FINAL REPORT TO SYNOD

Taskforce on Disability

Anglican Diocese of Canberra and Goulburn

August 2026

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When worship becomes calibrated around assumed capacities – standing, speaking, seeing, hearing, processing without assistance – it ceases to be universal. Participation is no longer a shared invitation but a selective performance. For disabled people, the message becomes clear: your presence is a problem to be accommodated, not a gift to be welcomed.

Canon Tim Goode. Breaking, not Broken: Ableism and the Church after Constantine (p. 101). (Function). Kindle Edition.

EXECUTIVE SUMMARY

This Report responds to the 2024 Synod's resolution that the Canberra and Goulburn Diocese assess how it might become an exemplar of welcoming, accessible and fully participatory ministry for people with disability and their carers.

Disability is not easily reduced to a single definition. It encompasses bodily and sensory impairment, but also chronic illness and conditions with long-lasting effects, including dementia and mental health conditions. It is shaped, too, by the cultural meanings a society attaches to particular bodies and minds, and by the social and physical environments, often designed without disabled people in mind, that determine whether a person can fully participate.

Definitions therefore vary, and will continue to vary, across academic disciplines, governments, and church traditions. This Report does not adopt a single definition but works with this layered understanding throughout: disability as bodily reality, as social meaning, and as the lived experience of barriers to participation. Whichever way it is defined, those who experience disability, whether personally or as carers, encounter real and varied challenges, and the Diocese's response must be as multifaceted as the phenomenon itself.

Disability is not a marginal issue affecting a small minority of people. More than one in five Australians live with disability and prevalence rises sharply with age. About one in eight Australians identify as unpaid carers. Disability is a protected attribute which means that discrimination or treating a person with a disability less favorably that a person without a disability is prohibited in law. This requires all organisations to make reasonable adjustments to allow a person with disability to access the premises or participate in an activity.[1] The challenge facing the Diocese is therefore not a lack of compassion but a lack of coordination, capability and sustained leadership in a context of limited resources.

As both Australia and our Diocese ages, people with disability and their carers will become an increasingly prominent feature of congregational life. People with disability and their carers are not simply recipients of ministry but indispensable members of the Body of Christ whose gifts, leadership and witness enrich the whole Church.

The implications are clear: any Diocese, church or agency that does not systematically include people with disability and their carers is excluding a significant proportion of the community it is called to serve. This has been recognised by other dioceses, notably Melbourne, as well as the Church of England; the Anglican Church in Aotearoa, New Zealand

[1] While religious organisations have broad exemptions from anti-discrimination provisions concerning sex and gender it has no such exemption for disability.

and Polynesia; the Anglican Church of Canada; and the Episcopal Church (USA). The Taskforce has relied heavily on their experiences and resources.

In September 2025, the Task Force conducted an online survey developed by ORIMA Research of parishioners examining participation by people with disability and their carers in parishes. Further consultations followed over subsequent months revealing both genuine welcome but also significant gaps.

People with disability and their carers consistently reported less positive experiences than clergy, lay leaders and other respondents. Accessibility information is often unavailable on parish websites, training is limited, carers frequently feel overlooked and opportunities for leadership by people with disability, particularly in the clergy, remain uncommon.

Disability is not an optional ministry or one to be siloed. It goes to the nature and mission of the Church itself.

This conviction arises from the ministry of Christ, the theological understanding of the church, the Biblical call to welcome those who have been excluded, and the lived experience of people with disability and their carers.

The Diocese will not become more inclusive through policy alone. Lasting change will require layered action and engagement involving every part of our complex diocesan organisation. It will require disability Champions, Advocates and Witnesses throughout diocesan and parish life. People with disability and their carers must be welcomed as full participants in clergy, leadership, governance, teaching and ministry. They also have a responsibility to speak out and organise when they are able. This should be welcomed by the Diocese and parishes.

The recommendations propose significant reforms to the structures, leadership and resources necessary to effect that transformation, so that people with disability and their carers are recognised as indispensable participants in the life and mission of the Church, and not merely as recipients of ministry.

This Report recommends fundamental change in the physical and social accessibility of our churches and agencies for people with disability. Remediating barriers and changing the way things are done requires focus, intentional drive and informed support.

In the United Kingdom the experience has been that a disability strategy will succeed or fail on whether there is a dedicated person whose primary responsibility is to lead and resource change. Good intentions, well-presented reports, Bishop-in-Council or Synod resolutions do not effect change. Disability inclusion requires sustained leadership, expertise, coordination and accountability. Engaging people with disability in the life of the church is not a pastoral issue. It goes to the very heart of the church's identity. It is an ecclesial issue involving issues of discipleship, participation, leadership and change.

The proposed Diocesan Disability Adviser will provide the specialist expertise needed. The complexity of issues straddles theology, safe ministry, accessibility, anti-discrimination law, understanding of the complex world of disability, mental health, heritage issues, and understanding of neurodivergence. It requires a person with vision, passion and a wealth of relevant experience.

The Diocesan Disability Adviser will also have a key role in communication with churches and agencies in the Diocese and elevating the awareness in the community that the churches of our Diocese are places of welcome and participation for people with disability.

RECOMMENDATIONS

The Taskforce recommends that Synod:

1. Affirms that people with disability and carers are indispensable members of the Body of Christ and that disability ministry is integral to the nature and mission of the Church.
2. Adopts the Statement of Theology of Disability and the Statement of Disability Policy (Attachments A and B).
3. Adopts the Proposed Way Forward and Budget at Section 5.
4. Establishes a Disability Advisory Committee reporting through the Diocesan Executive to Bishop-in-Council.
5. Appoints the Chair of the Disability Advisory Committee as the Diocese's Disability Champion on Bishop-in-Council and encourages every parish to identify a local disability Champion, Advocate or Contact Person.
6. Establishes a Diocese-funded Disability Adviser position (Attachment C).
7. Supports a staged, Diocese-wide accessibility and inclusion audit including church buildings, websites and parish practices through financial grants to parishes. Grants will assist with an inclusion audit, development of a Disability Action Plan and/or works (including audio/visual aids) to enable accessibility and full participation by people with disability and their carers.
8. Requests parishes and agencies celebrate the International Day of People with Disability on the Sunday before 3rd of December every year. Special services, prayers and preaching should promote awareness, increase understanding, celebrate the achievements and provide opportunities for people with disability.
9. Encourages all parishes to provide clear public information concerning accessibility, including through parish websites.
10. Commits, subject to preparatory progress, to a Diocese-wide Year of Mission with People with Disability and their Carers in 2032.
11. Requests Bishop-in-Council to identify sustainable funding sources, including through reallocation of priorities or grants, gifts, bequests and mission fundraising.

1. Theological Foundations

Anglicans understand and engage with disability in ways that reflect their varied theological traditions. While all use Scripture some will also draw on tradition, reason or experience to shape their approach. Sadly, arguments can emerge about which perspective is more biblical, reasonable or warranted. This can distract many from engaging more deeply. Many subconsciously approach disability as a problem to be managed or a potentially divisive matter best avoided. Diversity of thought, experience or perspective doesn't have to be an obstacle. It can be an opportunity for conversation, listening and learning as we all seek to develop our capacity for working with disabled people and their carers.

The statement of theology expresses those areas where consensus is most likely to exist among our varied traditions. It is not meant to be exhaustive or definitive, examining every evidence or providing the last word on the subject. Others have exegeted biblical passages extensively, examined how approaches have changed over time and created theological perspectives that centre the experience of disability. They do not need to reproduced here. Rather, the statement seeks to encourage understanding, conversation, listening, engagement, action and ongoing reflection.

1.1 Christ's Ministry: Inclusion that Confronts Barriers

Christ's healing ministry was not merely individual or clinical. It was social, relational, and disruptive of attitudes, beliefs, doctrines, and structures that had an exclusionary effect on people with disability.

The paralytic brought through the roof (Mark 2) demonstrates that access is sometimes achieved only by overcoming physical and social barriers—and that such disruption is affirmed, not condemned.

The healing of those excluded by purity laws (e.g. bleeding woman, lepers) reflects a challenge to religious systems that exclude.

The invitation to bring people with disability into the centre of communal life (Luke 14) reflects a re-ordering of social and religious priorities.

The importance of offering practical care to people in need of food, water, welcome, clothing, illness or imprisonment is as though serving the Lord directly (Matthew 25.31-46).

In John 9:1–3, Jesus rejects the idea that disability is a result of sin, reframing it as a place where 'the works of God might be displayed'. Christ shows his wounded hands and side but is not healed (John 20:20). There are no scars. Jesus is raised but is God now disabled?

In 1 Corinthians 12:22–26, Paul insists that those parts of the body that seem 'weaker' are indispensable. God's power is often revealed through weakness, not its removal.

Healing in Scripture is not just physical—it is also restoration to community. These accounts do not simply justify compassion; they require structural change—including within the Church. Inclusion is obedience to Scripture and to marginalise or ignore disabled people is to resist and deny the pattern of Christ's work and God's vision of the church as an interdependent body where the church is incomplete without the gifts, presence, and witness of disabled believers.

1.2 Carers Matter

The Church recognises that unpaid carers are often called to a demanding vocation of long term commitment of care. Their vocation reflects Christ's words on serving the vulnerable: 'Whatever you did for one of the least of these brothers and sisters of mine, you did for me.' (Matthew 25:40).

But too often the Church lacks deeper understanding and awareness of the carer's lived experience. Theirs is a role that in varying degrees, 'subsumes every other role and every other possibility for their lives…' (John Swinton). They are tied to those they care for, by an unspoken obligation and commitment which may even last a lifetime.

The cost and impact of these demands is felt at all levels - physical, emotional, social and spiritual. This evidence highlights how precariously a carer manages their emotional life and consequently, the urgent need for support from the church that speaks to that invisible existence.

With the development of the NDIS, paid carers are also accompanying people to church. These carers can be readily ignored or overlooked, not just because of the nature of the contractual arrangement but because of differences due to ethnicity, language and religious affiliation. If participation is to be a valued experience for everyone then hospitality and welcome for paid carers should not be overlooked or minimised either.

As St Paul said: 'if one member suffers, all suffer together' (1 Corinthians 12:26). It is important that the Diocese commits itself to supporting carers spiritually, pastorally and practically, recognising that the wellbeing of people with disability is inseparable from the wellbeing of those who care for them.

2. Improvement

Jesus used an action-reflection approach when training his disciples for ministry. He invited the twelve apostles to share in his work of proclamation and healing (Luke 9.1-6). He then sent the seventy-two out into the towns and villages to preach, heal and share his ministry firsthand (Luke 10.1-12). On their return (Luke:17-24), they debriefed by sharing their joys and successes while receiving further instruction from Jesus. In this way, the disciples matured in their theological understanding.

Anglicans have long recognised that their traditions, practices and patterns of worship and activity can and must vary according to local needs and culture. Nevertheless, Anglicans also vary in their attitudes to disability and their capacity to change or adjust the church's fabric, ministry, membership and worship to meet varied needs. God's people have the capacity and responsibility to improve aspects of their life together. Their appetite for adjusting features of their life together and capacity to receive feedback can grow when people understand the need to remove barriers to greater participation.

2.1 Learning from the Wider Anglican Communion

Disability theology emerged as a recognisable field in the late twentieth century in the US and Europe.

L'Arche, founded by Jean Vanier in 1964 and later interpreted theologically by writers such as Henri Nouwen, Hans Reinders and Michael Hryniuk, shaped the field by making shared

life with people with intellectual disability a practical school of mutuality, vulnerability, friendship and spiritual transformation.

Work by figures such as Stanley Hauerwas and William Gaventa opened sustained theological reflection on intellectual disability, Christian community and vocation, while Nancy Eiesland's *The Disabled God* gave the field its defining voice by challenging images of disability as tragedy, punishment or merely an occasion for cure.

Subsequent writers including Deborah Creamer, John Swinton, Amos Yong, Thomas Reynolds, Christopher Southgate, Brian Brock and Hans Reinders broadened the conversation from access and pastoral care to theological anthropology, vulnerability, interdependence, friendship, healing, liturgy and the full participation of people with disability in the Body of Christ.

Although much of this work first gained traction in ecumenical and academic settings, it has increasingly been taken up by evangelical, Catholic and more conservative churches through a renewed emphasis on Scripture, the incarnation, the wounded risen Christ, the indispensability of the weaker members of the body, and the missional calling of disabled Christians.

Catholic initiatives have been particularly significant in connecting disability inclusion with sacramental access, catechesis, parish welcome and Catholic social teaching on dignity, participation and the rejection of a throwaway culture. Recent work by bodies such as the National Catholic Partnership on Disability and Vatican reflection on the rights and dignity of persons with disabilities shows how inclusion is moving from specialist ministry to ordinary parish and diocesan responsibility.

The movement has therefore shifted from advocacy at the margins to a more widely shared ecclesial conviction: disability inclusion is not a specialist social program but a test of whether the Church understands the Gospel, the Body of Christ and Christian community rightly.

The Taskforce has examined approaches in:

- the Church of England – national disability strategy, accessibility standards, parish resources
- the Anglican Church of Canada – theological integration and national inclusion commitments
- the Episcopal Church (USA) – structured accessibility, leadership inclusion, and training frameworks
- the Anglican Diocese of Melbourne – a comprehensive Disability Action Plan supported by a Diocesan disability adviser to work with parishes.

Common elements include:

- national or diocesan strategies (not just ad hoc initiatives)
- integration of theology, policy, and practice
- dedicated advisory leadership roles
- strong emphasis on training and resources.

2.2 Developments in Canberra and Goulburn

The Diocese demonstrates:

Strengths

- established program excellence in Embracing Ministries
- explicit recognition of carers and families pioneered by Embracing Ministries
- Every parish has received at least one copy of *Everyone Welcome.* It is primarily a guide to running a disability friendly parish with a very useful and clear seven-step guide to make everyone welcome. It will provide the base from which further supports are developed for parishes.
- high goodwill
- strong theological openness.

Weaknesses

- a fragmented approach that lacks systematic improvement, reporting or development
- Parish capability is limited – to individual clergy initiatives, dependent on clergy and lay leadership responsiveness, hampered by an absence of disability voices or advocacy by carers, and isolated as initiatives depend entirely on local capacity / interest
- limited exposure of disability theology in clergy formation
- lack of practical training for leaders and barriers to parish involvement
- no recognition of the need to have people with disability seen, and seen to be advancing, in the clergy – 'you cannot be what you cannot see'
- under-recognition of carers.

The Diocese has a history of establishing taskforces, developing strategies and then failing to implement them systematically. An example is the Taskforce on older people and ministry, chaired by Archdeacon Emeritus Anne Ranse OAM to examine the participation of the aged in Christian and church life. The initiative sought to encourage churches to include older people in the life of the church; to mobilise, support and resource them.

The report and guide contained many practical suggestions for doing so, as well as particularly useful suggestions in relation to engagement, support and learning from people with dementia. The report, *They belong! They believe,* and the guide, *When I'm old: a guide to pastoral ministry with frail, isolated older people,* were widely distributed to parishes and are available at St Mark's library. It is not clear how widely the report has been implemented by parishes, certainly there has been no concerted push to engage parishes in cycles of learning and improvement, nor any explicit resourcing. It was simply left up to individual clergy to do what they could. It is time for the report's lessons to be freshly brought before parishes as part of a comprehensive approach to disability.

2.3 Survey Findings

The Taskforce conducted a comprehensive survey of parishes across the Diocese in order to develop an indicative census of people with disability within parish life, as well as their carers, clergy, lay leaders and other parishioners. The survey sought both quantitative and qualitative insights. It aimed to estimate the number of people with disability and carers present in congregations and to understand their experiences, attitudes and expectations.

The questionnaire also explored beliefs about how the Diocese should approach disability inclusion and asked respondents about theological perspectives on disability and suffering.

The survey instrument was designed and analysed by ORIMA Research. The Taskforce survey had 238 respondents (about 5% of church attendance). Because of the low response rate and the self-selection bias, the survey cannot be regarded as fully representative of the Diocese as a whole or of the broader community but it does provide important directional insights.

In our survey there were more respondents with a physical disability than psychosocial or sensory disability (note 43% of respondents reported having more than one disability) but the differences were not as large as in the general community where relatively more identify as having a physical disability and fewer with psycho-social disabilities. These differences from are likely to be an artifact of our self-selection sampling process in the Survey and not statistically significant.

Identifying as having a physical and/or sensory disability increased progressively with age. This reflects the general community – basically we wear out.

A markedly larger proportion of respondents under 45 identified having a psychosocial disability while fewer aged 65+ identified this way. This also reflects the general community and might reflect greater awareness and diagnosis rates among younger people than actual differences in prevalence.

About a quarter of respondents identified as having sensory disability (eyesight, hearing etc) with prevalence increasing with age.

2.3.1 Welcome – Real but Uneven

The pattern is consistent; the further one is from lived experience of disability, the more positive the perception of inclusion. In the survey, 57% of people with disability and 65% of carers reported they feel welcome in church, while 72% of clergy/leaders and 84% of others reported they felt welcome.

This points to the desirability of exploring, within parishes, and possibly at Diocesan level, the use of Truth Telling Circles where clergy and lay leaders sit down with people with disability and their carers and share experiences.

2.3.2 Practical Gaps

Respondents were asked to choose suggestions for improving inclusivity.

The most common choice was ‘Ask people with disability and their carers what they need.’ This aligns with the principle, ‘Nothing about us without us’, used by disability rights activists and other advocates for democratic decision-making. Again, Truth Telling Circles could be part of this process.

The second most common suggestion raised by people with disability and carers was to improve building access and layout.

Additionally, very few parishes provide training, few have formal disability and carer inclusion statements, 86% do not communicate accessibility clearly, for example on websites, and only 12% provide targeted programs.

Accessibility is both a theological and practical issue.

Churches are places of worship, fellowship and ministry. Where barriers prevent people from fully participating in those purposes, the Church should seek reasonable ways to remove them. They are also public buildings for the purposes of the *Disability Discrimination Act* and must provide access unless doing so would lead to unreasonable hardship.

2.3.3 Carers

Over half of respondents are carers, nearly a quarter feel unrecognized, about 60% report difficulty participating in church life.

2.3.4 Strong Support for Expansion

78% support extending Embracing Ministries to all ages – while that is not practical at this point, appointment of a Diocesan Disability Adviser and the implementation of the Taskforce plans will meet this objective.

2.3.5 Theological questions

The theological questions in the survey produced strong areas of agreement. Ninety-two per cent of respondents agreed that God has endless compassion for those who suffer. Eighty-one per cent agreed that Jesus experienced suffering and that God can help people change what can be changed and accept what cannot. There was also substantial support for the view that disability, pain and suffering are part of the human condition, with 68 per cent agreeing with this statement.

3. Strategic Framework (2027–2032) – The Role of the Diocese

The Diocese is an organisation comprising many parts with parishes, agencies and Anglican Diocesan Services working together in mission. The Strategic Framework depends on all those parts together generating change and momentum, informing and challenging, developing and reviewing.

3.1 Mainstreaming

Disability inclusion should become part of ordinary diocesan life rather than a specialised activity undertaken by a small number of committed individuals.

The Diocese should review policies, training, property planning, communications and ministry practices to ensure they reflect the principles adopted by Synod.

3.2 Formation and Capability

Our clergy and lay leaders are vital to flourishing parishes and to the Diocese. They will have a key role in the success or failure of our ambitions to become an exemplar Diocese welcoming people with disability.

Incorporating disability theology and practice into clergy selection and advancement, including affirmative action to encourage and support candidates with disability, would be desirable. There also needs to be clergy training including for those arriving from other dioceses, lay leadership development and ongoing professional formation with the aim of creating a pipeline of clergy and lay leaders, including people with disability, well trained and confident in dealing with people with disability and carers.

St Mark's is examining the inclusion of disability theology into its curriculum.

3.3 Disability Advisory Committee

The Disability Advisory Committee should provide strategic oversight and advice for the Diocesan Disability Adviser. It should include people with disability and their carers, representatives of key diocesan organisations and persons with relevant professional expertise. The Chair of the Disability Advisory Committee should be the Disability Champion on Bishop-in-Council as recommended by Synod in 2025.

The Committee should:

- advise Bishop-in-Council
- support the Disability Adviser
- monitor implementation
- encourage collaboration across the Diocese
- provide an annual public report on progress.

3.4 Leadership Capacity: Diocesan Disability Adviser

A Diocesan Disability Adviser would be a single full time equivalent role within Diocesan Services with these functions. (See Attachment C for a more detailed description).

- advisory role with parishes, the Pathfinder Parish program, and to the Disability Advisory Committee as well as the Diocesan Executive and Bishop-in-Council
- working closely with Embracing Ministries
- training and resource development – including the production of resources that all parishes can use drawing on *Everyone Welcome* but with additions to encompass disabilities associated with ageing including dementia, frailty and a range of nervous system and sensory disorders
- recruitment of volunteers including from universities and schools
- identifying and seeking community grants, gifts and bequests
- strategic coordination and planning for the Year of Mission with People with Disability and Carers.

2027 is a foundation year in which the Diocesan Disability Adviser role would be refined, the position advertised, an appointment made, and an initial workplan developed. Selection and consultation with a number of parishes to be early Pathfinder Parishes, and the structuring and prioritisation of a Diocese wide buildings audit would be early priorities.

It will be important for the Disability Adviser to work closely with Embracing Ministries which is already engaged in the development of Parish Partnerships. This would also involve development of appropriate website arrangements for providing resources on disability and carer theology and best practice disability inclusion.

3.5 Disability Champions, Advocates and Witnesses

The Taskforce's consultations repeatedly demonstrated that lasting cultural change depends upon people as much as structures.

The Diocese should intentionally identify and support:

- people with disability willing to share their experience and gifts
- carers willing to tell their stories
- clergy and lay leaders with disability
- parish-based advocates and contact people
- speakers and trainers able to assist parishes.

The witness of people with lived experience is indispensable. Their stories illuminate barriers, challenge assumptions and help the Church understand what belonging means in practice.

The Diocese should adopt the principle: 'Nothing about us without us.'

People with disability and their carers should participate wherever possible in policy development, governance, training and ministry leadership.

The Diocese should aspire to see people with disability represented among clergy, licensed lay ministers, parish councils, diocesan committees and public ministry.

You cannot be what you cannot see.

3.6 Relationship with Embracing Ministries

Embracing Ministries provides supportive, safe, and relevant programs and activities for young people with disability, and their families including siblings. It was begun as an Exploratory Ministry Unit in 2016 and in 2025 its new Ordinance established it as a Ministry Unit. The present focus of Embracing Ministries is young people with disability, their parents, carers and siblings, taking a holistic view of the impact of disability on the whole family unit.

The Report explicitly adopts a dual-structure model:

Diocesan Disability Adviser

- Advisory, training, coordination
- Whole-of-diocese scope
- No program delivery

- An element of Diocesan Services.

Embracing Ministries

- Focus: children, families, carers
- Independent governance (protect donor relationships)
- Program delivery
- Educate, train and equip parishes and education institutions about people with disability.

The operating mantra for the Diocesan Disability Adviser and Embracing Ministries would be ‘Collaboration without competition’.

While the Diocesan Disability Adviser would be a part of Diocesan Services, co-location with Embracing Ministries would enable shared learning, aligned communication and efficient use of resources.

The decision to recommend a dual structure approach rather than expanding Embracing Ministries to take on a broader all disabilities all ages role reflects the dependence of Embracing Ministries on a single major donor particularly focused on young people with disability, their families and carers. It also acknowledges that the recent changes to the NDIS which excludes many young people will place many of these families under huge stress as they adjust to the new and as yet ill-defined foundational supports to be provided.

This separation between the Diocesan Disability Adviser role and Embracing Ministries could be re-examined in the longer term after the Year of Mission which is hoped to provide a more secure financial base for Embracing Ministries as well as disability action across the Diocese.

3.7 Spiritual Support and Sustenance for Carers and Carers as Resource for a Praxis Theology of Caregiving

This is a change which will require action by both the Diocese and parishes. Some practical steps would include developing carer support groups, empowering carers in disability ministry, training clergy and providing respite.

Develop carer support groups (see Attachment D: The Jericho Initiative: Spiritual Support and Sustenance for Carers)

A parish-based carers' group to provide prayer, theological exploration, reflection and mutual support.

This kind of initiative shifts the church’s perspective from ‘occasional outreach’ to a deep-rooted theology of accompaniment, of ‘walking with’ another, not necessarily to ‘fix’ their situation, but to witness God’s presence within it.

Empower carers in disability ministry

The National Carer Strategy 2024-2034, which is a national agenda to support Australia's unpaid carers, states:

‘Carers frequently hold important history and knowledge about the circumstances and experiences of the people they care for, that can be valuable to those delivering paid

supports. In many cases, carers' contributions to conveying this information can be vital to ensure appropriate health care, treatment, and support.' (Commonwealth Department of Social Services, 2024, p. 13).

The Church can harness this knowledge and expertise to inform the disability ministries and to create continuous dialogue with the disability community.

Train clergy

Clergy are often trained in pastoral care for illness, bereavement and marriage difficulties but receive little training on the lived experience of carers.

When clergy training includes understanding of the lived experience of carers, this can elicit theological resources relevant for pastoral care and clergy training. Such an initiative, when supported by the church, can provide knowledge and understanding of the role and lives of carers and a resource for a developing 'praxis' theology of caregiving.

Provide respite through congregational life

Respite provision could include:

- companion programs
- volunteer support (this, depending on the nature of support could require working with vulnerable people qualification)
- transport assistance
- practical help
- occasional respite opportunities.

Depending on the nature of support this could require a working with vulnerable people qualification and other training.

As an example, the Covenant Care Day Hospice, sponsored by Holy Covenant Anglican Church, offers carers of people with life-limiting illnesses a day of respite. This gives carers the space to recharge and rest, allows time for themselves, and time to handle personal tasks or manage their own health.

Liturgical recognition

The diocese should develop into their church year a liturgical space about and for carers that includes prayer, preaching and teaching, and an annual Sunday recognising carers during National Carers Week.

4. Strategic Framework (2027–2032) – The Role of Parishes

Parishes must continue to be central to the Diocese's disability and carer responsibilities. There are a number of important examples of parishes taking the initiative to be fully accessible to people with disability and their carers and making this very clear. We need to recognise that not all parishes can or should do everything, and it might be important for some parishes to specialise or offer distinctive programs across a region eg a parish could offer a focus on and programs for children, or alternatively adults, or for a particular disability group. These parishes would become a valuable Diocese-wide resource.

Parish clergy and lay leaders are often overloaded and time poor. Relying solely on parishes taking independent action and urging them to do more will not change our present situation. They need easy to use resources – preferably on line - and the availability of expert training and advisory support. Otherwise improving engagement with people with disability can seem awkward and overwhelming. We have outlined how a Diocesan Disability Adviser role in Diocesan Services could help plug that gap. But we best learn by practical example.

4.1 Pathfinder Model

To provide practical examples and 'road test' resources to be made available to parishes the Taskforce is suggesting a Pathfinder Parish model. An initially limited number of parishes would work with the Diocesan Disability Adviser to develop and trial approaches to genuine inclusion and then assist other parishes.

A staged Pathfinder Parish model would involve:

- a small initial cohort (including the Cathedral) applying change strategies based around *Everyone Welcome's* Seven Steps module. These could be enhanced by employing truth telling/restorative processes with people with disability and their carers in the congregation.
- developing and amending these strategies to embrace an all ages all disabilities model (for example to include dementia and other age related disabilities) and to fit different circumstances (including parish size, rural and urban, local demography and available resources)
- developing 'how to' guides and training packages dealing with inclusion and full participation for people with a range of disabilities and their carers
- inviting visits from interested clergy and lay leaders from other parishes
- in turn providing support to other parishes by working alongside them
- monitoring performance
- gradual expansion.

This would be complemented by encouraging parishes across the Diocese to:

- use *Everyone Welcome* and materials developed by the Pathfinder program as they become available
- participate in audit of buildings and facilities (as above)
- discuss inclusion potentially using truth telling/restorative processes with people with disability and their carers in the congregation
- develop an intentional strategy for fully engaging people with disability and their carers in discipleship
- pursue initiatives and share success stories across the Diocese. Pathfinder Parishes are to be a learning and sharing opportunity not an excuse for other parishes to delay action.

It is important that the Pathfinder approach avoids the trap of having more powerful and well-endowed parishes telling others what they did and how to do it. Accordingly it is

important to have a range of parishes engaging in the program at each stage adapting actions to local conditions. Models can encourage but one size definitely doesn't fit all!

A useful way of developing, spreading and inspiring actions among parishes could be through a networking approach convened by the Diocesan Disability Adviser. Such an approach is outlined in Attachment E.

4.2 Audit

The Taskforce recommends a staged audit of church properties and associated facilities.

The purpose of the audit is not compliance for its own sake. It is to help parishes understand how they can better fulfil their Christian mission of welcome and belonging.

Particular attention should be given to:

- access to buildings for people with wheelchairs, walkers or prams and people who are blind
- accessible seating/placing for people with wheelchairs and walkers with their carers and companions
- hearing assistance
- accessible toilets
- audio-visual accessibility
- clear accessibility information.

The Taskforce recognises that some church buildings possess important heritage values.

St Saviour's Cathedral occupies a special place within this discussion. As the Cathedral Church of the Diocese, the location of major diocesan celebrations and one of the most significant heritage churches in regional Australia, it provides an important opportunity to demonstrate how accessibility and heritage conservation can work together rather than in opposition.

4.3 Improving information \ Parish Websites

One of the great strengths of the Diocese is the rich diversity of its parishes offering a variety of Anglican worship traditions, community and fellowship experiences, building styles etc. Particularly in the larger urban areas within the Diocese, this offers a wide degree of choice to people wishing to join a parish or move between parishes. Gone are the days when you just went to your local, closest Church. For people with disability, and for carers of people with disability, physical and sensory accessibility, liturgical alternatives, tailored programs for people with disability (such as Sunday school for neurodivergent children, services and fellowship groups for adults with intellectual disability).

However few of our parishes offer information that would help someone seeking a spiritual home appropriate to a particular disability or set of disabilities. For example, a first time visitor with disability or a carer of someone in this position might wish to know the following from a parish's website. Does the church have:

- a step-free entrance
- wheelchair seating arrangements

- accessible toilet
- hearing loop and/or captioning on audio visual supports
- a disability contact person
- carer support information
- spaces, liturgies or programs suitable for people with neurodivergence or cognitive challenges.

In the secular world much of this sort of information is widely available for facilities open to the public.

Strategic practice would be for parishes to improve accessibility information as they are able. To centralise the improvement process, the Diocesan Services unit could develop, with support from the Diocesan Disability Adviser, an online Diocesan guide to parish facilities. This would require parishes to report regularly about what they offer and any changes, either improvements or ceasing activity. Alternatively it could develop a guide for parish websites.

4.4 A Year of Mission with People with Disability and their Carers for 2032

The Diocesan Strategic Plan gives priority to the parishes of our Diocese. The proposed year of Mission in 2032 is built around the parishes and Diocesan agencies. As parishes become places of welcome, belonging and participation for people with disability, their families and carers, the value of the role of Diocesan Disability Adviser will be enhanced. That role in encouraging, supporting and equipping parishes will lead to an appreciation for the need for financial sustainability of the Diocesan Disability Adviser.

The cost of engaging this vital role in the Diocese is likely to be around $180,000 per annum. This will require a mixture of funding from the Diocese, from parishes and agencies and from individuals convicted of the importance of this mission for the church. It is achievable if all see its missional necessity.

The traditional way to inspire enthusiasm and charity in a church context is through mission. Many churches support mission disability programs overseas. This time we would ask them to look within our own Diocese and support a ‘diocesan disability fund’.

Mission and fund raising is not to be lightly entered into. Unless carefully planned and fully explained to parishes it is easy to fall flat. Parishes need to know what they would be supporting and why it is an important growth opportunity in our Christian lives – a way of doing ‘what we have failed to do’ in the past – an example of practical Christianity. It would require strong and charismatic leadership with clear support from the Bishop.

Parishes would be encouraged to take action ‘at home’, include the ‘diocesan disability fund’ in their mission giving, and to ask members of their congregation to donate to the fund on a weekly basis. The Diocesan Disability Adviser would seek bequests and philanthropic gifts to the fund.

Churches generally give more readily when they can see what the money will achieve.

A diocesan campaign would seek support for:

- the Disability Adviser position
- parish accessibility grants for poorer parishes covering things like
  - hearing loops
  - livestream captioning
  - church access and seating for people with disability
  - accessible toilets
  - sensory-friendly worship resources.
- leadership development for people with disability
- support for disability theology through an annual essay prize
- carer support groups
- consolidation and expansion of Embracing Ministries programs for the young and families.

For a mission to be held in 2032 the Diocesan Disability Adviser should be asked to develop a business plan for a Year of Mission by 2029, with the Disability Advisory Committee advising Bishop-in-Council of feasibility and timing by early 2030 at the latest.

5. Proposed Way Forward

2027 – Foundation

- Set up Diocesan Disability Advisory Committee.
- Define Diocesan Disability Adviser role.
- Recruit Diocesan Disability Adviser.
- Diocesan Disability Adviser in turn searches for volunteers and researches and bids for community grants.
- Identify Pathfinder Parishes.
- Develop on line practical packages and training based around *Everyone Welcome* seven steps program expanded to include disabilities associated with ageing including dementia.
- Terms of reference for Diocese Wide audit of buildings and accessibility features (the Cathedral should be an urgent priority).

2028–2029, 2030 – Pilot Programs with Pathfinder Parishes and Expansion; Business Plan for Year of Mission

- monitor and review success of pilot programs and resources
- training rollout for additional modules
- additional Parish engagement
- further review and resource development

- Business Plan and feasibility assessment of Year of Mission
- decision on feasibility and timing of Year of Mission.

2031–2032

- diocese-wide engagement
- preparation and possible launch of Year of Mission
- fundraising
- cultural shift.

2032+ – Consolidation

- embed practice
- complete audit – identify parishes which need assistance
- evaluate impact
- prepare next phase.

5.1 Budget

The budget is for a constrained model (≤1 FTE equivalent) without any allowance for a grants program to parishes that need support to achieve accessibility goals.

Budget

Year	Estimated
2027	$80k
2028	$140k
2029	$150k
2030	$180k
2031	$150k
2032	$150k
Total	$850k

6. Conclusion

This Report proposes a reorientation of all levels within the Diocese. This includes all parishes, agencies and the operations of Anglican Diocesan Services.

The survey evidence, theological reflection, and international Anglican practice all point in the same direction:

The Church is not fully itself unless people with disability and their carers are fully present, participating, and leading.

The question for Synod is therefore not whether to act, but how to enact systemic change with sustained commitment.

Attachments

Attachment A – Statement of Theology

Attachment B – Diocesan Policy Statement

Attachment C – Position Description for Diocesan Disability Adviser

Attachment D – Jericho Initiative for Carers

Attachment E – A Networked Approach

Attachment A

Proposed Diocesan Statement of Theology of Disability

The adoption of this statement, calls upon all parishes, agencies, clergy and lay leaders of the Diocese to give effect to these principles in their common life, so that the Diocese may more fully reflect the Gospel by becoming a community in which all are enabled to participate fully.

This Diocese:

1. Affirms our Core Beliefs

1.1 Affirms that every person is created in the image of God and possesses inherent dignity, irrespective of capacity or condition.

1.2 Affirms that people with disability and their carers are indispensable members of the Body of Christ, whose full participation is essential to the Church's life and witness.

1.3 Recognises that the ministry of Christ consistently brought those who were marginalised, including people with disability, into the centre of the community of God's people and into his presence.

2. Adopts a Christian Model of Disability

2.1 Affirms a Christian theological framework, in which:

- disability is understood as part of the diversity of human life
- human beings are characterised by dependence on each other and on God rather than self-sufficiency
- people with disability and their carers are recognised as bearers of gifts of ministry, essential to the Church
- the Church removes barriers - physical, liturgical and cultural - to full participation of people with disability and their carers.

3. Commits the Diocese to being a Community of Belonging

3.1 Affirms that the Church is called to be a community of belonging, in which all people are:

- known
- loved
- welcomed
- enabled to participate fully in worship, fellowship, discipleship
- enabled to minister according to the gifting of the Holy Spirit.

3.2 Recognises the particular impact of disability on carers and families, and affirms that their support and participation is integral to the Church's mission.

3.3 Commits to ensuring that people with disability and their carers:

- have voice in decision-making, and
- are encouraged and enabled to exercise leadership within the Church.

4. Commits to Ongoing Transformation

4.1 Commits the Diocese to a process of continuous theological reflection and cultural transformation, informed by the lived experience of people with disability and their carers.

4.2 Directs that this theological framework underpin:

- the Diocesan Disability Policy
- the development of clergy formation and in-service training, and
- the mainstreaming of disability inclusion across diocesan life.

Attachment B

Proposed Diocesan Statement of Disability Policy

1. Purpose and Foundation

This Policy gives practical effect to the Statement of Diocesan Theology of Disability (Attachment A) and should be read in conjunction with it.

Consistent with that theological framework, the Diocese affirms that disability and the lives of those touched by it are not a peripheral concern but integral to the life and mission of the Church.

This Policy establishes the commitments, expectations and structures by which the Diocese, its parishes and agencies will become communities of belonging for people with disability and their carers.

2. Scope

This Policy applies to:

- all parishes
- all diocesan agencies, and
- all clergy and lay leaders exercising ministry within the Diocese.

It requires intentional, proportionate and accountable action, recognising the diversity of parish size, capacity and context.

3. Core Commitments

In implementing this Policy, the Diocese commits to Belonging and Participation, Dignity and Justice, Recognition of Carers and Families, Voice and Co-Design, and Continuous Transformation.

3.1 Belonging and Participation

To ensure that people with disability and their carers are welcomed without condition and enabled to participate fully in:

- worship
- fellowship
- discipleship and
- leadership.

3.2 Dignity and Justice

To ensure that all aspects of diocesan life are free from:

- discrimination
- stigma
- paternalism, and
- ableism,

and reflect the dignity and agency affirmed in the Diocese's theological statement.

3.3 Recognition of Carers and Families

To recognise that disability impacts families and carers, and to ensure that their participation is supported, and appropriate ministries and pastoral care are developed.

3.4 Voice and Co-design

To ensure that people with disability and carers have a genuine voice in decision-making, and are actively involved in shaping policies, practices and ministries.

3.5 Continuous Transformation

To commit to an ongoing process of:

- listening
- reflection
- repentance where necessary, and
- reform of structures and practices.

4. Accessibility and Inclusion

The Diocese commits to ensuring that its places of worship, service and work become progressively accessible and inclusive.

Accessibility includes, but is not limited to:

- physical access
- digital communication
- sensory-aware worship practices
- inclusive pastoral care, and
- the appropriate use of assistive technologies.

Access is to be understood not as optional provision, but as an expression of faithful stewardship and justice.

5. Parish and Agency Responsibilities

Each parish and agency is asked to develop and implement a Disability Action Plan, proportionate to its capacity, which:

- identifies barriers to participation, inclusion and leadership
- sets measurable priorities to improve accessibility and inclusion
- addresses gaps between stated intentions and actual practice
- engages people with disability and carers in its development and review
- utilises diocesan, Disability Adviser and Embracing Ministries resources as available and appropriate for training and support and draws on learnings from the Pathfinder Parishes program
- identifies local champions or leaders to sustain progress

- is reviewed annually, with progress reported through existing governance processes (e.g. AGM or equivalent).

It is recognised that not all parishes and agencies will feel competent and equipped to do this immediately. The Diocese recognises that there will be a progressive roll out of change but urges all to think about and begin the process. Small actions are better than no actions.

6. Diocesan Implementation and Support

Consistent with the Taskforce recommendations, the Diocese will provide leadership capacity, establish governance and oversight, support formation and training, resource parishes, monitor, report and review.

6.1 Provide Leadership Capacity

Establish and fund a Disability Advisor role to:

- support parishes and agencies,
- assist with training and resource development, and
- coordinate implementation across the Diocese.

6.2 Establish Governance and Oversight

Establish a Disability Advisory Committee to:

- provide strategic oversight
- monitor progress, and
- ensure coordination with Embracing Ministries and other diocesan bodies.

6.3 Support Formation and Training

Promote the development of clergy and lay leaders who are theologically informed, and practically equipped to include and support people with disability and carers.

6.4 Resource Parishes

Provide practical guidance, tools and shared learning, including through:

- The Diocesan Disability Adviser
- Embracing Ministries, and
- Pathfinder Parishes demonstrating good practice.

7. Monitor, Report and Review

- Parishes and agencies will report annually on progress in implementing their Disability Action Plans.
- The Diocese will report periodically to Synod on overall progress and outcomes.
- This Policy will be formally reviewed within five years of adoption.

8. Integration with Diocesan Strategy

This Policy forms part of a broader diocesan commitment to:

- mainstream disability inclusion across all aspects of diocesan life,
- implement a staged parish-based model of change, and
- prepare for a Diocesan Year of Mission with People with Disability and their Carers as a catalyst for cultural transformation and long-term sustainability.

Attachment C

Canberra and Goulburn Diocesan Disability Adviser

Role Description

The Anglican Diocese of Canberra and Goulburn is committed to the inclusion of people of all ages with disability and carers in the life of the church. Their exclusion has been both an injustice and a loss. Their exclusion has diminished the life of the church.

The proposal for appointment of a Diocesan Disability Adviser is predicated on international church experience that disability inclusion requires sustained leadership, expertise, coordination and accountability. It requires dedication and the capacity to work with parishes and Diocesan institutions to effect change. Engaging people with disability in the life of the church is not a pastoral issue. It goes to the very heart of the church's identity.

The Diocesan Disability Adviser position is a strategic culture-change and capacity-building role with access to diocesan leadership.

The Adviser will:

- help people with disability and people who are neurodivergent, and support their carers, to play a full part in church life and ministry
- work with parishes, the Diocesan Disability Advisory Committee and the Director of Diocesan Services
- need to cover issues of theology, pastoral care, the mission of the church, safe ministry, ageing, accessibility, heritage issues, ant-discrimination law and an understanding of the complex world of disability, mental health, and gerontology
- work under the Disability Advisory Committee and in close association with Embracing Ministries whose primary focus is young people with disability, their families and carers
- work initially with Pathfinder Parishes, listening to their needs, assisting in making their churches more accessible, supporting them to assist other parishes develop Disability Action Plans, providing support and advice to parishes and the Diocese, help shape policy and practice, and be an advocate for people with disability and carers
- mobilise volunteers, liaise with church institutions and agencies and schools, encourage cooperation with the Catholic Archdiocese of Canberra and Goulburn and the Canberra Presbytery of the Uniting Church
- oversee the Year of Mission with People with Disability and Carers for 2032 and the Proposed Way Forward in Section 5 of the Taskforce Report
- develop training resources, help adapt *Everyone welcome* to parish circumstances, investigate issues of ageing and dementia, frailty and a range of nervous systems and sensory disorders
- help parishes develop Accessibility Action Plans, websites and social media to advise of inclusion and belonging strategies.

What We are Looking for in our Diocesan Disability Adviser

The personal qualities of the Adviser are:

- insight into the needs and concerns of people with disability and neurodivergence, and carers, in congregations and in lay and ordained roles in the diocese
- understanding of the theology of disability and the need for sustained cultural change across the Diocese to ensure effective action at the parish level
- practical experience or ability to master approaches to training in theology and practice to support that sustained cultural change
- understanding of strategies and learnings from the secular world in facilitating access, inclusion and providing support for people with disability and neurodiversity as well as their carers
- ability to listen and engage effectively, being comfortable with challenge and debate, strong policy making skills
- ability to work collaboratively with colleagues and others
- ability and willingness to advocate for disabled and neurodivergent people, championing for their needs in a variety of diocesan settings
- a strong personal commitment to inclusion of people with disability and neurodivergence as well as their carers
- a person of faith who can work pastorally and theologically.

Attachment D

The Jericho Initiative: Spiritual Support and Sustenance for Carers

Proposed by Winifred Lamb and Dalanglin Dkhar, Carers.

The Jericho Initiative

Jericho is where Jesus stopped for the blind Bartimaeus and the tax collector Zacchaeus. It represents a location where the marginalised and invisible are seen and restored by Christ, mirroring how the church should 'see' and support its carers.

In providing much needed support for people with disability and their carers, the Jericho initiative can shift the church's perspective from 'occasional outreach' to a deep-rooted theology of accompaniment, of 'walking with' another, not necessarily to 'fix' their situation, but to witness God's presence within it.

Jericho aims to provide:

- support for carers at the parish level, and
- the development of this support in clergy education.

Carer's Lives

What is often missing from non-faith-based groups for carers is support at the level of the carers' inner lives.

Recent PhD research work by Dalanglin Dkhar (*Interpreting the Carer Story in Unconditional- a social impact film)* looks at life through the eyes of four carers. The findings reveal the intricate and evolving emotional challenges faced by those who provide care over many years or decades. The film has been used as a consciousness-raising tool in federal government departments, community organisations and as curriculum at university level. It has been screened at two churches as well.

Themes	Codes
1. Sudden beginnings	Sudden start to the carer role Self-identification Emotional shock Life disruption
2. Adapting to unexpected life changes	Acceptance of new role Navigating new responsibilities Role fluidity Implications of long-term caring role Managing a terminal condition Anticipatory coping Unpredictability Dependency on formal systems

Themes	Codes
3. Emotional & psychological impacts on the carer	Empathic distress Emotional suppression Detachment in crisis situations Hypervigilance Role engulfment Trauma Impact of caring on family dynamics Anticipatory grief Isolation due to carer role
4. Carer & community divide	Lack of formal recognition of the carer role Ambiguity in carer support Misconceptions of the nature of caring Lack of awareness of carer contribution Judgement
5. Carer fortitude & advocacy	Proactive mindset Solution focussed Reframing hardships Emotional adaptation Acceptance of unusual circumstances Post-traumatic growth Personal to systemic advocacy Advocacy as empowerment

Figure 1: Table of themes of *Unconditional* script analysis with their codes

From her data, Dalanglin concludes: 'such evidence highlights how precariously a carer manages their emotional life and consequently, the urgent need for support from the church that speaks to that invisible existence.'

As theologian, John Swinton notes, when the caring role 'subsumes every other role and every other possibility for the life of the carer', both parties become 'strangers to themselves.' (Swinton, *Dementia Living in the Memories of God*, 2012, p. 266). This, paradoxically, also results in what carers often discover is a bond with fellow carers as their often invisible lives are implicitly and mutually understood.

To properly comprehend and address this imperceptible change of identity as well as the different levels of emotional stress associated with that change requires psychological and spiritual insight, realism, emotional honesty, understanding, compassion and trust.

The source of insight and support for Christian carers must include the church and the resources of their faith. How this is delivered must fit with carers' needs and their daily demands of care.

There are indeed enormous resources within our faith that are wise to specific challenges to the carer's inner life, but which can, while providing strength and encouragement, also promise personal growth and engender hope through spiritual sustenance and prayer support.

The project will explore how parishes can provide well resourced 'beacons' of support for caregivers by working first through a pilot project.

Framework for the Jericho Initiative

Goal

To provide a supportive online community for carers to grow in faith, find rest in Christ, and discover God's presence in their daily service.

- Biblical identity: it helps carers move from seeing their work as an unwelcome duty to viewing it as calling that can bring blessing and growth
- A Place of Encounter: Jericho Groups will provide a place where carers are seen in the full richness of their roles and restored by Christ's word,

Outcomes

- highlight and address carers' needs in a safe and accessible environment that provides a space for fellowship, listening, teaching, prayer, spiritual sustenance and growth
- combat isolation for carers who cannot access regular church services due to their caring responsibilities
- ensure clergy training includes understanding of the lived experience of carers, to support them developing further theological resources relevant for pastoral care and preaching
- provide knowledge and understanding of the role and lives of carers and a resource for a developing 'praxis' theology of caregiving.

Attachment E

A networked approach

Often great strengths easily become a significant liabilities for complex organisations. Having 60 diverse parishes is a strength. That they so rarely cooperate or collaborate is a weakness, seen most recently in the widespread collapse of deaneries across the Diocese. Developing a network approach is not just an organisation challenge of time and space. Foremost it's a cultural one where psychological barriers are as strong as physical barriers of distance. Even within parishes, the temptation is for leaders to 'know' what's needed without asking or involving disabled people or their carers.

A network is only as good as the process used by members. All too often, it is assumed that leaders know how to identify, develop and engage around matters of common interest and concern. Often unspoken obstacles concerned with control and affinity bias prevent initiatives from developing. Effective networks emphasise what is shared with each other and learning through cycles of action and reflection, not the differences that reinforce separation or predetermined positions.

A network approach might benefit from using a facilitated group conference process. This process is different from having an ordinary meeting where contrasting claims are presented and positions defended. Starting with a dispute often frames everything as conflict of win/lose which leaves everyone disappointed.

A group conference process is focused around developing a shared understanding of the issues so that shared interests can be identified in order to support both constructive action and capacity building to occur. It is designed to give voice to the voiceless and a table where people in that location can speak and address issues as they arise over time.

Such a facilitated process involves 3 steps.

1. Preparation, particularly inviting participants by priming their interest to engage in open conversation and explaining the process when people are otherwise resistant because their needs are often ignored, overlooked, unmet
2. Convening the group conference where all interested parties (disability, carers, wardens etc) share the story of disability in that location, identify general issues, after which specific options are worked up into an agreed pathway of action. The meeting moves through 4 stages - describing, explaining, reflecting, negotiating. This allows tangled matters to be orderly handled. It focusses on listening to the stories of those who are present and experienced. The goal is to get a deep and rich picture of what happens, not what leaders think is happening. This primes people to listen and learn.
3. Follow up by reviewing progress and adjusting plans as circumstances, needs and people change. Any agreement which is reviewed later should be in conference and not by a small group of nominees. The agreement is negotiated rather than imposed or enforced by someone who decides what's im/possible. The goal is to create a responsive culture.

The group conference approach is far more difficult to use than it appears or is often practised. Time-challenged leaders skip preparation beforehand. Poorly prepared

participants are then often rushed through to solutions. Everything quickly becomes a fight over priorities. Follow-up is often delegated or not done at all.

The group facilitated process aims to develop both a shared understanding and commitment to action, by helping people to disentangle problems that often become bundled together over time. It allows thoughts and action to align thereby enabling organisations to learn more effectively.