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Original Article

Accessibility centers in brazilian federal institutions and contributions of occupational therapists for the inclusion of persons with disabilities in higher education[1]

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Abstract: Introduction: Inclusion programs for students with disabilities in Federal Institutions of Higher Education (IFES) seek to favor access and permanence based on respect for diversity in the university environment. The Occupational Therapy can help developing these programs. Objective: To analyze the access of the population with disabilities to higher education, considering the premises of the Inclusion Program INCLUIR of the Ministry of Education. Reflect on the contribution of occupational therapists in this program. Method: The descriptive-analytical research based on documentary analysis identified 55 Inclusion Program centers in the IFES, recognizing the developed actions. We studied the curriculum and research groups in the IFES with an occupational therapy course regarding this subject. We interviewed three occupational therapists that coordinated these programs. Results: We observed progress in the inclusion of people with disabilities in higher education, encouraged by government programs. The occupational therapy curriculum of the 14 IFES, as well as their research groups, do not indicate activities in the area of Education, which would make it difficult to practice professional technical actions in the area. Eight of the 55 nuclei have occupational therapists with a differential action of the professional capacity to perceive and favor the contact with the diversity of realities among students, which would potentialize equalization actions in the daily academic life, especially the permanence of people with deficiency. Conclusion: There is an urgent need to increase inclusion programs and the participation of occupational therapist, to increase the organization and management of actions for more dialogue between the IFES instances and to favor the entry and stay of students with disabilities.

Keywords: *Occupational Therapy, Disabled Persons, Education Higher, Mainstreaming (Education), Equity.*

Núcleos de acessibilidade em instituições federais brasileiras e as contribuições de terapeutas ocupacionais para a inclusão de pessoas com deficiência no ensino superior

Resumo: Introdução: Programas de inclusão de estudantes com deficiência (EcD) em Instituições Federais de Ensino Superior (IFES) buscam favorecer acesso e permanência considerando-se o respeito à diversidade no ambiente universitário. A terapia ocupacional pode contribuir para desenvolver esses programas. Objetivo: Analisar o acesso da população com deficiência ao Ensino Superior, considerando as premissas do Programa INCLUIR do Ministério da Educação, além de refletir sobre a contribuição de terapeutas ocupacionais nesse programa. Método: Investigação descritiva-analítica baseada em análise documental identificou 55 núcleos do Programa INCLUIR em IFES, reconhecendo ações desenvolvidas. Nas IFES que ministravam graduação em terapia ocupacional, foram estudados

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os currículos e grupos de pesquisa relacionados ao tema. Foram entrevistadas três terapeutas ocupacionais coordenadoras desses programas. Resultados: Observou-se progresso na inclusão de pessoas com deficiência no ensino superior, incentivado pelos programas governamentais. Os currículos de terapia ocupacional das 14 IFES que oferecem graduação e seus grupos de pesquisa não indicam atividades na área da Educação, o que dificultaria o exercício de ações técnicas profissionais nesse campo. Oito dos 55 núcleos contam com terapeutas ocupacionais e neles há um diferencial da ação pela capacidade profissional de perceber e favorecer o contato com a diversidade de realidades entre estudantes, o que potencializaria as ações de equiparação no cotidiano acadêmico, favorecendo especialmente a permanência. Conclusão: Há necessidade de aumentar os programas de inclusão e a participação da terapia ocupacional, de forma a ampliar a organização e o gerenciamento de ações para maior diálogo entre as instâncias das IFES, e favorecer o ingresso e permanência de estudantes.

Palavras-chave: *Terapia Ocupacional, Pessoas com Deficiência, Educação Superior, Inclusão (Educação), Equidade.*

1 Introduction

The conditions indicated in the Guidance Document of the INCLUIR Program (BRASIL, 2013, p. 11) will be considered as disabilities in this study.

> [...] people with disabilities are those who are physically, sensorially and intellectually impaired, who may have obstructed their participation on an equal basis with others when interacting with attitudinal and environmental barriers. Thus, disability does not constitute a disease or disability, and social policies, aimed at this population group, are not restricted to clinical and care actions.

The access and permanence of people with disabilities in Higher Education are related to their processes of social participation, considering the exercise of rights, the use of material and cultural assets, and especially the understanding of society about the phenomenon of disability. In other words, biomedical or educational parameters for understanding disability are the complexity of social processes and opportunities for social participation of people with disabilities.

Since the 1960s, debates brought by the proponents of the social model of understanding the disability favor the understanding of how and why disabled people access and may or may not have their rights ensured in specific social contexts, as in this case, in the Higher Education. Among these authors, the contributions of Ferreira (2008), Barnes (2009), Abberley (1987) and Diniz (2013) are highlighted.

The social model of disability considers it as a social problem, without neglecting the bodily and functional dimension involved in this human condition, and it can have a positive impact on the implementation of health and human rights policies, since inequality prioritized reparation measures are provided and not only rehabilitation sanitary measures (DINIZ; MEDEIROS; SQUINCA, 2007).

The inclusion of young people in Higher Education can be understood as a condition that favors the right to social participation. Rights do not exist in themselves. They are only validated in their exercise, minimizing socially imposed inequalities. In the case of disability, the different clinical settings can impose bodily, psychological or emotional impediments that, together with social processes, they bring challenging consequences and restrictions to the possibilities of social participation of this group. Thus, experiences, imaginary contents and stereotypes related to disability and the person with the disability are part of a social and historical construction. Participation in higher education, for example, reveals the fragile understanding of the rights placed for this group.

The social participation is a guideline for many actions of professionals who work with people with disabilities, including occupational therapists.

According to Teixeira et al. (2009, p. 235), the concept of participation has a bond in the social sciences linked to theories of democracy and also covers the political dimension, "[...] it is a question of intervening in decision-making processes that affect the collective", which people with disabilities translated into their movements for reaffirmation and exercise of rights.

Oliver et al. (2013, p. 4) consider that fostering participation can support technical actions that move

> [...] from priority to repairing a body and behavioral disability, to incorporate other dimensions of disability, impairment and/or disruption experienced by people with disabilities in activities and restrictions on the participation.

Thus, occupational therapy

> [...] has sought to contribute to the development of proposals for care focused on the complexity of disability processes, limitations and restrictions on the participation (OLIVER et al., 2013, p. 4).

Participating in teaching experiences is linked to the complexity of social contexts. Lack of technical support or resistance from professors and lack of family participation or individual difficulties of the person with disabilities are factors that should not be neglected, but it is not possible to attribute to one of them the non-effectiveness of inclusive teaching processes that depend on effective transformations in the field of social policies and human rights.

Many professional areas have conducted studies and improved their technical actions to follow the reality of people with disabilities, and occupational therapy is one of them. Historically, this area has acted with a technical proposition, which is linked to the understanding and support to the ways of life produced in the interfaces of daily life, and can contribute to facilitate emancipatory processes of life and autonomy, either to enable access to a right and participation in social life or for the provision of assistive technology, for example. However, studies on disability are scarce, as Rocha, Nicolau and Souza (2013, p. 10) showed in a research that revealed that only 22.3% of the Brazilian dissertations and theses published in the area between 2007 and 2011 dealt with the disability and focused on "[...] clinical intervention and the search for assessing the functionality/disability and the effects of interventions on subjects treated in occupational therapy."

The authors said that the studies indicate

> [...] the need to know the possibilities and restrictions of the social participation of people with disabilities, as well as aspects of their daily life, family relationships, leisure, and uses of assistive technology (ROCHA; NICOLAU; SOUZA, 2013, p. 10).

On the other hand, they also affirmed the need for research on "... deficiency in the health, social, cultural, education and historical points of view" (ROCHA; NICOLAU; SOUZA, 2013, p. 11).

In another bibliographic review study, Nogueira et al. (2016) investigated the disability-related topics addressed by professionals in the journals of *Cadernos Brasileiros de Terapia Ocupacional* and *Revista de Terapia Ocupacional* (USP), between January 2010 and June 2016, when 603 publications were located and only 89 (15%) of them were addressed disability. Of this total, 29 (29%) articles referred to disability and formal education. Three (0.49%) of them were about Higher Education and the perceptions of people with and without disabilities on aspects of physical or attitudinal accessibility.

Baleotti and Omote (2014) study on the conception of occupational therapy professors of the disability concluded that they tend to the interactionist and social conceptions of disability.

In the research on attitudinal accessibility, Ponte and Silva (2015, p. 270) identified barriers related to the perception of coexistence between people with and without disabilities in a university and indicated that the occupational therapy intervention should focus on the social context of the subject, pointing out the need for new research

> [...] interconnecting the work of the occupational therapist and the possible contributions of this professional in the elimination or minimization of barriers related to different attitudes.

Salles et al. (2010) investigated the autonomy and independence of people with disabilities from physical accessibility in a public university building. In this study, 73% of the participants were satisfied about access, even though there was no respect for basic accessibility determinations guided by the Brazilian Association of Technical Standards (ABNT). Even without direct reference to the lower usability of spaces where inadequacies were identified, participants indicated possible changes to improve environmental conditions.

The access and permanence in Higher Education would be one of the ways to favor

> [...] the exercise of rights of people with disabilities and the approximation of this population to collective spaces where they can be recognized as social and political subjects (OLIVER et al., 2013, p. 5).

This study shows the importance of the access of young people to Higher Education, recognizing the contributions of the *INCLUIR* Program of the Ministry of Education (BRASIL, 2005b), and the undergraduate courses in Occupational Therapy of Federal Institutions of Higher Education (IFES). Thus, in its technical action, the occupational therapist can deal with different institutional actors in an expanded space constituted by professors, employees, family and pedagogical project, which would strengthen alternatives of permanence of Students with Disability (SwD) in Higher Education.

The *INCLUIR* Program was created by the Ministry of Education through the Secretariat for Higher Education (SESu) and the Secretariat for Continuing Education, Literacy, Diversity and Inclusion (SECADI), foreseen from 2005 to 2011 (BRASIL, 2013). This proposal sought to overcome

existing difficulties and to induce the inclusion of SwD in IFES, considering that educational establishments of any level, step or modality would provide conditions for access and use of all environments by people with disabilities or with reduced mobility, including classrooms, libraries, auditoriums, gymnasiums, and sports facilities, laboratories, leisure areas, and toilets.

The main objective of the Program was to foster the creation and consolidation of Accessibility Centers in the IFES to carry out actions aimed at integrating people with disabilities into academic life, through the elimination of attitudinal, pedagogical, architectural and communication barriers. Since 2005, different notices have been launched. The last one in 2010, proposed implementing actions foreseen in the Program (BRASIL, 2010a). Among the proposals accepted, they included those of support to the already existing Centers, considering as Nucleus of accessibility

> [...] the constitution of physical space, with a professional responsible for the organization of actions, articulation between the different departments and departments of the university for the implementation of accessibility policy and effectiveness of teaching, research and extension relationships in the area (BRASIL, 2010a, p. 52).

The IFES, Federal Institutes of Education, Science and Technology (IFET) with courses of higher level and State Institutions of Higher Education could present proposals.

Rodrigues and Faria (2017), Maciel and Anache (2017), Cabral (2017), Cabral and Melo (2017), Nozu, Bruno and Cabral (2018) research also analyzed the assumptions of the *INCLUIR* Program, verifying their potentialities and fragilities in dialogue with the propositions of this study.

2 Method

This is an exploratory, descriptive and analytical study, developed between 2017 and 2018, in two phases.

The first phase was a documentary research that sought subsidies to understand the constitution of the IFES *INCLUIR* Program Centers. Besides to consulting the legislation and programs for the inclusion of people with disabilities in Higher Education, public information was collected from March to August 2017on the IFES and its Centers, and the Higher Education Census of 2016.

In the second phase, those that developed undergraduate courses in occupational therapy were identified in the IFES with the *INCLUIR* Program, analyzing curricula and research groups related to the Inclusion of People with Disabilities in Higher Education. In the case of Programs under the coordination of occupational therapist, this professional was interviewed to know the activities and attributions assigned to him.

The hypothesis is that occupational therapy could contribute institutionally to the Centers of Inclusion of the IFES because it is a professional and knowledge area, which enables to develop and expand processes of social participation. In this way, it was expected that there would be professors, students or professionals subsidizing the programs in the IFES with *INCLUIR* Program and in the graduation in occupational therapy.

In a documentary research, the Guidance Document of the *INCLUIR* Program - Accessibility in Higher Education (BRASIL, 2013) was consulted, in which proposals are presented to build a policy of inclusion and accessibility in the institutions, identifying 55 IFES in the consultation that were benefitted by the Program. In the websites of these IFES, their Centers of Inclusion and Accessibility were searched in relation to Creation date, Professional Teams, Coordinator name, and Contact. When this information was not available virtually, it was requested by e-mail.

Information on active occupational therapy courses at the IFES was provided by the National Network for Teaching and Research in Occupational Therapy (RENETO) and indicated that on July 13, 2017, there were 16 active courses at IFES, 14 of which were based at 55 IFES that had Centers referenced in the SECADI/Sesu document (BRASIL, 2013).

For the identification of the subjects related to the education of people with disabilities, the curricula of the 14 undergraduate courses available on the IFES websites were analyzed. Those curricula not located by this means were consulted in an earlier study by Pan (2014).

All course coordinators were consulted about the performance of occupational therapy in the *INCLUIR* Programs, through a form provided on the Google Forms platform, in which information was requested on the participation of undergraduate courses in the Institutional Programs. The form[2] identified that three of the 14 active courses had occupational therapists as Center coordinators, who were virtually interviewed. In this article, some contributions from the interviewees will be discussed.

Also, in the IFES that provided occupational therapy, their active research groups were searched in the Directory of Research Groups of CNPq (CONSELHO..., 2018), considering all groups located in any area of knowledge. Four search terms were used: Inclusion; Accessibility; Assistive Technology, and Higher Education, which identified 62 research groups that presented terms related to Education and Social Inclusion: Sports, Inclusion, Blindness, Deafness, Adapted Sport, Special Education, Disability, Adapted Physical Education, Adaptive Motor Activity and Audiovisual Translation, as well as Accessibility, Assistive Technology, Inclusion and Higher Education.

A descriptive analysis was carried out on the information about the number of students in Higher Education and the IFES that provided courses in occupational therapy. The discussion included the thematic analysis of the interviews, considering two categories: intervention differential and theoretical conception adopted by professionals to carry out their activities.

3 Results and Discussion

3.1 Access to Higher Education

It is worth highlighting that there was an increase of 8.1% of Brazilians who completed Higher Education between 2004 and 2013. In 2013, this increase was 15.2%, "[...] meaning that one in seven Brazilians has completed higher education" (INSTITUTO..., 2014, p. 122).

However, youth access to formal education has differences between income and skin color groups, with disadvantages for those identified as brown-skinned or blacks, women, as well as for young people in the North, Northeast, South and Midwest Regions, and those who report some type of disability. These populations experiencing conditions of greater vulnerability have more difficult access to formal education, and in Higher Education, this difference is expressed more significantly.

According to the School Census of 2016 in Higher Education, 1% of those enrolled are people with disabilities and, in Basic Education, this percentage is 2% (INSTITUTO..., 2016c). It is important to highlight that the Population Census of 2010 indicated 4.10% of young people with disabilities[3] and 6.7% of them had a High School diploma (OLIVEIRA, 2012; INSTITUTO..., 2010, 2016a).

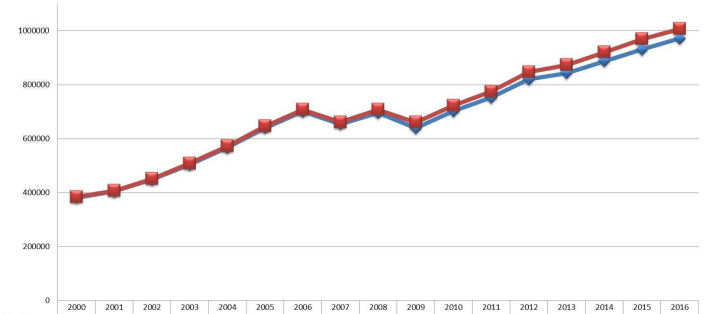
As shown in Figure 1, there was a 254% increase in the number of students with disabilities enrolled in Basic Education and Higher Education between the years 2000 and 2016, noting that the increase in the number of these enrollees occurs in 2000.

This increase continued between 2009 and 2015, which could be related to the implementation of government programs, such as the University for All Program (PROUNI) and the Student Financing Fund (FIES).

PROUNI is a Federal Government program created in 2004 and institutionalized by Law 11,096. It increased the participation of young people in Higher Education through the granting of full and partial scholarships to undergraduate students and sequential training courses of private institutions of higher education. The program includes low-income students and gives part of the scholarships to people with disabilities, according to information provided by the PROUNI - SISPROUNI Computerized System (BRASIL, 2005a).

Since the creation of these programs, there has been an increase in the number of beneficiaries.

> PROUNI registrations continued to increase, from about 82,000 fellows in 2005 to 440,000 in 2013. On the other hand, FIES enrollments decreased by 22% between 2005 and 2009. This decrease has occurred due to the



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Higher	2173	2898	2425	5078	5395	6327	6960	6943	12018	20530	19869	22455	26663	29221	33475	37986	35016
Basic	382215	404743	448601	504039	566753	640320	700624	654606	695699	639718	702603	752305	820433	843342	886815	930683	971372

Figure 1. Evolution of enrollments of people with disabilities in Basic Education and Higher Education.

> appearance of PROUNI in 2005. However, in 2010 and 2013 there is a new increase in FIES enrollment, from 160 thousand to 910 thousand enrollments (TACHIBANA; MENEZES FILHO; KOMATSU, 2015, p. 34).

The higher number of students in Higher Education can also be influenced by the Federal Universities Restructuring and Expansion Plan (REUNI), which increased the number of students enrolled in the IFES (BRASIL, 2007).

However, according to the 2016 Census, the percentage of students with disabilities in Basic and Higher Education is still low, totaling 2% and 0.99% of the enrollment group, respectively, even, there is a compulsory enrollment for children with disabilities in Basic Education.

In addition to the *INCLUIR* Program, the National Plan for the Rights of the Person with Disabilities - *Viver Sem Limite* was instituted in 2011, where the inclusive educational system would strengthen in Higher Education, providing for the expansion of Accessibility Centers in all IFES (BRASIL, 2011).

It is worth highlighting the possibility of a greater number of students with disabilities in public HEIs, promoted by Decree 9.034/2017, which mandated proportionality among the vacancies reserved for self-declared blacks, brown-skinned, indigenous people and people with disabilities, and distribution in the federal unit of HEI, according to the last Population Census (BRASIL, 2017).

3.2 Access and permanence of young people in Higher Education: *INCLUIR* PROGRAM

The *INCLUIR* Program presented 55 IFES with active or developmental accessibility Centers in 2013. According to Table 1, 40% of them were located in the Southeast Region, 22% in the Northeast Region, 16% in the North and South Regions, and 6% in the Midwest Region.

In the websites of these Centers, their location in the IFES or even contact for information was not indicated. For 12 of them, it was possible to access information through the electronic site, and, to the other 43 Centers, an information request was sent via e-mail to the coordinators, to the location of the person in charge of the work team and year of creation. Return information about 16 Centers was obtained.

Table 1 shows information on electronic websites and the Census of Higher Education 2016, which organizes data from annual questionnaires completed by HEIs, which includes number of students, enrolled students, graduates, vacancies, student funding and assistive technology resources for people with disabilities, among other information.

The centers were created between 2006 and 2018, and 80% started activities between 2006 and 2013 (n=44). In 24 IFES, activities were constituted between 2011 and 2013. The largest number of students with disabilities occurred in 2016.

Even though in some IFES there are more students with disabilities, such as in the UFV (2,619 students), UFPB (1,394 students) and UFRGS (726 students), this number represents less than 4% of the total number of students with disabilities in each IES. At least 4.1% of vacancies would be required to comply with current legislation (Decree No. 9.034 / 2017), since, in the 2010 Census, this was the proportion of Brazilians with disabilities between 18 and 34 years old, with a total of 7,839,344 people with disabilities (INSTITUTO..., 2010). Therefore, there is an effort by these IFES to carry out inclusion programs that must be considered, which continue to increase the number of vacancies for SwD.

According to the information provided by the Centers websites, all of them promoted actions for architectural accessibility. However, the reports of the occupational therapists interviewed[4] indicated that physical accessibility could be difficult to solve, even if resources were available to make adjustments since bureaucratization of bids disrupted or impeded the implementation of necessary modifications.

In general, the actions developed in the programs were related to individual adaptations linked to environmental or pedagogical issues. Actions aimed at the academic community, including the debate of the rights of people with disabilities, were incipient. In most IFES, social disadvantages were not discussed and actions focused on individual adequacy needs were focused on the clinical conditions of the subjects, emphasizing on a deficiency approach based on the clinical model, according to documents of the Programs (BRASIL, 1996, 2005b, 2017).

In this sense, and based on Oliver, Barros and Lopes (2005) and in our professional experiences, it is worth considering the deficits in the provision of care in public policies of health and rehabilitation. Thus, the place of the clinic may be unoccupied due to the precarious investment in the health actions directed to the disability, transferring them to

Table 1. Federal Institutions of Higher Education supported by the *INCLUIR* Program, according to Region, year of creation of the Center and number of students enrolled in 2016.

A	B	C	D	E	F	G	H
HEI Region	Name/ Acronyms of HEI	Reference Links	Name of Inclusion Program/Year of Program Creation	Total number of students linked to HEI	Total number of students with disabilities in IES	Incoming Students 2016	Incoming people with disabilities 2016
Midwest	Universidade Federal de Goiás (UFG)	Sensibiliza (2018) Universidade Federal de Goiás (2018)	Núcleo de Acessibilidade – 2008	29.283	241	23.420	198
	Universidade Federal do Mato Grosso Sul (UFMS)	Universidade Federal de Mato Grosso do Sul (2018)	Divisão de Acessibilidade e Ações Afirmativas – N.L**	21070	520	16.244	362
	Universidade Federal do Mato Grosso (UFMT)	Universidade Federal do Maranhão (2018a)	Núcleo de Inclusão e Educação Especial – NIEE / Núcleo de Acessibilidade (NUACES) - 2012	35.259	22	19.785	13
	Universidade de Brasília (UnB)*	Universidade de Brasília (2018)	**NTAAI – Núcleo de Tecnologia Assistiva, Acessibilidade e Inovação -2011**	**44.317**	**190**	**34.878**	**150**
Northeast	Universidade Federal do Alagoas (UFAL)	Universidade Federal do Alagoas (2018)	Núcleo de Acessibilidade da UFAL (NAC) – 2013	34.875	473	21.644	306
	Universidade Federal da Bahia (UFBA)	Universidade Federal da Bahia (2018)	NAPE – Núcleo de Apoio à Inclusão do Aluno com Necessidades Educacionais Especiais – 2008	38.682	278	35.146	254
	Universidade Federal do Ceará (UFC)	Universidade Federal do Ceará (2018)	Secretaria de Acessibilidade – 2010	32.189	596	26.868	500
	Universidade Federal de Campina Grande (UFCG)	Universidade Federal de Campina Grande (2018)	Núcleo de Acessibilidade e Inclusão – 2016	18.413	140	112	15344
	Universidade Federal Rural do Semiárido - Mossoró - RN (UFERSA)	Universidade Federal Rural do Semiárido (2018)	CAADIS – Coordenação Geral de Ação Afirmativa, Diversidade e Inclusão Social UFERSA – 2012	11855	1	0	9214
	Universidade Federal do Maranhão (UFMA)	Universidade Federal do Maranhão (2018b)	Núcleo de Acessibilidade (NUACES) – 2010	4373	412	30637	344
	Universidade Federal da Paraíba (UFPB)*	Universidade Federal da Paraíba (2018)	Comitê de Inclusão e Acessibilidade – CIA – 2013	42053	1394	29008	985

*These IFES have undergraduate courses in occupational therapy, so they are marked with an asterisk (*) and in bold; ** NL = Not Located the year the program was created. Source: Own elaboration based on INEP data (INSTITUTO..., 2016a, 2016b, 2016c).

Table 1. Continued...

A	B	C	D	E	F	G	H
HEI Region	Name/ Acronyms of HEI	Reference Links	Name of Inclusion Program/Year of Program Creation	Total number of students linked to HEI	Total number of students with disabilities in IES	Incoming Students 2016	Incoming people with disabilities 2016
Northeast	**Universidade Federal de Pernambuco (UFPE)***	Universidade Federal de Pernambuco (2018)	**NACE – Núcleo de Acessibilidade da Universidade Federal de Pernambuco –** 2012	**37533**	**30**	**32570**	**26**
	Universidade Federal do Piauí (UFPI)	Universidade Federal do Piauí (2018)	Núcleo de Acessibilidade da Universidade Federal do Piauí (NAU) – 2014	38111	712	28133	532
	Universidade Federal do Recôncavo da Bahia (UFRB)	Universidade Federal do Recôncavo da Bahia (2018)	NUPI – Núcleo de Políticas de Inclusão – 2011	10414	18	9907	17
	Universidade Federal do Rio Grande do Norte (UFRN)	Universidade Federal do Rio Grande do Norte (2018)	CAENE (Comissão permanente de apoio a estudantes com necessidades especiais) – 2010	35461	122	28313	103
	Universidade Federal Rural de Pernambuco (UFPE)	Universidade Federal Rural de Pernambuco (2018)	Núcleo de acessibilidade da UFRPE – 2013	16132	37	12198	31
	Universidade Federal de Sergipe (UFS)*	Universidade Federal de Sergipe (2018)	**Divisão de Ações Inclusivas (DAIN) – 2013**	**33525**	**322**	**27548**	**263**
	Universidade Federal do Vale do São Francisco (UNIVASP)	Universidade Federal do Vale do São Francisco (2018)	Coordenação de Políticas de Educação Inclusiva (CPEI) – 2012	8244	4	6911	4
North	Universidade Federal do Acre (UFAC)	Universidade Federal do Acre (2018)	Núcleo de Apoio à Inclusão – NAI – 2008	13238	306	9068	226
	Universidade Federal do Amazonas (UFAM)	Universidade Federal do Amazonas (2018)	O Núcleo de Inclusão e Acessibilidade, o *EUAPOIO* – 2013	36334	113	30267	98
	Universidade Federal do Pará (UFPA)*	Universidade Federal do Pará (2018)	**CO -ACESS (vinculada a SAEST – Assistência Estudantil) – 2012**	**50270**	**380**	**38405**	**282**
	Universidade Federal Rural da Amazônia (UFRA)	Universidade Federal Rural da Amazônia (2018)	Acessar – Núcleo Amazônico de acessibilidade, inclusão e tecnologia – 2012	8041	2	6573	0

*These IFES have undergraduate courses in occupational therapy, so they are marked with an asterisk (*) and in bold; ** NL = Not Located the year the program was created. Source: Own elaboration based on INEP data (INSTITUTO..., 2016a, 2016b, 2016c).

Table 1. Continued...

A	B	C	D	E	F	G	H
HEI Region	Name/ Acronyms of HEI	Reference Links	Name of Inclusion Program/Year of Program Creation	Total number of students linked to HEI	Total number of students with disabilities in IES	Incoming Students 2016	Incoming people with disabilities 2016
North	Universidade Federal de Roraima (UFRR)	Universidade Federal de Roraima (2018)	Núcleo Construir – Núcleo de Acessibilidade no Ensino Superior – 2012	9841	177	6548	126
	Universidade Federal do Tocantins (UFT)	Universidade Federal do Tocantins (2018)	O Núcleo de Inclusão e Acessibilidade do Deficiente – NIADI/ UFT (programa de extensão) – 2015	21006	240	16648	198
	Universidade Federal do Amapá (UNIFAP)	Universidade Federal do Amapá (2018)	NAI – Núcleo de Acessibilidade e Inclusão – 2018	12899	67	10500	60
	Fundação Universidade Federal de Rondônia (UNIR)	Fundação Universidade Federal de Rondônia (2018)	Centro de Apoio aos Portadores de Necessidades Especiais (CAPNES) – 2010	11799	88	9673	78
Southeast	Universidade Federal do ABC (UFABC)	Universidade Federal do ABC (2018)	Núcleo de Acessibilidade da UFABC	13894	160	11977	122
	Universidade Federal do Espírito Santo (UFES)*	Universidade Federal do Espírito Santo (2018)	**Núcleo de Acessibilidade da UFES (NAUFES) – 2011**	**25404**	**253**	**23700**	**223**
	Universidade Federal Fluminense (UFF)	Sensibiliza (2018) Facebook (2018a)	A Divisão de Acessibilidade e Inclusão – Sensibiliza UFF – 2009	67588	71	45536	36
	Universidade Federal de Juiz de Fora (UFJF)	Universidade Federal de Juiz de Fora (2018)	DIAAF (Diretoria de ações afirmativas) – 2009	35421	168	20357	133
	Universidade Federal de Lavras (UFLA)	Universidade Federal de Lavras (2018)	Programa de apoio a discentes com necessidades educacionais especiais (PADNEE) – 2015	12504	46	10151	31
	Universidade Federal de Minas Gerais (UFMG)*	Universidade Federal de Minas Gerais (2018)	**Núcleo de Acessibilidade e Inclusão – 2011**	**39524**	**4**	**32142**	**2**
	Universidade Federal de Ouro Preto (UFOP)	Universidade Federal de Ouro Preto (2018)	Núcleo de Educação Inclusiva (NEI) – 2006	15314	87	13080	64

*These IFES have undergraduate courses in occupational therapy, so they are marked with an asterisk (*) and in bold; ** NL = Not Located the year the program was created. Source: Own elaboration based on INEP data (INSTITUTO..., 2016a, 2016b, 2016c).

Table 1. Continued...

A	B	C	D	E	F	G	H
HEI Region	Name / Acronyms of HEI	Reference Links	Name of Inclusion Program/Year of Program Creation	Total number of students linked to HEI	Total number of students with disabilities in IES	Incoming Students 2016	Incoming people with disabilities 2016
Southeast	**Universidade Federal do Rio de Janeiro (UFRJ)***	Universidade Federal do Rio de Janeiro (2018), Sistema de Informação e Gestão de Projetos (2018a)	**NIA – Núcleo Interdisciplinar de Acessibilidade – 2007**	**57744**	**130**	**39150**	**78**
	Universidade Federal Rural do Rio de Janeiro (UFRRJ)	Universidade Federal Rural do Rio de Janeiro (2018)	Núcleo de Acessibilidade e Inclusão da Rural (NaiRural-RJ) – 2012	27245	24	19284	19
	Universidade Federal de São Carlos (UFSCar)*	Universidade Federal de São Carlos (2018)	**Incluir – Núcleo de Acessibilidade da UFSCar – 2013**	**15273**	**166**	**32076**	**141**
	Universidade Federal de São João Del-Rei (UFSJ)	Universidade Federal de São João Del-Rei (2018a, 2018b)	NACE – Núcleo de Pesquisa em Acessibilidade, Diversidade e Trabalho / SINAC – Setor de inclusão e assuntos comunitários – 2012	15724	56	13071	48
	Universidade Federal do Triângulo Mineiro (UFTM)*	Universidade Federal do Triângulo Mineiro (2018a**,** 2018b**)**	**Núcleo de Acessibilidade –** 2007	**6813**	**31**	**5757**	**26**
	Universidade Federal de Uberlândia (UFU)	Universidade Federal de Uberlândia (2018a, 2018b)	Pesquisa, Extensão e Atendimento em Educação Especial – CEPAE / Divisão de Promoção de Igualdades e Apoio Educacional (DIPAE) N.L**	27709	47	21561	36
	Universidade Federal de Viçosa (UFV)	Universidade Federal de Viçosa (2018)	Unidade Interdisciplinar de Políticas Inclusivas (UPI) – 2014	165564	2619	11116	2210
	Universidade Federal dos Vales de Jequitinhonha e Mucuri (UFVJM)	Universidade Federal dos Vales do Jequitinhonha e Mucuri (2018)	Núcleo de Acessibilidade e Inclusão (NACI) – 2008	10479	3	8964	1
	Universidade Federal de Alfenas (UNIFAL)	Universidade Federal de Alfenas (2018)	Núcleo de Acessibilidade e Inclusão – 2007	7837	83	6481	70

*These IFES have undergraduate courses in occupational therapy, so they are marked with an asterisk (*) and in bold; ** NL = Not Located the year the program was created. Source: Own elaboration based on INEP data (INSTITUTO..., 2016a, 2016b, 2016c).

Table 1. Continued...

A	B	C	D	E	F	G	H
HEI Region	Name / Acronyms of HEI	Reference Links	Name of Inclusion Program/Year of Program Creation	Total number of students linked to HEI	Total number of students with disabilities in IES	Incoming Students 2016	Incoming people with disabilities 2016
Southeast	Universidade Federal de Itajubá (UNIFEI)	Universidade Federal de Itajubá (2018)	Núcleo de Estudos em Formação Docente, Tecnologias e Inclusão (NEFTI) – 2014	7957	6	6903	4
	Universidade Federal de São Paulo (UNIFESP)*	Universidade Federal de São Paulo (2018)	**NAI – Núcleo de Acessibilidade e Inclusão – 2008**	**12524**	**30**	**10957**	**25**
	Universidade Federal do Estado do Rio de Janeiro (UNIRIO)	Universidade Federal do Estado do Rio de Janeiro (2018)	PRAE – 2013	18960	17	1235	14
South	Universidade Federal do Rio Grande (FURG)	Facebook (2018b)	Programa de Apoio aos Estudantes com Necessidade Específicas – PAENE/ Núcleo de Estudos e Ações Inclusivas – NEAI – 2009	11459	116	9366	94
	Universidade Federal de Ciências da Saúde de Porto Alegre (UFCSPA)	Sistema de Informação e Gestão de Projetos (2018b), Universidade Federal de Ciências da Saúde de Porto Alegre (2018)	NAP – Núcleo de Apoio Psicopedagógico / Núcleo de Acessibilidade da UFCSPA – 2011	2469	0	2220	0
	Universidade Federal da Grande Dourados (UFGD)	Universidade Federal da Grande Dourados (2018)	Núcleo Multidisciplinar para Inclusão e Acessibilidade (NuMIAc / Reitoria UFGD) – 2013	8912	90	7259	79
	Universidade Federal de Pelotas (UFPEL)*	Universidade Federal de Pelotas (2018)	**NAI – O Núcleo de Acessibilidade e Inclusão – 2008**	**21178**	**71**	**17372**	**60**
	Universidade Federal do Paraná (UFPR)*	Universidade Federal do Paraná (2018)	**NAPNE – Núcleo de Apoio às Pessoas com Necessidades Especiais da UFPR – 2006**	**33260**	**360**	**27360**	**318**
	Universidade Federal do Rio Grande do Sul (UFRGS)	Universidade Federal do Rio Grande do Sul (2018)	Incluir – Núcleo de Inclusão e Acessibilidade – 2014	35527	726	29015	622

*These IFES have undergraduate courses in occupational therapy, so they are marked with an asterisk (*) and in bold; ** NL = Not Located the year the program was created. Source: Own elaboration based on INEP data (INSTITUTO..., 2016a, 2016b, 2016c).

Table 1. Continued...

A	B	C	D	E	F	G	H
HEI Region	Name/ Acronyms of HEI	Reference Links	Name of Inclusion Program/Year of Program Creation	Total number of students linked to HEI	Total number of students with disabilities in IES	Incoming Students 2016	Incoming people with disabilities 2016
South	Universidade Federal de Santa Catarina (UFSC)	Universidade Federal de Santa Catarina (2018)	NAPNE – Núcleo de atendimento às pessoas com necessidades específicas – 2011	35666	268	29365	230
	Universidade Federal de Santa Maria (UFSM)*	Universidade Federal de Santa Maria (2018)	**Núcleo de Acessibilidade – 2007**	**24509**	**278**	**20221**	**223**
	Universidade Federal do Pampa (UNIPAMPA)	Universidade Federal do Pampa (2018)	NINA – Núcleo de Inclusão e acessibilidade – 2008	12349	125	9698	104
	Universidade Tecnológica Federal do Paraná (UTFPR)	Universidade Tecnológica Federal do Paraná (2018)	Núcleo de Apoio às Pessoas com Necessidades Específicas – NAPNE – 2012	34180	57	27635	41

*These IFES have undergraduate courses in occupational therapy, so they are marked with an asterisk (*) and in bold; ** NL = Not Located the year the program was created. Source: Own elaboration based on INEP data (INSTITUTO..., 2016a, 2016b, 2016c).

support education, a scenario especially related to the appropriation of knowledge and social participation.

However, the information available at the Institutional sites of the Centers focused on improving conditions for performing academic activities; to advise course committees and professors; to reduce communication barriers (pedagogical, psychological, didactic and social), attitudinal and architectural, as well as to improve knowledge and work techniques with students with disabilities and/or other educational needs.

Some Centers were linked to research centers in the IFES, such as the Center of the following federal universities: Federal Rural University of Amazonia (UFRA), Federal University of the Recôncavo of Bahia (UFRB) and Federal University of São João Del-Rei (UFSJ). Thus, the actions carried out in the programs would allow the promotion of new applied research, in which the students would be inserted. In some of the IFES, the centers were supported by an accessibility committee called institutional councils, in which professors participated in areas other than HEI, favoring the discussion of the professional actions of these Centers, as indicated by information from the Centers of the following federal universities: Federal University (UFRN), Federal Rural University of Pernambuco (UFRPE) and Federal University of Santa Maria (UFSM).

In the IFES included in this study, the centers had coordinators and other active professionals, standing out the sign language interpreters and university scholarship, followed by pedagogues, psychologists, physiotherapists, and translators. To a lesser extent, there were professionals from other areas, such as a center with an engineer, philosopher, speech pathologist and architect. Only eight (14.54%) centers had occupational therapists.

It was noted that the coordinator of the Center was responsible for making accessible actions in all dimensions possible, as well as seeking to meet the needs of students with disabilities enrolled. On the other hand, a more individualized follow-up was observed with the presence of a scholar/monitor with students with disabilities, a strategy that, according to the coordinators, was effective. However, it is necessary to investigate whether this monitoring could compromise student autonomy, harming their professional training, since the actions of these companions should be integrated into the set of measures facilitating the academic learning process, considering the student's autonomy in daily

challenges. The accompanying person cannot be solely responsible for the student.

According to the National Policy on Special Education in the Perspective of Inclusive Education (BRASIL, 2008), the availability of instructors as well as monitor and care for students is in the teaching systems. Tutoring is also a reality in international teaching systems and has been reported by authors such as Siew et al. (2017), Asgari and Carter Junior (2016), Rodger and Tremblay (2003), Collings, Swanson, and Watkins (2014) and Crisp (2010). Peer mentoring, peer tutoring, was reported by Siew et al. (2017) as an action to improve academic performance, reduce the stress associated with the transition to higher education, increase well-being and permanence. The same study also points out that, while the program encourages student independence, "[...] there is a possible limitation of the model with regard, in particular, to the potential for excessive dependence" (SIEW et al., 2017, p. 11).

The *INCLUIR* Program indicated that it had fulfilled its role for the "[...] implementation of the policy of accessibility and effectiveness of teaching, research and extension relationships in the area" (BRASIL, 2010a, p. 52) and that after 2010, the last year of development, there were organizational changes with its migration to new coordination linked to Student Assistance[5], which had resources for the costing of specialized professionals, architectural adaptation and scholarships for individual monitoring of SwD, considered to be preponderant factors for the success of the programs. The Permanence Grants is mainly highlighted among these factors, which were associated to the maintenance of the follow-up of SwD, a form of survival of the programs.

Attitudinal accessibility was also highlighted as a theme to be worked in the intervention with professors, rectors or students of other courses. The Program Guidance Document states that funding of accessibility conditions should integrate overhead costs with the development of teaching, research, and extension and that each HEI would establish an accessibility policy for the inclusion of people with disabilities. In this sense, the Centers have made attempts at organization, but it is not possible to associate them with an increase in the number of students with disabilities in these universities, as foreseen in the edict (BRASIL, 2013).

To better visualize this scenario, Table 2 was organized, considering students with disabilities

Table 2. Students with and without disabilities enrolled, according to States, Region, and type of institution.

Region	State	Total Students Enrolled	Total (N) SwD* Enrolled (%)	Total (N) SwD* (%) Federal Instit.	Total (N) SwD* (%) (State Municipal Institute)	Total (N) SwD* (%) (Private Instit. (%)
Brazil		**8,027,297**	**37,927 (0.47%) 34% do total of SwD enrolled**	**12,889 SwD (0.16% Students enrolled) 7,54% total of SwD enrolled**	**2,863 EcD (0.35% Students enrolled) 58% total of SwD enrolled**	**22,175 EcD (0.27% Students enrolled)**
Southeast	São Paulo	1,982,054	7.517(0.38%)	278(3.69%)	580 (7.72%)	6,659 (88.6%)
	Rio de Janeiro	670,931	2.179(0.32%)	257 (11.80%)	96 (4.40%)	1826 (83%)
	Minas Gerais	813,098	2.769(0.09%)	797(28.78%)	50 (1.80%)	1922 (69%)
	Espírito Santo	152,628	463(0.30%)	226(48.81)	1 (0.21%)	236(50%)
Northeast	Sergipe	85,990	364(0.42%)	197(54.12%)	0 (0)	167 (46%)
	Paraíba	153,616	2265(1.49)	1408 (62.16%)	427 (18.85%)	430 (19%)
	Pernambuco	264,089	542(0.20%)	72(13.28%)	64 (11.99%)	406 (75%)
Midwest	Distrito Federal	221,045	1.030(0.46%)	181 (17.57%)	1 (0.09%)	848 (82%)
North	Pará	213,109	1111(0.52%)	292 (26.28%)	48(4.32%)	771 (69%)
South	Rio Grande do Sul	490,989	2659 (0.54%)	1213 (45.61%)	52 (1.95%)	1394 (52%)
	Paraná	491,529	2237 (0.45%)	209 (9.34%)	544 (24.31%)	1484 (66%)

*SwD: Students with disabilities. Source: Own elaboration based on data from the Higher Education Census, INEP (INSTITUTO..., 2016a, 2016b, 2016c).

enrolled in public and private HEI in the States with participating Centers of this study.

Most students enrolled and graduating from Higher Education in Brazil studied in Private Institutions, which accounted for 58% of enrollments, while those in Public Institutions accounted for 42%. The State of Paraíba is highlighted, where enrollments of people with disabilities were more numerous in public institutions, representing 81% of enrolled SwD. In addition, this was the state with the highest percentage of SwD (1.49%) in the total enrollment. In the State of Sergipe, 54% of students with disabilities were also in this modality of education.

In general, the IFES had a low percentage of students with disabilities enrolled, indicating that the Centers supported by the Program should consider the difficulties of students' access to public education, especially those with disabilities.

It is important to emphasize the support of the specific programs of access and permanence in Higher Education for those enrolled in private HEIs, to favor students with disabilities. In 2013, 1,497,225 scholars were covered by PROUNI and 10,340 of them had a disability, which, however, they corresponded to 0.69% of the scholars (BRASIL, 2018). Table 2 shows that only 0.47% of Brazilian young people enrolled in higher education had disabilities, and 0.19% of them were in public institutions and 0.27% in private institutions.

It is known that it is not just a matter of guaranteeing enrollment. As in other educational levels, it is fundamental to provide support for access, permanence, and use of students in general, and especially for those with disabilities, which the INCLUIR Program already foresaw.

3.3 Occupational therapy in the IFES and the INCLUIR Program

The graduation in occupational therapy in the IFES was increased, mainly by the REUNI Program. Between 2006 and 2011, nine undergraduate courses were created and 10 extended their vacancies, which favored their integration in access and permanence programs in Higher Education (BRASIL, 2007).

According to information provided by RENETO, there were 16 undergraduate courses held at IFES in 2017and 14 were hosted by institutions participating in the *INCLUIR* Program.

Eight (57%) of the IFES undergraduate respondents had occupational therapist participation in institutional programs. In three of them, the Center coordinator was an occupational therapist (UFMG, UFPB, and UFPA). In five other IFES (UNIFESP, UFSCar, UFRJ, UFPR, UFPEL), occupational therapists participated in the collegiate support and development of the Center.

In the case of UFPR, the occupational therapist was a professor appointed by the department to advise the program, when requested. At UFRJ, UFSCar, and UFPEL, there were participation of undergraduate students, who accompanied the SwD, through technical action, during curricular internships or even when they developed research activities on the theme of inclusion.

Two of the five IFES (UFES, UFSM, UFTM, UFS, UFPE) that reported not participating in the program, reported that there was no institutional request. In one of them, the program was located on a different campus from the one in which the graduation was held, and two did not have professors available to carry out activities unique to the Program. However, all IFES recognized the importance of the department's participation in this Program and had future projects to initiate or extend the intervention.

Regarding to professional training in the Education area, Table 3 shows the presence of nine undergraduate courses, which are titled and have the inclusion in their themes, seven of which are compulsory and two electives.

In six of the 14 IFES studied, the Brazilian Language of Signs subject appeared as optional or elective in the course of occupational therapy. The subjects that included terms related to "Prosthetics and Orthotics" and "Assistive Technology" integrated the curricula of the 14 courses studied and, although they could discuss the subject of the deficiency, the study of these menus did not locate the education theme.

Thus, it is possible to consider that the studied courses may not discuss the theme of education and people with disabilities in subjects or in their matrix, as well as the importance of the intervention of the occupational therapist in teams related to the theme. This gap may explain why, in 47 IFES with a Center, there was no occupational therapist participation in their activities, or even in those who had undergraduate courses.

Considering the possibility that research activities were incorporated into graduate training in occupational therapy, information was collected on research groups active in the IFES.

Table 3. Curricular components related to Inclusion and Education.

HEI	Year of the Matrix	Subject/component	Course load	Course Status
UFES	2013	Assistive Technology I - Adaptations and Software	45	Required
		Assistive Technology II - prostheses and orthoses	60	Required
		Occupational Therapy in Education*	60	Required
		Professional Rehabilitation and Accessibility*	45	Required
		Libras - Brazilian Sign Language	60	Optional
UFMG	2008	Processes of social inclusion*	30	Required
		Assistive Technology	30	Required
		Orthoses	30	Required
		Professional Rehabilitation	30	Optional
UFPA	2008	Integrated curriculum/no subject located with the thematic		
UFPB	2008	Assistive Technology	60	Required
		Libras	60	Optional
		Orthoses and Adaptations	30	Optional
UFPE	2011	Assistive Technology and Accessibility	60	Required
		Human rights	60	Elective
		Fundamentals of Inclusive Education*	60	Elective
		Introduction to Libras	60	Elective
UFPEL	2012	Occupational Therapy and the disabled*	60	Required
		Assistive Technology I - Orthoses and Prostheses	60	Required
		Assistive Technology II	60	Required
UFPR	2017	Diversity and Human Performance Contexts	30	Required
		Assistive Technology	60	Required
		Communication in Brazilian Sign Language	30	Optional
UFRJ	2008	Assistive Technology in Occupational Therapy and Speech Therapy	120	Required
		Supervised internship 1 - Occupational Therapy in Education	105	Required
		Popular Education and Inclusive Education in Occupational Therapy, Physical Therapy, and Speech Therapy*	75	Required
		Alternative communication in OT and Speech Therapy	60	Optional
UFS	2011	Policy, Organization, and Management of Health, Social and Educational Systems, Services and Programs	60	Required
UFSCAR	2016	Supervised Practice in Occupational Therapy in Cognitive Disorders*	16	Required
UFSM	2009	Orthoses and Prostheses	45	Required
		Assistive Technologies	60	Required
UFTM	2013/2017	Assistive Technology I	30	Required
		Assistive Technology II	30	Required
		School Inclusion: Contributions of Occupational Therapy*	15	Elective
UNB	2009	Basic Libras	80	Elective
UNIFESP	2015	Occupational Therapy in Education*	80	Required
		Occupational Therapy and Rehabilitation of People with Disabilities	80	Required
		Brazilian Language of Signals	40	Optional
		Therapeutic Activities and Resources V: Assistive Technology, Orthotics, Prosthetics and Adaptations	80	Required

* Subjects directly related to Education and Inclusion. Source: own elaboration based on data available on IFES websites and Pan (2014).

Sixty-two research groups were located in the 14 HEI with a degree in occupational therapy, and these groups did not necessarily have the participation of researchers from these courses.

The predominant area of knowledge in the groups was Education (56% n=35 groups), followed by Physical Education (13% n = 8 groups). In Physiotherapy/Occupational Therapy and Linguistics, 6% (n=3 groups) were counted. The area of Information Science had 5% (n=3 groups), Psychology 3% (n=2 groups) of the valid groups, while the Architecture and Urbanism, Anthropology, Arts, Speech, Philosophy, and Mathematics areas had 2% each (n=1 group) of the valid groups.

The HEIs with the highest number of research groups on the subject were UFSCar, UFSM, and UFPB, with nine groups, followed by UFPE, with seven groups.

The four research groups linked to occupational therapy were: Assistive Technology, Accessibility and Innovation (NTAAI) (UnB); Ergonomics in the space of people with special needs (UFPB); Occupational Therapy and Assistive Technology in different contexts (UFRJ), and SACI - Health and Citizenship: vulnerability processes and intervention possibilities (UFTM).

We believe that curricula and research groups can be expanded, depending on the needs of people to be assisted by occupational therapy. As previously, the person with a disability had greater difficulty in accessing Higher Education, this reality was not an issue present in the professional's graduation. However, the most recent courses already had research groups on this theme.

The interviewed coordinators of the programs of the UFPB, UFMG and UFPA universities reported a differential for those who had occupational therapy. In Table 4, their views on the technical action and the contributions for the development of the Centers are presented, as well as the theoretical perspectives of the support and activities that they performed.

The interviewees pointed out technical actions to broaden the vision of the inclusion context beyond the physical accessibility pillars. They observed the presence of the young person in Higher Education as an aspect to be developed and they envisaged actions beyond the legal obligation of access, with emphasis on aspects related to facilitating the equalization of opportunities and the youth's functionality in the University.

In this context, it is possible to consider the importance of providing support for people with disabilities in the educational environment, which, as defended by Aranha (2003), it would enable to implement inclusive school processes. This perspective, defined by the author as a support paradigm, presupposes the availability of instruments that guarantee immediate access to any and all resources of the community. Thus, it is necessary to implement measures of equivalence to enable the participation of people with disabilities at any stage of education level. The supports can be of different types (social, economic, physical and instrumental) and there are decisive and affirmative interventions, not only in the process of development of the subject but also in the process of adaptation of the context of the person with disability, considering his territory and community of belonging.

Another perspective to be considered in inclusion proposals is the point of view on accessibility presented by Sassaki (1997), indicating six inclusive dimensions: Architectonic (without physical barriers); Communicational (without communication barriers between people); Methodological (without barriers in the methods and techniques of leisure, work, education, among other fields); Instrumental (without barriers in instruments, tools and work utensils, among others); Programmatic (without barriers embedded in public policies, laws, norms, among others); Attitudinal (without prejudice, stereotypes, stigmas and discriminations in society's behavior towards people with disabilities).

Regarding the theoretical perspectives pointed out by the occupational therapists, a tendency was observed to search for theoretical bases of the clinical practice for the development of the actions in the Centers. The basis of the clinic can be used because this professional expertise would make occupational therapists a difference in care for SwD, favoring their participation in teaching experiences. However, it is necessary to recognize that the bases of the clinic, often on knowledge built primarily from the biomedical model, must go beyond this, with due care not to transform the University into the space of the clinic of young people with disabilities, which could occur in situations identified by the Center coordinators.

The theoretical perspectives pointed out by the interviewees were related to the theoretical aspects of the model of human occupation and occupational science, either by the use of standardized instruments such as the Cognitive Orientation to

Table 4. Technical action and theoretical perspectives of the participation of occupational therapists in the Center, according to occupational therapists group coordinators.

HEI	Role developed at HEI	Differential of the technical action of the professional	Theoretical perspectives pointed out by the interviewees
IFES 1	Lecturer at the Occupational Therapy college assigned exclusively to perform the center coordinator function	*- We begin to see the issue of inclusive education not closed in the pedagogical aspect.* *- The other thing that I think comes from Occupational Therapy is that we always see the deficiency in dialogue with the context.* *- It's changing that context, so we bring another view that is sometimes difficult for people to see.*	*- I think the International Classification of Functioning, Disability, and Health (CIF) somehow is permeated, I think, we have a lot of work here with Cognitive Orientation to Daily Occupational Performance (CO-OP).* *- Proximal zone of Vygotsky.*
IFES 2	Lecturer at the Occupational Therapy college assigned exclusively to perform the center coordinator function	*There are many other cases that are not covered by legislation and that I cover it because I am an occupational therapist and I understand that every person has a demand; that it goes beyond the legal issues and I think this comes from the training I had.*	*- Model of human occupation. I go a lot for the volitional [...] of this meaningful activity and that makes sense in the subject's life.* *- [...] although I work with groups, if I think of a group conception I work within the science of occupation, within the perspective of the science of the occupation, [...] I rely on it in the principles of occupational science especially to function and meaning but individually.*
IFES 3	Occupational Therapist hired by the center, not linked to the Graduate Degree in Occupational Therapy.	*- Having an idea of an occupational profile based on the (American Occupational Therapy Association) AOTA, this is the document that welcomes the student, so we do not just look at occupation and education, we think about the Activities of Daily Life (ADLs) there, how much he has to have lunch at the University Restaurant (UR), when he has to use the bathroom, make the transfers, if he uses a wheelchair, see the issue of his social participation in this pupil-student relationship, student-professor, student-direction, his leisure in that sense, for example.* *- I believe that the differential is an occupational view... to improve his occupational engagement, social participation even if it is familiar or between peers, among friends.*	*- I find in AOTA a more tidy way so I can dialogue with the team.* *- Science of occupation is very much in my perspective.*

Source: Own elaboration based on the complete transcription of interviews.

Daily Occupational Performance (CO-OP) or by instruments created in the context of the programs, based on the International Classification of Functioning, Disability and Health (ICF) language.

Professionals revealed a practical view of their assignments to recognize skills that required assessment through standardized tools while simultaneously presenting speeches that were sensitive to what was individual, particularly to the student's life stories. The use of standardizations, in search of a common language, would enable the technical action of the professional before the other members of the team. It is worth mentioning that, in the cases studied, student occupations were one of the focuses of professional activities to support students.

There seemed to be an understanding by both government advocates and actions produced at the IFES that support for the student should be clinical, locating processes of inclusion in the corporality of the disabled person. That is, the person with the disability would be in a better condition of social participation if he had no mobility problems, for example. It is known that this is not true. To the extent that support is limited to people with disabilities, little intervention has been identified for changes in pedagogical processes (didactic material, teaching strategies) and communication, by interaction between the different institutional actors, or other presence of the disability.

In the speeches that have been accessed in this study, as well as in the Guidance Document of the *INCLUIR* Program, there are elements related to a perspective of standardization of the student, priorities for the costing of architectural adjustments, furniture and hiring professionals for auxiliary language (LIBRAS). Rodrigues and Faria (2017, p. 64) indicate that there was even a

> [...] mismatch between the increasing requirement of prosthetic legislation and the limited conditions of materialization of this production, as well as a discontinuity of public policies and insufficient resources available.

4 Final Considerations

The study contributed to learn about the *INCLUIR* Program, considering it part of affirmative actions to subsidize access, permanence and participation of a segment still not very expressive in the university reality of the country.

However, the decrease or suppression of funds for the Program hindered to maintain and limited the permanence of university students in the IFES, even though some of them maintained the activities of the Centers with their own funds or moving them to Student Assistance departments.

The fact that the Program is restricted to the IFES, other institutions (state, municipal or private) are responsible for the development of their own programs, reflected in the possibilities for the permanence of the majority of university students with disabilities. In private institutions, the largest number of people with disabilities is enrolled, probably due to the ease of access to entrance exams, scholarships by social quota or those offered by PROUNI. It is expected that this reality will be modified from Decree 9.034/2017, which provides vacancies for people with disabilities in public HEIs.

On the other hand, the power and difficulties of the *INCLUIR* Program have indicated the importance of recognizing how their interlocutors have dealt with the daily dynamics of the participation of SwD in addition to architectural accessibility.

Even in the IFES that provided an occupational therapy course, their participation in the Centers was not frequent. It was noticed that the strategies for the approximation of students and the feasibility of measures of assimilation used by the professionals interviewed were based on their training, considering the broad analysis of the occupations of the disabled person, the capacity to plan strategies of access to resources and the support to families and professors and staff at IFES. In this sense, the occupational therapist could contribute so the Program could be involved in different aspects of daily life in Higher Education.

However, it should be argued that the professional was expected to offer support that did not take the imperative of the individual dimension of access and permanence as a basis, that is, an action beyond the students' adaptation to the new situations, but considering that the Inclusion processes require changes in the dynamics of university life, sometimes generating resistance and conflict. These changes included the review of didactic material, methodological strategies operated by professors, communication processes and opportunities for students to participate in activities of university life beyond the classroom.

The study indicated that the training of this professional to work in Education and Disability

was incipient in the IFES, with a small number of subjects, research groups and professional practices related to the theme, which can be related to the recent access of SwD to Higher Education.

It is important that occupational therapy curricula enable studies on education and disability in various segments of school life. These issues should be addressed in the initial years of training, which would lead students and professors to reflect on the conditions of other young people at the University, and would contribute to increasing the possibilities for occupational therapists to participate in HEI teams and other teaching segments.

Dimensions of university life outside the classroom were not observed in the Program, reflecting the dynamics involved in the social production of disability. Priority to infrastructure issues may obscure more complex institutional processes to deal with the diversity of problems, expectations, and possibilities of participation of SwD, favoring more normalizing perspectives for their participation and permanence in Higher Education, and disregarding the diversity of skills and adaptation needs not covered by the Program.

Thus, debates are essential to identify and face the inequalities and oppressions present also in the experience of university life, strengthening the subjects, their choices, their career path and their ways of being in the world.

The reflections by the study indicate the need to deepen debates on the programs in progress, also considering the contributions of ethnographic studies with young people in Higher Education to approach those with meaning to university life.

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Author's Contributions

Lilian de Fátima Zanoni Nogueira was responsible for the conception of the study, organization of sources and data, analysis, writing of the text and review. Fátima Corrêa Oliver was responsible for the guidance of the study, the analyses, the writing of the text and review. All authors approved the final version of the text.

Notes

[1] The text is part of the doctoral study entitled "Life trajectory of young and adults with disabilities: Contributions of Occupational Therapy in University Teaching" by Liliana de Fatima Zanoni Nogueira, under the guidance of Fátima Corrêa Oliver, in the Graduate Program in Occupational Therapy of UFSCar. The study was approved by the Committee of Ethics in Research in Human Beings of the University of Sorocaba under the opinion of number 2,073,616.

[2] The questions sent to the coordinators of the IFES who teach graduation in Occupational Therapy dealt with: Action Developed by the course in the program of inclusion of students with disabilities of the IFES; Activities developed by the course in the program or reasons that led them to non-participation in the course, and an open question about other information considered relevant.

[3] In 2010, Brazil had 190,755,799 inhabitants and the population of young people with disabilities between 18 and 34 years old totaled 7,839,343 people (INSTITUTO..., 2010).

[4] One interviewee works in the Northeast Region, one in the Southeast Region and another in the North Region of the country.

[5] The National Program of Student Assistance (PNAES), recognized by Decree 7,234, of July 19, 2010, intends to extend the conditions of permanence of young people in federal public higher education (BRASIL, 2010b).