analysis and coding

process, which employs thematic summaries to capture the essence of the participants'

meanings. Group A participants were interviewed using a set of questions addressing three

research sub-questions. The first question focused on elucidating the participants' theological

views on intellectual disability. For coding the findings in this research, I used manual thematic

patterns, which enabled systematic application of descriptive, emotion, values, and pattern

coding, and facilitated thematic mapping and visualisation of data relationships.

Application of Pattern Coding in Data Analysis

This study employed pattern coding as a second-cycle coding method to identify overarching

themes across participant narratives. The first-cycle methods helped break down individual

responses into meaningful components, enabling a granular understanding of perspectives on

disability, theology, and inclusion.

Once these first-level codes were established, pattern coding was used to synthesize recurring

ideas across all participant narratives, rather than isolating patterns within individual accounts.

This approach helped uncover shared theological, cultural, and social influences shaping

perspectives on intellectual disability in Nigerian Pentecostal churches.

By employing pattern coding at a collective narrative level, this study uncovered systemic

influences rather than individual variations, contributing to a deeper contextual understanding of

why resistance toward inclusive faith communities persists within Nigerian Pentecostal churches

in the Netherlands.

The responses: beliefs about prayer for healing were consistently linked to theological and cultural

influences. The raw data (transcript data) and the full report of the findings analysis are included

in the appendix.

The analysis of participants' responses to question 1 is presented below. The descriptive,

emotion, value, and pattern were coded systematically. The full report of the questions and

analysis can be found in the appendix.

Analysis of GROUP A Participants' Responses:

Question 1: How Does God View People with Intellectual Disabilities?

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Descriptive Coding – Identifying Core Narratives

- Belief Statements:
 - "God loves everyone equally, without exception." (A001)
 - o "God sees, honours, and includes them in His redemptive work." (A001)
 - o "God does not see the disability first. He sees the person." (A004)
 - "Jesus sees, touches, affirms, and includes." (A003)
- Biblical References:
 - o John 9:1–12, Healing the man born blind to reveal God's works (A001)
 - Exodus 3:7, the God who hears the cry of the oppressed (A003)
 - o Luke 14:1–24, the Great Banquet—God's invitation to the marginalized (A005)
- God's Relationship with PID:
 - Deep, loving, purposeful presence, not pity (A003)
 - o God instils unique light and purpose (A004)

Emotion Coding – Capturing Sentiments and Conviction

- Gratitude & Recognition: "Thank you for raising this important point." (A001)
- Compassion: Participants express empathy for children/adults with ID (A004, A003)
- Frustration & Sadness: Regarding past misunderstanding and societal treatment (A002, A004)
- Hope & Assurance: Belief that God's view is restorative and inclusive (A001, A005)

Values Coding – Ethical and Spiritual Priorities

- Equality & Dignity: God's view is not ability-based; all are His children (A001, A004)
- Sacred Worth: Every person is valued (A003)
- Scriptural Authority: Reframing disability using scripture (A001, A005)
- Divine Purpose: Disability as part of God's redemptive story (A003, A004)

Pattern Coding – Emergent Themes

- Unconditional Divine Love: God sees worth and purpose beyond ability.
- Scriptural Reframing: From punishment to purpose (esp. John 9; Luke 14).
- Image of God in Disability: Children with disabilities reflect God's light.

Conclusion: Synthesized Insights

This analysis reveals that participants across roles, church leaders, members, and caregivers, hold an increasing awareness of the need for theological inclusion of people with intellectual disabilities. The most prominent theological themes include God's Unconditional Love, Biblical correction of stigma, and the Church's call to transformative Inclusion. However, cultural stigma remains deeply entrenched and often infiltrates church settings. Participants express hope, frustration, and a strong moral vision for change through education, theology, and action.

The comparative chart below summarises the responses of Participants A001–A005, using four coding categories, Descriptive, Emotion, Values, and Pattern, to organise the three main research questions.

Table: Comparative Chart

Question	Coding Type	A001 (Church Leader)	A002 (Church Member)	A003 (Church Leader)	A004 (Caregiver)	A005 (Church Member)
1. How Does God View PID?	Descri ptive	God loves all equally; references John 9:1- 12	Experience- based shift in theology; God loves all	God is present, purposeful , not pitying	God sees the soul first, not disability	Luke 14: God's kingdom includes all
	Emotio n	Gratitude, conviction, empathy	Regret, growth, compassion	Reverenc e, conviction	Love, clarity, maternal insight	Frustrati on, hope
	Values	Equality, dignity, scriptural truth	Divine love, understandin g	Purposeful inclusion, God's closeness	Sacred worth, divine pride	Respect, inclusion , sacred identity
	Pattern	Divine inclusion, biblical reinterpret ation	Theology evolved through exposure	God embraces those the world overlooks	Disability is not flaw but divine light	PID as contribut ors to God's banquet
2. Cultural Views of PID	Descri ptive	Misconcep tions as curses or witchcraft	Misundersta nding, demeaning names	Cultural names persist in church	Punishment beliefs, misundersta nding	Languag e = violence; lack of moral awarene ss
	Emotio n	Concern, disappoint ment	Regret, awakening	Disapprov al, urgency	Pain, insight, anger	Pain, demand for justice
	Values	Truth vs. myth, dignity	Need for awareness & truth	Correct cultural misconcep tions	Protection, compassion	Denoun cing stigma, promotin g reform

	Pattern	Culture harms dignity; church must respond	Cultural lens distorts theology	Churches replicate cultural names	Enlightenme nt through diagnosis	Church silence mirrors society
3. Church & Inclusion	Descri ptive	No formal policy but growing awareness	General welfare, no PID-specific care	Inclusion = active participati on	Inclusive vision; training needed	Full participa tion, not tokenis m
	Emotio n	Hopeful, reflective	Frustrated, realistic	Visionary, determine d	Passionate, Christ-like urgency	Bold, determin ed, visionary
	Values	Reflect divine love in policy	All deserve respect	Remove exclusion barriers	Christlike embrace, equity	Participa tion, not pity
	Pattern	Church as mirror of God's heart	Inclusion currently vague	Barrier removal needed	Inclusion = active discipleship	From "pray for" to "walk with"

Table 1: Summary of themes of participants

Summary

Theological Views:

All participants affirm a vision of divine love that transcends physical or intellectual limitations, yet they articulate this view through various scriptural and personal lenses. Church leaders (A001, A003) often draw on biblical narratives, while church members (A002, A005) and the caregiver (A004) highlight personal transformation and the need for contextual understanding.

Cultural Perceptions:

Participants consistently critique culturally ingrained negative labels and misconceptions, whether these come from society at large or subtly persist within church settings. This cultural critique is pivotal in understanding the barriers to genuine inclusion.

Visions for Inclusion:

Despite differing roles, each response advocates for a shift toward proactive and meaningful

inclusion, with practical suggestions such as adapting worship, training leadership, and removing both overt and subtle exclusionary practices.

Emergent Themes: Broadly, the data converges on themes like transformative reinterpretation of scripture, the rejection of stigma through divine empowerment, and an urgent call for the church to translate its theological commitments into tangible, inclusive practices.

The following table presents a summary of recurring themes (Pattern) observed across the responses of all participants.

Common Patterns Among Participants

Theme	Common Patterns Among Participants
Theological Views on	-All participants affirm that God loves people with intellectual
Intellectual Disability	disabilities.
	-Many reference Bible stories to support this view (e.g., John
	9, Luke 14).
	-They emphasize inclusion and dignity, stating that disability is
	not a punishment.
Cultural Perceptions of	-Intellectual disability is often misunderstood in Nigerian
Intellectual Disability	culture.
	- Many describe negative beliefs associating it with curses,
	punishment, or witchcraft.
	- Participants mention demeaning names and stigma that
	persist in society and sometimes in churches.
Church Inclusion of People	- Most churches do not have formal policies or programs for
with Intellectual Disabilities	inclusion.
	- Some churches provide welfare support but do not focus
	exclusively on people with intellectual disabilities.
	- Several participants emphasize the need for deeper inclusion,
	beyond prayers and charity, through participation in the church
	community.

Table 2. Common Patterns Among Participants

These patterns reflect a strong consensus on the importance of inclusion, while also highlighting cultural challenges, theological misconceptions, and gaps in church policies.

The group B interview and the findings are explored below using the same coding method to analyse the findings and tables to group the reports.

PARTICIPANT GROUP B (PID)

This analysis focuses on the findings from Group B, which consists of people with intellectual disabilities. I used four types of coding: descriptive, emotional, values-based, and pattern coding. The analysis examines three key topics: Theological Views, Nigerian Cultural Perspectives, and Church Inclusion. Then synthesize the responses from Participant B001 and Participant B002 to illuminate both the explicit content of the interviews and the deeper meanings conveyed by the participants. This process addresses the three main research questions.

Analysis of GROUP B Participants' Responses (People with Intellectual Disabilities)

Main Question 1: Theological Views – "How Do You Think God Views You?"

Descriptive Coding – Identifying Core Narratives

Participant	Key Statements
B001	"I know God loves me because I am special." "God is my Father in heaven who loves me."
B002	"Special people have a special place in God's heart." "Jesus loves everyone, no matter what." Mentions of Moses having struggles.

Table 3: Descriptive Code

Emotion Coding – Sentiments and Convictions

Participant	Emotional Tone
B001	Warmth, joy, comfort in divine love
B002	Reassurance, trust, affection toward God shaped by parental nurturing

Table 4: Emotion code

Values Coding – Ethical and Spiritual Priorities

Participant	Core Values
B001	Feeling "special" as a divine truth, not just a social label

B002	Emphasis on biblical affirmation, familial spiritual teaching, God's unconditional	
	love despite struggles	

Table 5: Value code

Pattern Coding – Emergent Themes

- Divine Love & Affirmation: Both participants deeply internalize the idea that God's love is unconditional and affirming, often rooted in family narratives.
- Special Status as Spiritual Identity: The term "special" is embraced positively, unlike in some cultural uses where it is derogatory.

Question 2: Nigerian Cultural Views on Disability

Descriptive Coding – Cultural Perceptions

Participant	Cultural Insights
B001	"My mother said we left Nigeria because of my disability." "People over there
	didn't understand it."
B002	"I don't really know what it's like in Nigeria." "My mother is Nigerian people
	here [Netherlands] understand my disability better."

Table 6: descriptive code

Emotion Coding – Expressed Sentiments

Participant	Emotional Tone
B001	Uncertainty, but with a sense of past rejection or discomfort
B002	Security, contrast between Nigerian and Dutch context; comfort in
	understanding environment

Table 7: Emotion code

Values Coding - Ethical and Cultural Priorities

Participant	Core Values
B001	Importance of understanding and acceptance
B002	Appreciation for inclusion, awareness, and cultural sensitivity

Table 8: Value code

Pattern Coding – Emergent Themes

- Migration as Escape from Stigma: B001's family migrated to avoid cultural rejection disability misunderstood in Nigeria.
- Diaspora Experience Shapes Identity: Both participants are more shaped by their current inclusive environments than by traditional Nigerian cultural norms.

Main Question 3: Church and Inclusion

Descriptive Coding – Church Practices and Experiences

Participant	Church Insights
B001	"We sing and dance together, and that makes me happy." "I don't like it when the
	pastor prays and people touch me."
B002	"I like going with my family." "My mother believes God can heal me."

Table 9: Descriptive code

Emotion Coding – Sentiment and Reactions

Participant	Emotional Tone
B001	Joy in shared worship; discomfort with physical prayer rituals
B002	Peace and belonging; hopeful through mother's faith

Table 10: Emotion code

Values Coding – Inclusion Ideals

Participant	Core Values
B001	Consent, safety, joyful participation
B002	Hope, familial belonging, spiritual comfort

Table 11: Value code

Pattern Coding – Key Themes

• Inclusion Through Joyful Participation: Worship that involves singing, dancing, and eating together is meaningful and affirming.

- Mixed Experience of Prayer: While community care is appreciated, practices like laying on hands during prayer may feel intrusive (B001).
- Family as Faith Mediator: Parents, especially mothers, serve as interpreters of faith and emotional anchors in the church experience.

Conclusion: Key patterns from Group B

Cross-Cutting Patterns	Explanation
God's Love is Internalized as Identity	Both participants confidently identify as loved and "special," viewing their relationship with God through affection and trust.
Culture of Origin as Site of Stigma	B001's family left Nigeria due to negative perceptions; both participants contrast that with more accepting environments in the Netherlands.
Inclusion Must Be Respectful, Not Overbearing	Worship is meaningful when relational and joyful, but intrusive rituals (like being touched during prayer) can feel uncomfortable.
Family Faith Transmission is Key	Parents, especially mothers, play a central role in shaping participants' theology and sense of self-worth.

Table 12. Patterns code

Interpretation:

The overall pattern reveals that while church is generally viewed as a nurturing space that fosters communal joy and belonging, there is a critical need to balance ritual practices with respect for personal boundaries. The influence of family in shaping these perceptions is also a consistent thread.

The comparative synthesis of common themes and key differences between Group A (church leaders, members, caregivers) and Group B (people with intellectual disabilities)

4.4. Thematic Comparison Across Groups A & B

Main Question 1: Theological View – How Does God View People with Intellectual Disabilities?

Common Themes	Differences
God's love is unconditional and	Group A uses scriptural interpretation (e.g., John 9, Luke
not based on ability.	14) and theological reasoning to defend inclusion.

Disability does not equate to	Group B expresses belief in God's love in personal,
divine punishment.	emotional, and relational terms ("God loves me because I
	am special").
God's relationship includes	
purpose, dignity, and belonging.	Group B relies more on parental influence (especially
	mothers) to form their theology.

Table 13: Comparison of Groups

Main Question 2: Nigerian Cultural Views on Intellectual Disability

Common Themes	Differences
Nigerian culture is often negative,	Group A provides detailed cultural critique, naming
superstitious, or stigmatising toward	specific terms (e.g., <i>didirin</i> , <i>onye ara</i>) and
intellectual disability.	emphasizing the church's complicity or silence.
Common use of harmful names and	Group B (B001) reports migration due to stigma but
misconceptions tied to curses or	lacks specific cultural terms or experiences due to
witchcraft.	leaving Nigeria early.
	Group B sees the Netherlands as a place of greater
	acceptance and understanding.

Table 14: Comparison of groups

Main Question 3: Church and Inclusion

Common Themes	Differences
The church is seen as having a	Group A critiques the lack of formal policies but
responsibility to include people with	highlights a growing theological vision for inclusion
intellectual disabilities. There is a desire	(e.g., removing barriers, equipping leaders).
for meaningful participation in worship	Group B values inclusion through experiential joy
and community.	(singing, dancing, sharing meals).
	B001 expresses discomfort with overbearing
	healing rituals, which Group A mostly interprets
	positively or without critique.

Table 15: church and inclusion

The contrast between Group A and Group B reveals a gap between theological ideals and lived experiences. While leaders emphasize healing and doctrine, people with intellectual disabilities seek belonging beyond prayer. This disconnect highlights the need for churches to shift from passive care to active inclusion, ensuring dignity and participation.

Cross-Group Meta-Themes (A & B)

Meta-Theme	Explanation
Unconditional Divine	Both groups agree that God's love is not limited by ability. Group A
Love	articulates this theologically; Group B affirms it personally.
Scripture vs. Story	Group A uses scripture to reframe views on disability. Group B
	emphasizes lived stories and maternal teachings as faith-shaping.
Cultural Harm and	Cultural rejection in Nigeria leads to either advocacy (Group A) or
Migration	migration (Group B), showing different responses to stigma.
Church Inclusion Must	Group A calls for policy and theological inclusion; Group B highlights
Be Holistic	emotional safety, joy, and autonomy in church spaces.
	A key divergence: Group B's discomfort with unsolicited
Healing as Harmful?	prayer/touching introduces a critique rarely acknowledged in Group
	A.

Table 16: Cross-Group Meta-Themes A & B

Summary of Key Differences

Group A (Leaders, Members,	Group B (People with ID)
Caregivers)	
Theologically articulate, scripturally grounded	Emotionally expressive, relationally grounded
Advocates for structural/institutional reform	Emphasizes personal experiences of joy or discomfort
Analyzes stigma in detail	Often shielded from direct cultural experiences (esp. those raised abroad)
Sees prayer as care and inclusion	May perceive prayer rituals as intrusive or uncomfortable

Table 17: Thematic synthesis in a comparative chart

Conclusion

The findings and analysis reveal a multifaceted understanding of theological views, cultural perceptions, and church inclusion for people with intellectual disabilities. The thematic insights highlight key areas where personal faith, societal narratives, and institutional practices intersect, shaping participants' experiences and identities.

The theological perspectives emphasized divine love and unconditional acceptance, with family members playing a crucial role in shaping participants' spiritual understanding. This emotional connection to God reinforced a sense of dignity and belonging, underscoring the importance of inclusive theological narratives.

Cultural viewpoints revealed a detachment from Nigerian stigma, either through migration or protective family intervention. Participants consistently contrasted negative societal attitudes with the more inclusive environment found in the Netherlands, suggesting that physical and social displacement had contributed to their well-being.

Church inclusion was perceived as positive, with participants valuing communal worship and fellowship. However, concerns about invasive prayer practices and physical touch highlighted the need for greater sensitivity and respect in spiritual interactions. The emergent themes collectively advocate for a transition from passive acknowledgment to active inclusion, emphasizing dignity, respect, and participatory engagement.

4.5. Observation During Church Visit

During church visits, the emphasis on healing through prayer closely mirrored interview findings, where leaders prioritized divine intervention over structured inclusion. The absence of disability-focused programs reinforced testimonies of exclusion, highlighting theological barriers. The contrast between physical accessibility and limited participation underscores the need for intentional integration beyond healing narratives. In my visit to these churches, I observed a lively and faith-filled environment where worship was central. A notable aspect of the service was the call for individuals in need of healing or breakthrough to come forward for prayer. This included people who may have had visible or assumed disabilities. While this demonstrated the church's commitment to spiritual care, it also reflected a healing-centered approach, where disability was viewed as something to be fixed rather than embraced.

Although the physical structure of the church was accessible, featuring ramps and seating space for people with mobility challenges, this accessibility did not extend into the social or liturgical life of the congregation. This visit confirmed many of the interview findings from Groups A and B.

While there is genuine compassion and good intentions, there is also a lack of theological clarity and practical implementation for inclusive worship. The focus on healing often overshadows belonging.

Real inclusion requires reimagining church life, from physical access to leadership roles, so that people with intellectual disabilities are not just the objects of prayer but co-participants in the worship and mission of the church.

The experience echoed findings from my interviews: the church's theology may affirm divine love for all, but practical inclusion is still lacking. For people with intellectual disabilities to be fully included, churches must go beyond prayer lines and ensure intentional participation, representation, and support within the community.

4.6. Focus Group Result

The primary goal of the focus group was to engage church leaders, caregivers, people with intellectual disabilities, and church members in a reflective discussion on the inclusion of people with intellectual disabilities within Nigerian Pentecostal churches in the Netherlands. The meeting aimed to deepen understanding of theological and cultural convictions surrounding disability, identify barriers to inclusion, and explore potential pathways for change. The raw transcript of the focus group dialogue is in Appendix V.

The following points are clarified and explored to establish the barriers to the inclusion of people with intellectual disability in Nigerian Pentecostal churches in the Netherlands.

- Challenges to Inclusion Participants discussed the tension between acknowledging God's love for all people and the persistent lack of practical inclusion. Hierarchical structures were identified as a significant barrier, with church leaders citing a lack of policy direction from headquarters.
- Stigmatizing Language The group examined the use of harmful cultural labels such as
 "ode," "abirun," and "didinrin," reflecting the deep-rooted societal stigma that often
 influences church attitudes toward intellectual disability.
- Exclusion and Hidden Identities Participants shared experiences of families hiding children with disabilities due to shame and fear of social stigma, especially in Nigerian contexts, where disability is often misunderstood.
- Healing-Centric Theology vs. Inclusion The discussion highlighted how Pentecostal healing theology sometimes prioritizes deliverance over practical inclusion, leading to exclusion when healing does not occur.

• Structural and Educational Gaps – Participants emphasized the need for church-led education and training to foster understanding of intellectual disabilities. They advocated for leadership and youth worker training to support inclusion efforts effectively.

Results of focus groups

The focus group discussion reaffirmed that while theological convictions affirm God's love for all people, practical inclusion remains a challenge due to entrenched cultural stigmas, hierarchical barriers, and theological perspectives that emphasize healing over acceptance. Participants acknowledged that many churches lack the structural framework to accommodate people with intellectual disabilities beyond prayers and fasting.

A key takeaway was the need for intentional efforts to shift perspectives through education and theological refinement. Leaders recognized that transformation requires more than doctrinal change; it demands active participation, language reformation, and institutional policy adjustments. Additionally, personal testimonies revealed the emotional and spiritual harm caused by exclusionary practices, underscoring the urgency of fostering a more compassionate and inclusive faith community.

Summary

The focus group highlighted that inclusion must go beyond theoretical acknowledgement; it must translate into tangible, meaningful participation where people with intellectual disabilities are recognized as full members of the church, not merely subjects of prayer and healing interventions. The findings from this focus group provide a vital foundation for further exploration of empirical data, supporting the next phase of the research on lived experiences and theological engagement within Nigerian Pentecostal churches in the Netherlands.

Conclusion

This chapter has presented a rich and nuanced account of the current convictions and practices toward people with intellectual disabilities within Nigerian Pentecostal churches in the Netherlands. Drawing on the voices of church leaders, members, caregivers, and people with intellectual disabilities themselves, the findings reveal both theological affirmation and practical exclusion. Participants widely affirmed God's unconditional love and scriptural inclusion of all people, including those with disabilities. Yet, deeply ingrained cultural stigmas and a persistent emphasis on healing over belonging often hinder genuine inclusion.

While churches express compassion, their practices frequently prioritize spiritual intervention over structural accessibility, leaving people with intellectual disabilities on the margins of church life. The testimonies of those directly affected reveal a desire not merely for prayer, but for presence, participation, and dignity. The comparison between Group A (leaders and caregivers) and Group B (people with intellectual disabilities) highlights a critical gap between theological ideals and lived experiences.

This chapter underscores the importance of moving beyond healing narratives to embrace inclusive practices that affirm the full humanity and spiritual agency of people with intellectual disabilities. The findings call for intentional theological reflection, cultural transformation, and institutional commitment to foster truly inclusive faith communities. These insights lay the foundation for the next chapter, where these themes are further explored in light of disability theology and the wider implications for ecclesial transformation.

CHAPTER FIVE- DISCUSSION, SUMMARY, RECOMMENDATION AND CONCLUSION

5.1. Discussion

This research revealed a significant gap between theological belief and practical inclusion within Nigerian Pentecostal communities, particularly regarding people with intellectual disabilities. While participants widely affirmed that God loves everyone equally, this conviction rarely translated into meaningful participation for people with intellectual disabilities in church life. Most churches continue to operate within frameworks of charity, healing, and spiritual deliverance, rather than models of empowerment, inclusion, and belonging.

A critical finding was the impact of migration on how disability is perceived and managed. Families who moved from Nigeria to the Netherlands did so not only for better healthcare but also to escape cultural shame and exclusion. They found greater acceptance and support in their new context, which significantly shaped their current expectations of church inclusion. However, many still hold onto traditional theological frameworks that interpret disability through spiritual or moral lenses, showing that migration alone does not erase ingrained beliefs.

Another key implication concerns the tension between Nigerian and Western expressions of Christianity. Participants often described Western churches as "less spiritual" due to reduced practices like fasting and deliverance. Yet from a theological perspective, this shift may represent a move toward more compassionate and less harmful understandings of disability, an opportunity for liberation from stigma-laden interpretations.

Overall, the findings point to a pressing need for theological education, cultural transformation, and leadership training in Nigerian church communities and the diaspora. Inclusion must be more than a theological ideal; it must be embodied in liturgy, language, leadership, and community life. Most importantly, people with intellectual disabilities must be seen not as passive recipients of care or prayer but as active members of the body of Christ.

5.2. Interpretation of the finding

I approached this study with a critically reflective lens shaped by faith, cultural sensitivity, and academic inquiry. Through qualitative methods, interviews, church visits, and focus group discussions, it became clear that while many Nigerian Pentecostal churches profess that "God loves everyone equally," including people with intellectual disabilities, this theological conviction often fails to manifest in concrete inclusion. My church observation affirmed this disjunction:

although the physical space was accessible and the rhetoric compassionate, there was a lack of structured programming, leadership engagement, or intentional strategies for meaningful inclusion.

From a theological standpoint, I observed a tension between healing-centered spirituality and relational inclusion. Many churches still operate within a framework that views disability as something to be fixed rather than embraced. Focus group participants voiced this gap, sharing stories of exclusion, stigma, and lack of understanding, yet also a strong yearning for change.

These reflections are not just data points but theological and ethical concerns. If the church is truly to embody the inclusive love of Christ, it must move beyond charity and healing toward participation, dignity, and belonging. This research highlights the urgent need for theological education, policy development, and leadership training to reshape how churches understand and include people with intellectual disabilities.

A clear distinction emerged between the responses of Group A and Group B, revealing significant differences in perspective, experience, and expression. Group A: comprising church leaders, members, and caregivers, approached intellectual disability from an external viewpoint, shaped by theology, culture, and caregiving roles. Their reflections were often theological and analytical, highlighting issues like stigma, church policies, and the need for inclusion. They emphasized teaching, leadership training, and policy change as necessary steps toward full participation of people with intellectual disabilities in the life of the church.

In contrast, Group B: participants living with intellectual disabilities expressed their faith in deeply personal, relational terms. Their understanding of God's love was rooted in experience rather than doctrine. They valued joy, kindness, and being included in worship through singing, dancing, and shared meals. However, they also expressed discomfort with being singled out during prayer or being touched without consent, a reality rarely acknowledged by Group A.

These findings confirm trends in previous studies on religion and disability in African contexts. The belief that disability is linked to spiritual affliction or punishment aligns with research on Nigerian Pentecostal healing theology. However, this study also challenges some existing works by emphasizing the growing recognition of disability as a social, rather than purely spiritual, issue. Unlike older studies that focus solely on miraculous healing, this research highlights perspectives on dignity, inclusion, and the shift toward a theology of belonging.

5.3. Answer the research question.

The research question for this study was informed by one primary question, along with three secondary research questions aligned with Osmer's four main tasks. The responses to the primary question were addressed through associated secondary research questions that followed Osmer's practical theological research tasks. These questions are: -

- What are the current convictions and practices within Nigerian Pentecostal churches in the Netherlands towards people with intellectual disability?
- What cultural, theological, or social influences contribute to these convictions and practices within Nigerian Pentecostal churches in the Netherlands?
- What are the convictions and practices of inclusive faith communities taken from disability theology perspective?

To answer the main question of the research, the findings from each sub-question were summarized. The result and discussion of this study have explored the tension between healing and inclusion within Nigerian Pentecostal churches in the Netherlands concerning people with mild intellectual disabilities. By examining theological, cultural, and ecclesial perspectives, it has uncovered significant gaps between the conviction of divine healing and the principles of disability theology.

Focus group indicate that enhanced theological education on disability could help churches move from healing-centric practices to full inclusion. The findings highlight the need for churches to evolve their theological frameworks beyond healing as the sole indicator of spiritual vitality. An inclusion-centered approach, emphasizing belonging and mutual recognition, can promote a biblically grounded understanding of disability.

Additionally, the study points out that exposure to Western disability rights can encourage Nigerian Pentecostal churches in the Netherlands to adapt their practices. While healing is still central to Pentecostal identity, it should coexist with the theological affirmation that people with intellectual disabilities reflect God's image and contribute unique gifts to the community. By adopting a disability theology framework allows churches to prioritize belonging, valuing people with intellectual disabilities as integral members of the faith community.

With the Summaries of the findings above, I answer the research question by presenting the summaries of the sub-questions

5.3.1. What are the current convictions and practices within Nigerian Pentecostal churches in the Netherlands towards people with intellectual disability?

Nigerian Pentecostal churches in the Netherlands often approach intellectual disability through a theological framework centred on healing and deliverance. Results reveal deep theological and cultural perceptions surrounding intellectual disability within these churches. The responses show a tension between traditional beliefs, where disability is often linked to spiritual causes, and evolving perspectives influenced by exposure to more inclusive theological frameworks. While church leaders and members recognise God's love for people with disabilities, the lack of structured inclusion policies suggests that the theology of disability is still underdeveloped. These findings directly address the research question by highlighting the gap between faith-based understanding and practical inclusion. While outright discrimination is less evident in-migrant churches, full integration into church life remains limited, as people with intellectual disabilities are primarily viewed as those in need of divine intervention rather than equal participants in worship and service. This creates tension between healing and inclusion within Nigerian Pentecostal churches in the Netherlands, which struggle to balance their theology of divine healing with the necessity for full inclusion. Healing is often emphasised, but it can unintentionally marginalise those who remain disabled. This research reveals that the church provides a space for community and joy, with both participants (PID) valuing music, prayer, and fellowship. However, prayer for healing remains a complex issue; one participant dislikes being physically engaged in prayer, while the other values their mother's hope for divine healing. This suggests a tension between healing narratives and personal experience comfort.

5.3.2. What cultural, theological, or social influences contribute to these convictions and practices within Nigerian Pentecostal churches in the Netherlands?

The research highlights how Nigerian Pentecostal churches in the Netherlands navigate cultural, theological, and social influences in shaping their views and practices concerning intellectual disability. Theological beliefs rooted in Pentecostal healing narratives often frame disability as a condition to be cured rather than accepted. Many church members reference biblical passages emphasizing divine intervention, reinforcing the expectation that faith should lead to miraculous healing rather than inclusion.

Culturally, Nigerian traditions deeply influence perceptions of disability. Long-standing beliefs about spiritual affliction and ancestral curses persist, affecting how intellectual disabilities are understood within diaspora churches. Some congregants still use stigmatizing language, reflecting societal attitudes in Nigeria where disability is often linked to punishment or misfortune.

Socially, migration and exposure to European perspectives introduce alternative approaches to disability. Participants who have lived in the Netherlands for longer periods report shifts in understanding, moving from exclusion to acceptance. Dutch society's emphasis on inclusion and rights for people with disabilities contrasts with traditional Nigerian views, prompting some churches to rethink their stance. However, the absence of formal inclusion policies suggests ongoing tension between these influences. While churches offer welfare support, theological frameworks for disability remain underdeveloped, limiting full participation for people with intellectual disabilities.

5.3.3. What are the convictions and practices of inclusive faith communities taken from disability theology perspective?

The diaspora setting presents an opportunity for Nigerian Pentecostal churches to reconsider their approach to disability in light of Western disability rights movements and inclusion models. However, resistance to theological change remains strong. Disability-inclusive faith communities, particularly in the Netherlands, embrace a theological perspective that sees disability as part of human diversity rather than an affliction needing healing. These churches emphasize full inclusion, accessibility, and active participation, ensuring that people with intellectual disabilities can engage in worship, leadership, and fellowship without being viewed primarily through the lens of healing. Disability theology teaches that all people are made in the image of God, advocating for church adaptations that foster dignity, respect, and belonging rather than exclusionary practices centered on miraculous intervention.

Biblical Framework for Inclusion

Passages like Acts 2:17-18, Luke 14:13, and 1 Corinthians 12:21-26 highlight the importance of prioritizing marginalized individuals within church life. Nigerian Pentecostal churches must shift from a healing-centred model to an inclusion-centred one.

Participants in the focus group reinforced individual narratives, particularly regarding healing theology. However, some discussions revealed greater openness to inclusion than initially suggested in one-on-one interviews. The study urges churches to implement theological reflection, pastoral education, and inclusive policies that move beyond charity and healing services toward fostering belonging, leadership, and full participation for people with intellectual disabilities.

5.4. Effectiveness of the Approach in Answering Research Questions

The research approach, grounded in Osmer's Four-Task Model of Practical Theology proved highly effective in addressing the main research question and its sub-questions. By integrating the descriptive, interpretive, and normative tasks, the study offered a comprehensive exploration of the convictions and practices within Nigerian Pentecostal churches in the Netherlands concerning people with intellectual disabilities. The qualitative methodology, comprising interviews, focus groups, and observations, enabled in-depth engagement with personal experiences, congregational practices, and theological reflections.

The approach was particularly effective in the following ways:

Capturing lived experiences:

Interviews with pastors, congregants, families, and people with disabilities revealed rich narratives that exposed the gap between theological ideals and practical expressions of inclusion.

Identifying cultural influences:

The study shed light on how Nigerian cultural beliefs surrounding disability intersect with Pentecostal healing theology, revealing critical barriers to inclusion.

Assessing theological responses

By engaging with disability theology in relation to biblical principles, the study emphasized the need for a theology of *belonging* rather than a theology centered solely on miraculous healing.

Offering practical recommendations

Through critical engagement with current church structures, the study proposed realistic and actionable steps toward building more inclusive faith communities.

However, the approach did face some limitations. Recruiting people with intellectual disabilities for interviews was challenging due to persistent stigma and accessibility issues. Additionally, some churches were reluctant to openly acknowledge exclusionary practices, resulting in guarded responses from certain participants.

The finding of this research contributes valuable insight to discussions on disability inclusion within faith communities. It emphasizes the importance of moving beyond healing narratives toward full integration of people with intellectual disabilities in church life. This impacts religious

studies, theology, and disability advocacy by revealing the nuanced ways in which churches can shape perceptions and experiences of disability.

Practical Application

The results can inform church leadership on the necessity of formal inclusion policies and programs. Churches can use this research to:

- Develop accessible worship spaces.
- Train leaders to engage with people with disabilities beyond healing services.
- Address harmful language and cultural stigma within congregations. These applications
 encourage faith communities to adopt more comprehensive disability-friendly practices.

Contribution to Broader Knowledge

It enriches academic discourse by bridging theology, disability studies, and African cultural perspectives. It expands the understanding of how Pentecostal churches engage with disability, offering a framework that integrates spirituality, advocacy, and inclusivity. By documenting firsthand experiences, this research helps shift the narrative from exclusion to belonging, informing scholars, religious leaders, and policymakers.

This study opens more questions than it answers, particularly regarding how African Pentecostal theology can reconcile deliverance with disability inclusion. Further ethnographic work among second-generation migrants could enrich these insights.

5.5. Recommendations for Practice and Future Research

To enhance disability inclusion within Nigerian Pentecostal churches and address gaps in existing literature, the following recommendations are proposed:

5.5.1. Practical Recommendations for Churches

- Develop Inclusive Theology and Teaching Materials
- Churches should reframe healing narratives to emphasize belonging rather than solely miraculous intervention.
- Create teaching guides that help pastors integrate disability theology into sermons, Bible studies, and discipleship programs.
- Highlight biblical texts that affirm dignity and inclusion, such as Luke 14:13 and 1 Corinthians 12:21-26.

Train Church Leaders and Congregants on Disability Awareness

- Conduct workshops for pastors on disability theology to correct misconceptions that link disability to sin or punishment.
- Train church volunteers on how to foster inclusion in worship, discipleship, and leadership.

Develop Structural Policies for Inclusion

- Establish disability ministries that provide tailored spiritual support and accessible engagement.
- Implement guidelines that ensure people with mild intellectual disabilities can participate in leadership roles, church services, and communal activities.
- Provide clear accessibility measures (e.g., adaptive seating, visual and auditory support)
 to Future Research Directions.

5.5.2. Future research recommendations

- Development of Inclusive Theologies for African Pentecostal churches.
- Comparative Studies Across Pentecostal Denominations
- Longitudinal Studies on Shifting Attitudes
- How the second-generation Nigerians in diaspora churches perceive disability compared to first-generation immigrants
- Intersectionality of Faith and Disability Advocacy

5.6. Contribution and Significance of Research

This research provides new insights into the intersection of Pentecostal healing theology, cultural beliefs, and disability inclusion, particularly within Nigerian Pentecostal churches in the Netherlands. While existing studies explore disability theology and Pentecostalism separately, this study highlights the tension between healing-centered theology and the need for inclusion, revealing how migration and exposure to Western disability rights discourses shape theological adaptation.

By analysing personal narratives, church practices, and theological perspectives, this research moves beyond doctrinal analysis to capture real experiences, offering a practical framework for fostering inclusion. It uncovers how cultural stigmas persist in diaspora churches and identifies key theological shifts necessary for integrating disability theology within Pentecostal faith. Rather than rejecting healing altogether, this research proposes a theology of mutuality, where healing

includes restored relationships, participation, and belonging, aligned with Luke 14's vision of the banquet for the marginalized.

Conclusion

Scholars such as Amos Yong and Nancy Eiesland advocate for a liberative approach to disability theology, while others emphasise the significance of spiritual warfare as a key component of Pentecostal identity. This tension has led me to conclude that healing and inclusion are not mutually exclusive; instead, they require rebalancing. Given my own background in Pentecostalism, I approached healing narratives with caution, intentionally seeking alternative theological interpretations to avoid reinforcing ableist assumptions.

This research has illuminated the intricate interplay between theology, culture, and social practice that shapes how intellectual disability is perceived and addressed within Nigerian Pentecostal churches in the Netherlands. While dominant healing narratives and stigmatizing cultural assumptions persist, exposure to more inclusive European contexts has begun to shift perspectives among some church members. Nevertheless, the continued absence of formal inclusion policies exposes a critical gap and underscores the necessity for a deliberate theology of belonging that prioritises presence and participation over cure.

The comparative findings between Group A (church leaders and caregivers) and Group B (those with lived experience) reveal a dissonance between institutional intentions and personal realities. Group A emphasises prayer, theology, and institutional limitations, while Group B shares insights from personal experience, expressing both the joy of participation and the pain of being misunderstood or excluded. Group A often highlights theological rationales and structural constraints, whereas Group B articulates moments of inclusion alongside profound experiences of marginalisation. This disparity challenges the adequacy of miracle-centred theologies and underscores the urgency of centring the voices of those directly affected.

This study bridges Pentecostal theology, disability studies, and diaspora cultural adaptation, advancing the conversation beyond current frameworks. It calls for a shift from a top-down, healing-focused model to an inclusive, relational, and participatory approach. This perspective recognizes people with intellectual disabilities not as objects of ministry but as full participants in the life of the church.

Real transformation will occur only when their voices are heard, their contributions valued, and their presence welcomed as essential to the body of Christ. Therefore, this conclusion not only

offers original insights to the field but also challenges existing ecclesial paradigms, advocating for theological and structural reform grounded in justice, empathy, and inclusion.

APPENDIX I

Research interview question group	up A	arc	guestion	interview	Research	R
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Participant number:
Church position:
Gender:
Warming Up

Can you tell me something about this church/community?

Topic 1: Theological Views on Intellectual Disability and People with Intellectual Disabilities

Main Question: How do you think God views people with intellectual disabilities?

- Sub-question: Bible stories shape your God's view on PID
- Sub-question: How do you envision Gods relationship with PID?

Topic 2: African Cultural Views on ID and PID

Main Question: How does your culture perceive people with intellectual disabilities?

- Sub-question: What are the traditional beliefs of PID
 What names exist concerning PID?
- Sub-question: Do you think these beliefs and names also exist in the church?

Topic 3: The Church and Inclusion of PID

Main Question: In what ways does your church include people with intellectual disabilities?

- Sub-question: Are there policies, services, or programs designed for PID?
- Sub-question: What does inclusion mean within your church community?

APPENDIX II

Group B research interview questions (People with Intellectual Disabilities)

Warming Up

What does this community/church mean to you?

Topic 1: Theological View (As a person labelled with an intellectual disability)

Main Question: What do you believe God think about you?

- Sub-question: What helps you feel close to God?
- What do you think God expects from you?

Topic 2: African Cultural Viewpoints

Main Question: What do people in your culture say about people with disabilities?

- Sub-question: What names or words do people use for disability in your home country?
- Sub-question: How do you feel when people talk like that?

Topic 3: The Church and Inclusion

Main Question: What does church service mean to you?

- What does belonging to this church/community mean to you?
- What do you like about church? Having a meal together, praying together

APPENDIX III

RAW DATA GROUP A

Question 1: How do you think God views people with intellectual disabilities?

- Sub-question: What Bible stories shape your God's view on PID
- Sub-question: How do you envision God's relationship with PID

Participant A001 (Church Leader) Respond

Thank you for raising this important point. I truly believe that God loves everyone equally, without exception. If we think of God as the ultimate parent, then like any loving parent, God's love is not based on our abilities, appearances, or status, but on our identity as His children.

Unfortunately, a lack of understanding of God's beautiful diversity often leads to misconceptions, especially around disability. But Scripture tells a different story. Take, for example, the man born blind in John 9:1-12. When Jesus is asked whether the man's blindness was due to his own sin or that of his parents, Jesus firmly responds that it was neither. Rather, this man's life was an opportunity for God's works to be revealed. That completely shifts the narrative, from blame to purpose, from exclusion to participation in God's glory.

Throughout Jesus' ministry, we see His deep compassion for those who are often marginalized. He doesn't just heal physical conditions; He restores dignity, invites belonging, and reveals the heart of God. Disability is not a punishment; it's not something that separates people from God's love. In fact, it's often in those very places of perceived weakness that God's strength shines most brightly.

So yes, God is not only compassionate toward people with disabilities, He sees them, honors them, and includes them in His redemptive work. As a church, we're called to reflect that same heart of inclusion, care, and respect.

The second question is to reflect on the cultural perception of disability; this question answers the second sub-question of this research. Nigeria's cultural beliefs hold that intellectual disability is a curse or punishment for past sin or a witchcraft attack.

Question 2: How does your culture perceive people with intellectual disabilities?

What are the traditional beliefs and names that exist concerning PID?

Respond A001

In many traditional Nigerian settings, intellectual disabilities are often misunderstood and surrounded by stigma. There are cultural beliefs that associate such conditions with

spiritual causes, some people believe that an intellectual disability is a curse, a punishment from the gods or ancestors, or a result of witchcraft. Others see it as a sign of bad luck or a spiritual attack on the family.

These beliefs have led to the use of many negative and demeaning names for people with intellectual disabilities. In Yoruba, terms like "ode" (fool) or "didirin" (dumb) "abirun" disabled are commonly used. In Hausa, words like "dolo" or "wawa" are thrown around carelessly. In Igbo, people may say "onye nzuzu" or "onye ara", which means a foolish or mad person. These names strip people of their dignity and reinforce the belief that they are less human or less valuable than others.

Question three is towards the inclusion of people with intellectual disabilities. It establishes whether these churches are included or excluded and what their convictions are toward inclusive faith communities.

Question 3: In what ways does your church include people with intellectual disabilities?

- Are there policies, services, or programs designed for PID?
- What does inclusion mean within your church community?

Respond A001

Within the Redeemed Christian Church of God (RCCG), there is a growing recognition of the need to care for people with intellectual and other disabilities. While there may not yet be a formal denomination-wide policy specifically targeting people with intellectual disabilities, there are several programs and initiatives in place that reflect a commitment to inclusion and support, but for now, there's no theology of inclusion except care for the needy.

Participant A002 Church Member

The first question is to understand the participants' theological views on Intellectual Disability

Question 1: What is your view about intellectual disability?

• Sub-question: How do you think God views people with intellectual disabilities?

RESPOND A002

Growing up in Nigeria, I remember a girl in our community who used to greet everyone in church, on the street, constantly and without hesitation. People didn't understand her behaviour, so they called her names like "stupid" or "dumb." There are many stories about the root cause of her sickness. Some said it's witchcraft, others said it's a punishment for the family's bad deed. At the time, I didn't understand either. I just accepted what others said, we know something was "wrong" with her, men even enticed her with food, money, so that they could get close to her. She was pregnant without knowing who the father was.

It wasn't until I moved to the Netherlands that I began to understand what intellectual disability really means. Here, I learned about conditions like Down syndrome and intellectual developmental challenges. I realized that what we often called "mental retardation" or dismissed with terms like "didirin" or abirun in Yoruba was actually a condition, a challenge not a disease to be cure.

Now I see clearly: yes, it is a form of disability, but not in the way people often think. It doesn't mean the person is worthless or to be mocked or cursed, it means they need understanding, patience, and love.

And more importantly, I know that God loves then too, God is love, He must love each child regardless of their differences or abilities. The problem is that many people, especially in our cultural settings, lack understanding of God's diversity. That leads to harmful misconceptions about people with disabilities.

Question 2: The second question is to reflect on the cultural perception of disability,

This question answers the second sub-question of this research. Nigeria's cultural beliefs hold that intellectual disability is a curse or punishment for past sin or a witchcraft attack

Sub-question: Do These Beliefs and Names Exist in the Church?

RESPOND A002

Yes, unfortunately, our culture is cruel toward people with ID, these beliefs and names sometimes still exist within the church, though often in more subtle ways. While we preach that all people are made in the image of God, we don't always treat people with intellectual disabilities with the full respect and inclusion they deserve. Sometimes, churches remain silent on the issue or exclude people with disability.

Question three is towards the inclusion of people with intellectual disabilities. It establishes whether these churches are included or excluded and what their convictions are toward inclusive faith communities

Question 3: In what ways does your church include people with intellectual disabilities?

Are there policies, services, or programs designed for PID within NPC

RESPOND A002

There are no policies or programs for people with ID. Only Welfare to care for everyone, especially the poor and needy within the church and the broader community. Not exclusively focused on individuals with intellectual disabilities, these services aim to extend the practical love of Jesus Christ to all in need. Other churches I often visited have regular Healing and Deliverance Services, which are open to all individuals seeking spiritual support and healing. These services may provide comfort and community for individuals with various challenges, including intellectual disabilities.

Participant A003 (Church Leader)

The first question is to understand the participants' theological views on Intellectual Disability

Question 1: How do you envision God's relationship with PID

Sub-question: How do you think God views people with intellectual disabilities

RESPOND A003

Envisioning God's relationship towards those who are disabled may be a little bit challenging, looking at the capacity in which God is often portrayed, perfect, all-powerful, and beyond limitation. Yet, it is precisely within the seeming contradiction of divine perfection and human limitation that the richness of God's relationship with people with disabilities can be found.

God's relationship with disabled persons is not one of pity or mere tolerance, but one of profound presence, value, and purpose and love. Scripture consistently reveals a God who is close to the marginalized and attentive to those the world overlooks. God hears the cries of the oppressed (Exodus 3:7), and throughout the Gospels, Jesus' ministry is marked by intentional engagement with those who were blind, deaf, paralyzed, or otherwise excluded. But even more importantly, Jesus does not only heal, but He also sees, touches, affirms, and includes.

The second question is to reflect on the cultural perception of disability; this question answers the second sub-question of this research. Nigeria's cultural beliefs hold that intellectual disability is a curse or punishment for past sin or a witchcraft attack

Question 2: What names exist concerning PID?

Sub-question: Do you think these beliefs and names also exist in the church?

RESPOND A003

Yes, there are still cases where people with disabilities are seen as spiritually afflicted or as objects of pity, some people even see them as a punishment from God, some church members may even use those same cultural names and labels without realizing the hurt they cause. This shows that the church is not fully free from the cultural attitudes that shape society widely.

However, I believe the church also has a powerful opportunity here. We are called to challenge these beliefs and to model a different kind of community, one where every person, regardless of ability, is seen, loved, and included. Jesus never excluded anyone based on their condition. He embraced, healed, and honored those who were pushed to the margins. That should be our example.

Question three is towards the inclusion of people with intellectual disabilities. It establishes whether these churches are included or excluded and what their convictions are toward inclusive faith communities

Question 3: What does inclusion mean within your church community?

RESPOND A003

Inclusion within my church community means creating a space where everyone feels seen, valued, and accepted, regardless of ability, background, or condition. It's not just about allowing people to be present; it's about making sure they can participate fully and meaningfully.

I noticed that people with intellectual disabilities were often treated as if they didn't belong or couldn't contribute. Sometimes they just prayed for and then left out of the rest of church life. But the true inclusion goes deeper. It means we intentionally remove the barriers, physical, social, and even spiritual, that keep people from being part of the body of Christ.

Participant A004 (Caregiver)

The first question is to understand the participants' theological views on Intellectual Disability

Question 1: How do you think God views people with intellectual disabilities?

RESPOND A004

As a mother of a child with disability, I have often asked myself how God sees my child, and over time, I've come to see something beautiful and powerful in the answer.

I believe with all my heart that God sees my child with deep love, purpose, and pride. He does not see the disability first. He sees the person, the soul, the heart that He created. My child is not a mistake or an accident. In fact, I believe God has placed a unique light in children like mine. They may not express themselves in the way the world expects, but their value is not less in God's eyes.

The second question is to reflect on the cultural perception of disability; this question answers the second sub-question of this research. Nigeria's cultural beliefs hold that intellectual disability is a curse or punishment for past sin or a witchcraft attack

Question 2: How does your culture perceive people with intellectual disabilities?

RESPOND A004

As I was saying, intellectual disability is something that is widely misunderstood in Nigeria. Many people refuse to acknowledge it as a real disability. They believe it's simply a matter of someone having "screws loose" stuck in their brain.

Back in Nigeria, when I was still a teenager, one of our neighbors had a son who always came home from school in last place in his class. He didn't know anything. He couldn't understand anything. His father used to beat him every day, thinking that violence would somehow fix his brain. He didn't realize that the boy was actually living with an intellectual disability.

It wasn't until my own child was diagnosed with the same condition ten years ago that I began to understand what was really going on. It felt like a light switched on, or like seeing through a camera for the first time. That moment changed everything for me.

I made the decision to move to Netherlands so that my son could grow up in an environment where he would be understood, supported, and able to learn in school.

Question three is towards the inclusion of people with intellectual disabilities. It establishes whether these churches are included or excluded and what their convictions are toward inclusive faith communities

Question 3: What does inclusion mean within your church community?

RESPOND A004

When Jesus welcomed people, He didn't just tolerate them, He embraced them. He listened, He touched, He healed, and He made them part of His story. That's the kind of church I want to be a part of a church that reflects the inclusive heart of Christ. Inclusion means making space in our worship services for people with different needs, training our Sunday school teachers and leaders to understand and engage children or adults with intellectual disabilities. More importantly, being mindful of the language we use so we don't unknowingly harm others. it means seeing people not just by their disability, but by their identity in Christ.

Participant A005 (church member)

The first question is to understand the participants' theological views on Intellectual Disability

Question 1: What Bible stories shape your God's view on PID

The Great Banquet (Luke 14:1-24): Jesus teaches about inviting the poor, the crippled, the blind, and the lame to the banquet, showing that God's kingdom is open to all, including those with disabilities

The second question reflects on the cultural perception of disability, this question answers the second sub-question of this research. Nigeria's cultural beliefs hold that intellectual disability is a curse or punishment for past sin or a witchcraft attack

Question 2: How does your culture perceive people with intellectual disabilities

RESPOND A005

Our culture does not truly understand intellectual disability. People often use hurtful names like moron, stupid, dumb, or idiot and these are not just words, they are weapons. These names discriminate. They damage the dignity of people living with disabilities, and they create pain that doesn't go away.

When this kind of language becomes normal, it shapes how people think and act. It creates a culture where people feel no responsibility, no moral obligation to treat others with compassion. They joke, they laugh, they exclude, and they don't even realize the harm they're causing.

What's even more painful is that the church, especially in some places, is silent. Churches are not doing enough to raise awareness, to teach love and respect, or to challenge the stigma that still exists. Instead of leading the way, some churches follow the same harmful patterns found in society.

But we must do better. If we believe in the love of Christ, we must act like Him. We must stop discrimination, speak out against these names, and create a church culture that includes and uplifts everyone, especially those with intellectual disabilities.

Question three is towards the inclusion of people with intellectual disabilities. It establishes whether these churches are included or excluded and what their convictions are toward inclusive faith communities

Question 3: What does inclusion mean within your church community?

RESPOND A005

Inclusion within our church community should mean that everyone, regardless of ability, can participate fully in the life of the church, fellowship, service, and leadership. In the RCCG, we talk about being one body with many members, each valuable and gifted by God. True inclusion means recognizing that people with intellectual disabilities are not just recipients of charity or prayer or healing they are part of the body of Christ with something to contribute.

This can look like creating accessible worship experiences, training ushers and leaders to welcome and assist people with special needs, adapting Sunday school lessons for different learning styles, or simply fostering a culture where people with disabilities and their families are not isolated but embraced.

There's still work to be done, but inclusion means moving from a mindset of "let's pray for them" to "let's walk with them, learn from them, and grow together as the church of Christ."

APPENDIX IV

Analysis Report of Group A Participants' Responses:

1. Theological and Cultural Perceptions of Intellectual Disability

Main Question: How Does God View People with Intellectual Disabilities?

Descriptive Coding – Identifying Core Narratives

Belief Statements:

- "God loves everyone equally, without exception." (A001)
- "God sees, honors, and includes them in His redemptive work." (A001)
- "God does not see the disability first. He sees the person." (A004)
- "Jesus sees, touches, affirms, and includes." (A003)

Biblical References:

- John 9:1–12 (A001) Healing the man born blind to reveal God's works.
- Exodus 3:7, the God who hears the cry of the oppressed (A003)
- Luke 14:1–24, the Great Banquet—God's invitation to the marginalized (A005)

God's Relationship with PID:

- Deep, loving, purposeful presence, not pity (A003)
- God instills unique light and purpose (A004)

Emotion Coding - Capturing Sentiments and Conviction

- Gratitude & Recognition: "Thank you for raising this important point." (A001)
- Compassion: Participants express empathy for children/adults with ID (A004, A003)
- Frustration & Sadness: Regarding past misunderstanding and societal treatment (A002, A004)
- Hope & Assurance: Belief that God's view is restorative and inclusive (A001, A005)

Values Coding – Ethical and Spiritual Priorities

- Equality & Dignity: God's view is not ability-based; all are His children (A001, A004)
- Sacred Worth: Every person is valued (A003)
- Scriptural Authority: Reframing disability using scripture (A001, A005)

• Divine Purpose: Disability as part of God's redemptive story (A003, A004)

Pattern Coding – Emergent Themes

- Unconditional Divine Love: God sees worth and purpose beyond ability.
- Scriptural Reframing: From punishment to purpose (esp. John 9; Luke 14).
- Image of God in Disability: Children with disabilities reflect God's light.

2. Main Question: Nigerian Cultural Perceptions of Intellectual Disability

Descriptive Coding – Defining Cultural Attitudes

- Misconceptions: ID as "curse," "witchcraft," or "ancestral punishment" (A001–A005)
- Negative Naming: "didirin," "ode," "wawa," "moron," "onye ara" linguistic stigmatization (A001, A005)
- Church Complicity: Harmful names and beliefs sometimes echoed in the church (A002, A003)

Emotion Coding – Expressed Sentiments

- Pain & Regret: Witnessing abuse or ignorance (A002, A004)
- Anger & Frustration: At cultural cruelty and silent churches (A005)
- Transformation: A002 and A004 share personal change through new understanding.

Values Coding – Cultural and Ethical Priorities

- Human Dignity: Rejection of demeaning cultural labels (A001, A005)
- Education & Awareness: Need to challenge myths and inform society (A002, A004)
- Biblical Truth: Church must correct harmful cultural beliefs with scripture (A003, A005)

Pattern Coding – Overarching Themes

- Cultural Stigma Rooted in Superstition: Negative beliefs widely entrenched.
- The Role of the Church in Perpetuation or Correction: Churches sometimes echo cultural ignorance but also have transformative potential.
 - Awakening Through Exposure: Migration or education sparks rethinking (A002, A004).
- 3. Main Question: The Church and Inclusion

Descriptive Coding – Church Practices

- Limited or Absent Programs: No formal theology or specific ministries for PID in most churches (A001, A002)
- General Welfare Programs: Often not targeted at PID (A002)
- Inclusion Philosophy: More visionary than programmatic (A003, A004, A005)

Emotion Coding – Tone & Sentiment

- Hope: A desire for deeper inclusion (A003, A004, A005)
- Conviction: Calls to action based on the life and example of Jesus (A004, A005)
- Disappointment: At limited progress or tokenism (A002)

Values Coding – Theological Imperatives

- Belonging & Participation: Inclusion means full involvement, not just presence (A003, A005)
- Training & Awareness: Church leaders and teachers need equipping (A004)
- Christlike Hospitality: Seeing inclusion as an embodiment of the Gospel (A004, A005)

Pattern Coding – Key Themes

- Inclusion Beyond Tokenism: Participation, not just presence, is the goal.
- Barrier Removal: Social, spiritual, and physical obstacles need dismantling.
- Church as Healing Community: Embracing the marginalized as Jesus did.

Conclusion: Synthesized Insights

This analysis reveals that participants across roles, church leaders, members, and caregivers, hold a growing awareness of the need for theological inclusion of people with intellectual disabilities. The strongest theological themes include:

- God's Unconditional Love
- Biblical Correction of Stigma
- The Church's Call to Transformative Inclusion

However, cultural stigma remains deeply rooted and often infiltrates church settings. Participants express hope, frustration, and a strong moral vision for change, through education, theology, and action.

APPENDIX V

Focus Group Dialogue

The focus group discussion was transcribed verbatim from the audio recording, ensuring accuracy and preserving the original expressions of the participants. This verbatim approach captures the nuances of their responses, including tone, emphasis, and emotions, providing a rich, authentic representation of their perspectives.

Participants:

Researcher - The R001 is used to identify the researcher.

R001: Thank you all for joining this focus group discussion. During the interviews, many of you spoke about how God see people with intellectual disabilities, how they are viewed in the churches and communities. Today, I would like us to reflect further and clarify some of those points together. Let's begin with this: We all agree that God loves everyone equally, but practical inclusion is still lacking, why do you think that is?

Participant A001 (Church Leader):

We would love to do more, but we cannot make significant changes unless the headquarters gives us the go-ahead. Without policy support or instruction from the church headquarters, it's difficult to implement meaningful inclusion on our own in this place. The headquarters still operate within the realms of charity and healing related to disability. They show sympathy, but they do not know how to include people with intellectual disabilities beyond merely praying for them.

Participant A002 (Church Member):

Yes, and sometimes, people are afraid or unsure. They don't want to say the wrong thing or don't feel equipped. So they keep their distance instead of making space. Especially the children's class.

Participant A004 (Caregiver):

For me, it's also that most church programs are not built with people like my son in mind. The worship, the teaching, it's not accessible. And leaders don't always ask parents like me what could help.

Participant B001 (Person with ID):

I like church, but I don't like when everyone touches me during prayer. I just want to sing and be happy with everyone.

Participant A005 (Church Member):

That's so important. We need to move from just praying for people to walking with them, side by side. Inclusion means changing how we do church, not just what we say.

R001. It's troubling me that Christians still use these kinds of cultural labels. The church should be setting the standard, not following harmful social habits. Some of you mentioned words like "ode," "abirun" and "didinrin." Can we talk more about how these words are used and how they affect people?

A002: Yes, those words are common, but they are hurtful. I think people use them without realizing the damage they cause. In church, we try to discourage that kind of talk, but it's still part of daily speech.

A004: As a mother, I feel the pain deeply when I hear those words. They reduce our children to nothing. It's like society has decided they don't matter. Even family members sometimes use them without thinking.

A005: At home (Nigeria), people say "he's just a *didinrin*" and laugh. It's ignorance, but also fear. They don't understand what intellectual disability really is. They think it's a curse or a spiritual attack.

A001: Young people especially need to be re-educated. We hear these terms growing up and repeat them. But now, some of us are learning to be more inclusive. The church has a big role to play in that.

R001: That's helpful. In the interviews, many of you mentioned stigma and hiding children or adults with intellectual disabilities. Can you explain why this still happens?

A003: It's mostly shame. People fear that their family will be labelled, especially in rural areas. Some even think it will affect marriage prospects for siblings. So they keep the child hidden.

A004: I was told not to bring my son to church at one point. Some people said he was distracting others or making noise. I cried that day. But now, I bring him proudly here in Netherlands. God created him too.

A002: I think some churches are changing. We are slowly learning to embrace people with disabilities. But others still don't have a clue. They think deliverance is the only answer.

A005: Yes, that's something we must address. Many times, pastors only offer prayers or fasting, as if that will 'fix' the person. But there is also a need for understanding and practical support.

R001: That's an important point. Do you feel the church is ready to support people with intellectual disabilities and their families in a more inclusive way?

A003: Some are ready, some are not. We need training, especially for leaders and youth workers. People don't know how to interact or support. That leads to exclusion, even if it's unintentional.

A001: I agree that Inclusion is not just about bringing them to church; it's about making space for them to participate and feel loved. That's what Jesus did.

A004: It would help if the church could organize sessions to teach about disability, what it is and what it's not. We also need to hear from the families, not just talk about them.

R001: Thank you all. This conversation has been very rich. Before we end, what one thing do you think must change in our churches or communities to better include people with intellectual disabilities?

A004: We must change our language and mindset.

A001: We must teach people what intellectual disability really means.

A003: We need to create room for participation and inclusion.

B001: We need compassion with knowledge, not just prayers.

R001: We need love without conditions.

R001: Thank you all for your understanding and contributions.

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Declaration Sheet Master's Thesis

Name student: Christiana A. Ashamu Title master's thesis: Master of Theology in Intercultural Theology **DECLARATION OF ORIGINALITY** I hereby declare that the aforementioned master's thesis consists of original work. The thesis is the result of my own research and is written only by myself, unless stated otherwise. Where information and ideas have been taken from other sources, this is stated explicitly, completely and appropriately in the text or in the notes. A bibliography has been included. Place, date: Signature: __CAshamu__ Utrecht, 28/05/2025 **DECLARATION OF CONSENT** I hereby agree that the aforementioned master's thesis will be made available for inclusion in the library collection after its approval and that the metadata will be made available to external organizations and/or published by the PThU. Furthermore, I do authorize (the library of) the PThU to include the full text in a database that is publicly accessible via the world wide web or otherwise. (This permission concerns only the publication of the master's thesis as described, without further transfer or limitation of the student's copyright.) Place, date: Signature: Utrecht, 28/05/2025 CAshamu

Data management plan



Data management plan

> See explanation at the end of this document.

1. General information

Name of student: Christiana Ashamu

Names of thesis supervisor(s): Prof. Andre Mulder

Date: 15th March 2025

Version: English

2. General information about research and subject of the thesis

(Provisional) title of the research/thesis:

Toward the Practice and theology of Inclusion of People with Mild Intellectual Disabilities in Nigerian Pentecostal churches in the Netherlands

Short description of the research project and method(s):

This research explores how Nigerian Pentecostal churches in the Netherlands understand and practice the inclusion of people with mild intellectual disabilities. While Pentecostal theology strongly emphasizes healing and miracles, this study examines whether these beliefs impact disability inclusion and how churches can adopt a theology of inclusion within the framework of disability theology.

Methods: This study employs a qualitative research approach, using:

Focus Groups – Engaging church leaders, congregants, and families of people with ID to explore collective attitudes, experiences, and theological perspectives.

Interviews – Conducting in-depth discussions with pastors, parents of people with ID, and disability advocates to assess personal experiences, theological interpretations, and church practices.

Document Analysis – Reviewing sermons, church policies, and ministry programs to identify existing inclusion strategies and theological discourse on disability.

Observational Study – Attending church services to examine worship accessibility, congregational attitudes, and leadership participation of people with ID.

Type of research data to be collected:

This study will collect qualitative data to explore how Nigerian Pentecostal churches in the Netherlands understand and practice the inclusion of people with mild intellectual disabilities (ID). The data will be gathered through the following methods:

- 1. Interview Data (Semi-Structured Interviews) \circ Personal narratives and theological insights from pastors, church leaders, and theologians in the form of recordings and transcripts.
 - o Experiences and perceptions from families of people with ID.
 - $_{\odot}$ $\,$ Perspectives from people with ID (where ethical and feasible) on their church participation.
 - Expert opinions from disability advocates and inclusion specialists.
- 2. Focus Group Data in the form of recordings and transcripts
 - Collective discussions on attitudes toward disability within Pentecostal churches.
 - Debates on healing theology vs. disability inclusion among church members.
 - Congregational perspectives on practical barriers to and opportunities for inclusion.
- 3. Observational Data (Church Services & Events) \circ Accessibility of worship spaces for people with ID in the form of field notes.
 - Congregational interactions with people with disabilities.
 - Leadership roles and participation of people with ID.
- 4. Document Analysis in the form of written text

- Sermons, church policies, and ministry materials related to disability and healing.
- Existing church programs or initiatives aimed at disability inclusion.

This data will provide a comprehensive understanding of theological, cultural, and practical factors influencing disability inclusion in Pentecostal churches.

Period in which the data will be collected:

17th to 28th of March

3. Technical aspects of the data storage

Hardware and software: To ensure security, organization, and accessibility, the collected research data will be stored using secure digital and physical storage systems.

1. Hardware for Data Storage

All research files, including interview transcripts, focus group recordings, observation notes, and analyzed documents, will be securely stored on the PThU OneDrive and only for a very short period on my laptop or phone (recordings).

Audio Recording Devices: For interviews and focus groups, an audio recorder or mobile recording device will be used, with files transferred securely to encrypted storage.

2. Software for Data Management

Microsoft OneDrive: Secure, encrypted cloud storage will be used for real-time backup and remote access to important research files.

Microsoft Word/Excel: Used for transcribing interviews, organizing research notes, and managing participant information.

Restricted Access: Only the researcher and supervisor will have access to raw data. All participant info will be anonymized.

File formats: To ensure data security, accessibility, and compatibility, the research data will be stored in the following formats:

1. Text Data (Interview Transcripts, Field Notes, Document Analysis)

DOCX (Microsoft Word) – Used for transcribing interviews and focus group discussions.

PDF (Portable Document Format) – Final versions of transcripts, research notes, and church documents for secure archiving.

- 2. Audio Data (Interviews, Focus Groups, Observational Recordings) high-quality audio recording
- 3. Data Analysis Files

NVivo Files (.nvp) – Used for qualitative coding and thematic analysis of textual data.

XLSX (Excel Spreadsheet) – Used for organizing participant metadata, research tracking, and categorizing themes.

Size of the data (estimate in MB/GB/TB): unknown

4. Responsibilities

Where will you store data while conducting research?

Will you share (part of the) data? If yes, with whom? And how? No

Where will you store data after completion of research? Both the soft and hard copies of the data will be kept in a safe location. Interviews will be recorded on an audio tape with permission from the participants. Only the researcher and study supervisor will have access to the collected data. After data analysis and documentation, PTHU guidelines will be followed for destroying copies of data, both in hard and soft copy.

5. Legal and ethical aspects

Are data privacy sensitive? YES, because religion is considered highly private according to Dutch law

If YES: How will you arrange safe storage and consent of the people and organizations involved in your research?

Use consent forms, and if necessary, retrieve consent from caretakers or legal representatives of PID who cannot give consent for themselves

6. Other aspects

======		
(The f	following has to be filled in by the thes visor:)	sis
X Approve	ed	
Name	_André Mulder	
Signature:		
Date:	14-03-2025	

Explanation

Ad 1 General

Fill in the date on which you completed the data management plan and indicate which version, e.g. 1.0. During the research the research methods might be altered or unforeseen issues with regard to privacy sensitive data might arise. In that case you will need to update the corresponding paragraphs of the data management plan and the date and version number accordingly.

For a complete data management plan, you are required to fill in all the fields, even if that be with the term 'not applicable'.

Ad 2. General information on the research project and the subject of the thesis Describe briefly your research and what research methods will be used.

Describe the type of research data, like written sources (archives, literature), transcriptions, interviews (video or audio tapes), reports, surveys, (survey results), pictures. You have also to mention the use of raw or secondary data.

Ad 3. Technical aspects

Will specific hardware be used besides a pc/laptop? Will you use specific software for data analysis?

File formats can be: DOCX, TXT, XLSX, PDF, WAV, JPG.

The size of the files can be given in megabyte, gigabyte or terabyte. You can fill in an estimate size, since at the start of the research your exact data file size will not yet be known.

Ad 4. Responsibilities

For the sake of the academic integrity it is important to describe in what manner the data will be safely saved and managed That is also important for the verifiability of the data. You can find the Dutch Conduct Code Academic Integrity here:

www.pthu.nl/OnderzoekPThU/Academic Integrity/

Save the data during your research at a good and safe storage. Privacy sensitive data can safely be stored on your personal OneDrive provided by the PThU. Do **not** save privacy sensitive data in the commercial cloud (iCloud, Google, ...)! Commercial cloud services can only be used for saving standard data like scientific articles in PDF. Do **not** use USB-storage or your personal device for saving (privacy sensitive) data either. These might be stolen, get lost or get damaged.

Please note the importance of regularly saving the versions of your master thesis in a safe storage.

After the research has been completed, the data used may be published as part of your master thesis, in an appendix. That holds mainly for small data collections which do not contain privacy sensitive information.

(Anonymized) Data can be stored in separate files along with the thesis in the PThU library. Files with privacy sensitive data can be archived in a data storage specifically for that purpose, G:drive Secured Data Storage. Arrangements can be made via the PThU library.

Describe who will manage the data during the research. In most cases this will be the student. If your thesis supervisor also can access the data, you must mention that. After completion of the research the management of the data should be transferred to the PThU library.

If you interview persons in the research, inform them how the (privacy sensitive) data will be managed and by whom.

Ad 5. Legal and ethical aspects

If you collect privacy sensitive data in the research process, it is necessary to very carefully manage the data once collected. Think about personal information like name, address, age, but also the Dutch Service Number (BSN), gender or religious beliefs. That must be done properly and safely. (See also Ad 4.) Make sure no data leaks occur. Inform the interviewees (or other concerned persons) how the data will be used. Ask them to fill in and sign an

'Informed consent form'. With that form they grant permission(consent) for collecting, storing and using the research data. Inform them that the collected data will be used only for your research.

Anonymize the data as extensively as possible.

Ad 6. Other aspects

Any aspects not covered by the other questions can be filled in here.

You can always consult your thesis supervisors about questions which are unclear or if you have doubts about the proper manner to collect and/or, store data. The staff members of the library can also offer advice.



Formulier Informed Consent / form for informed consent

Το	pic van onderzoek:			
[H	et onderzoekstopic in één zin]			
Tro	unslation:			
Research topic Negotiating The Tension Between Healing and Inclusion of People with Mild Intellectual Disabilities				
	De student/ onderzoeker heeft mij uitgelegd waar het onderzoek over gaat en wat het doel van het onderzoek is. Ik heb de mogelijkheid gehad om vragen te stellen en de student/onderzoeker heeft eventuele vragen begrijpelijk beantwoord.			
	Translation: The student/ researcher explained to me what the research is about and what the aim of the research is I was given the availability to ask questions and the student/ researcher has answered these eventual questions understandably.			
	Ik begrijp dat mijn deelname vrijwillig is. Ik kan mij op ieder moment terugtrekken uit het onderzoek zonder opgave van reden.			
	Translation: I understand that my participation is voluntary. I can pull out of the interview and research at any time without providing a reason.			
	Ik begrijp dat de resultaten van dit onderzoek zo anoniem als in het kader van het onderzoek mogelijk is zullen worden verwerkt. Mijn persoonlijke gegevens worden vervangen door codes. Alleen voor het onderzoeksteam zijn de resultaten indien nodig te koppelen aan persoonsgegevens.			
	Translation: I understand that the results of this research will be processed as anonymously as can be expected a part of a scientific research. My personal information will be replaced by codes. Only the research-team might be able to link the results back to personal credentials.			
	Ik sta het toe dat er geluids- en/of beeldopnamen gemaakt kunnen worden en dat die bestanden verwerkt kunnen worden tot een geschreven tekst of een (stilstaand) beeld. De oorspronkelijke bestanden zijn alleen toegankelijk voor het onderzoeksteam.			
	Translation:			

	I allow the recording and processing of audio- and/or visual images to written text or (frozen) image. The original documents are only accessible for the research team.					
	Ik begrijp dat alle informatie die ik met de onderzoeker deel, gebruikt kan worden in publicaties, verslagen, boeken en andere vormen van onderzoeksoutput.					
	d in publications, reports,					
Name of the participant		Handtekening Autograph	Datum Date			
	am student-onderzoeker me of the student-researcher	Handtekening <i>Autograph</i>	Datum Date			