

Original Article

Contributions and challenges in the management of occupational therapists in higher education inclusion programs for students with disabilities¹

Contribuições e desafios para a gestão de terapeutas ocupacionais em programas de inclusão de estudantes com deficiência no ensino superior

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Abstract

Introduction: Disability is a social construction, and integration into higher education is a right of students with disabilities. Occupational therapists work directly in this context and can support the social participation of these students, assuming the role of program management at the university. Objective: To discuss actions carried out by occupational therapists who manage inclusion centers in a higher education institution. Method: Study anchored in a qualitative approach. Five occupational therapists, coordinators of inclusion programs in different regions of Brazil, participated and their contributions were analyzed in relation to the activities carried out in the program. Data were collected through semistructured interviews, being categorized according to their content. Results: The specificity of intervention in the educational space presupposes equating actions in different contexts of the university environment. The actions of managerial occupational therapists permeate interventions focused on the dimensions of more individual support and more collective interventions, which directly interfere in the change of culture and access to the university. Conclusion: The ability of occupational therapists as managers is highlighted, in a role of mediators and actors in the implementation of actions, so that institutional partnerships produce a dialogue between needs and resources, articulating institutional demands and the uniqueness of students and educational processes.

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Keywords: Occupational Therapy, Disabled Persons, Education Higher, Mainstreaming Education, Equity, Organization and Administration.

<u>Resumo</u>

Introdução: A deficiência é uma construção social, e a integração no ensino superior é um direito dos estudantes com deficiência. Terapeutas ocupacionais atuam diretamente nesse contexto e podem apoiar participação social desses estudantes, assumindo o papel de gestão de programas na universidade. Objetivo: Discutir ações realizadas por terapeutas ocupacionais gestoras de núcleos de inclusão em instituição de ensino superior. Método: Estudo ancorado em abordagem qualitativa. Participaram cinco terapeutas ocupacionais, coordenadoras de programas de inclusão em diferentes regiões do Brasil e foram analisadas suas contribuições em relação às atividades realizadas no programa. Os dados foram coletados por meio de entrevistas semiestruturadas, sendo categorizados de acordo com seu conteúdo. Resultados: A especificidade da intervenção no espaço educacional pressupõe equiparar ações em diferentes contextos do ambiente universitário. As ações de terapeutas ocupacionais gestoras perpassam intervenções focalizadas nas dimensões de apoio mais individual e intervenções mais coletivas, que interferem diretamente na mudança de cultura e acesso à universidade. Conclusão: Destaca-se a habilidade de terapeutas ocupacionais como gestoras, num papel de mediadoras e atuantes na implementação de ações, de modo que parcerias institucionais produzam um diálogo entre necessidades e recursos, articulando demandas institucionais e a singularidade dos estudantes e dos processos educativos.

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

Introduction

This article presents and discusses actions carried out by occupational therapists who manage inclusion centers in a higher education institution.² The work of the occupational therapist manager intertwines with the discussion about the common challenges posed to the population's participation and access to higher education in Brazil.

Considering the higher education scenario, it is pertinent to emphasize the importance and complexity of the participation of occupational therapists, especially in issues related to people with disabilities, so that their technical action allows the joint construction of opportunities for "the approach of this population to collective spaces in which they can recognize themselves as social and political subjects" (Oliver et al., 2013, p. 5). Occupational therapists can work not only with people with disabilities, but also with other individuals, considering the participation in university education as an expanded space, consisting of faculty, employees, family members and pedagogical project, reaffirming the university as a collective of relevance, which enables the recognition of the person with disability as a social and political subject.

²Inclusion nucleus is the space in Higher Education Institutions that organizes and executes actions with the objective of promoting access and permanence of students with disabilities at university, accompanying students in their various academic segments and in their training process.

Oliver et al. (2013, p. 4) consider that participation involves a variety of aspects that, when understood by occupational therapists, can support technical actions that move "from priority to repairing a disability centered on the body and behavior, to incorporate other disability dimensions, incapacity and/or disruptions experienced by people with activity limitations and participation restrictions".

It is in this sense that the fact of participating in teaching experiences is linked to the complexity of social and institutional contexts: lack of technical support or family resistance from teachers³ or physical impediments of the person with a disability are factors that should not be neglected, although it is not possible to attribute to just one of them the ineffectiveness of an inclusive teaching process.

Another point to be revealed is that the participation of people with disabilities in higher education is still incipient, as discussed in Nogueira & Oliver (2018) and Nogueira et al. (2016). Although, between 2009 and 2018, there was an increase in the number of students with disabilities enrolled in higher education, according to the 2018 Higher Education Census, only 0.52% of those enrolled are people with disabilities in the country (Instituto Nacional de Estudos e Pesquisas Educacionais Anísio Teixeira, 2019).

Many professional areas and different authors have carried out studies (Alcoba, 2008; Fraser, 2006; Omote, 2018; Ponte & Silva, 2015; Cabral, 2018; Cabral & Santos, 2018) and improved their technical actions to monitor the reality of people with disabilities. Occupational Therapy is included, and it is linked to the understanding of the interfaces between daily life and the dynamics of participation of people with disabilities in social life, which can contribute to facilitating emancipatory processes of life and autonomy, either to enable access to a right, such as higher education, or to favor the provision of assistive technology.

It is important to note that, although we are aware of the effective participation of occupational therapists in the school environment, it was only in 2018 that there was a publication by the Conselho Federal de Terapia Ocupacional e Fisioterapia (2018) (COFFITO - Resolution 500/2018) that regularized the Occupational Therapy specialty in the school context, providing, in article 9, item 7, the intervention of the professional at universities, in addition to other stages and levels of education.

It is worth noting that Brazilian studies on Occupational Therapy and the field of higher education are still punctual, considering conceptions about disability and the different dimensions of accessibility. Studies by occupational therapists have been produced on the subject, such as those by Baleotti & Omote (2014), Ponte & Silva (2015) and Rocha et al. (2013) which discuss how occupational therapists theoretically dialogue about the importance of interactionist and social conceptions of disability, as well as attitudinal accessibility, highlighting the need for further research "linking the work of the occupational therapist and the possible contributions of this professional in the elimination or minimization of barriers related to different attitudes" (Ponte & Silva, 2015, p. 270).

Salles et al. (2010) discussed the autonomy and independence of people with disabilities based on physical accessibility in a public university building. Lourenço & Battistella (2018) also pointed to mapping carried out at the Federal University of São

³Family participation, even in higher education, has been frequent, since in the admission process, the student is not always fully autonomous in activities of daily living and, in many situations, family support remains effectively throughout life. It is in that sense that we must also consider family participation in experiences at this level of education.

Carlos with students targeting special education in undergraduate courses, concluding that it is necessary to discuss the weaknesses and implications of the forms of institutional registration on this group.

Concha et al. (2014) addressed the need to incorporate specific topics on inclusive education in higher education into vocational training in Occupational Therapy. Pollard & Block (2017) also discuss the need for occupational therapists, who work with people with disabilities, to understand the importance of the guidelines and programs of current social policies, which can both enable and disadvantage the participation of this group in different social spaces. In this sense, there is a need to recognize that inclusion in higher education faces external barriers to educational institutions that affect the exercise of the right to education.

Studies on access and permanence of people with disabilities in higher education also indicate everyday peculiarities that can significantly influence the academic life of this group and, in this regard, it may be opportune to recognize the contribution of the specific intervention of Occupational Therapy (Baleotti & Omote, 2014; Rocha et al., 2018).

In terms of the specificity of the interventional action of occupational therapists in higher education, we consider the importance of their participation in the teams that make up the programs, more specifically as their managers, which are the focus of this research. All participants in this study develop the role of management of inclusion programs in the respective centers of Higher Education Institutions (HEI).

In order to better understand the type of management that we consider relevant, we retrieved the concept of co-management by Gastão Wagner de Souza Campos, which indicates the need to contextualize the reality studied. In an interview with Righi (2014), the author recommends co-management⁴ as a space for participatory management, which has pedagogical subjective and political dimensions.

The reality of the job market shows occupational therapists assuming participatory and active roles in the areas of service management (De Carlo et al., 2009). Lopes (2013) also stated that the trajectory of more open training, the contact with the populations served and the awareness of the struggle for the conquest of rights, made many occupational therapists pursue a career in management.

Santos & Menta (2017) refer that occupational therapists in the exercise of professional practice are faced with situations that require communication and organizational skills inside and outside establishments, implying articulation between team members and a constant challenge to reaffirm and expand professional practice. At this point, we understand that there is a resolute profile of the actions of occupational therapists, whether in the role of team leadership, in the organization of actions of social participation in health services, in social assistance, in the development of school services, in public or private management and in policy making.

⁴Paidéia support is the concept of author Gastão Wagner de Souza Campos, who proposes a methodological stance that seeks to reformulate traditional management mechanisms. The methodology presupposes an approximation between "the executors of the functions and the operators of final activities (...), that is, it is an effort to build a new capacity to think and act, whether as collectives or each of the people involved" (Campos, 2003, p.4). The authors indicate that the political, pedagogical, clinical and public health dimensions translate ways of acting on the world that correlate power, knowledge and affections, generally not considered in the technocratic forms of management. For Campos, in co-management, it is imperative to understand the circulation of power, knowledge and affections, in their political (general and institutional), cognitive and intersubjective dimensions to clinical dimension and public health practice in defense of the right to health.

Knowledge of the particularities of services and communities is fundamental for the professional differential, as well as the skills of managing groups and valuing participatory and democratic actions that are required for management. For Cordeiro (2018),

It can be said that the occupational therapist – who emphasizes listening, coresponsibility, diversity, culture, singularity and, at the same time, plurality as points of attention to care – proves to be quite appropriate for the challenges of this type of work management (Cordeiro, 2018, p. 71).

It is also stated that, in relation to the manager, their importance is presented in encouraging participation

of users and family members in actions to strengthen protagonism and social participation, as well as publicly recognizing the importance of support in the daily decisions and actions of each professional included in their team, from acting in therapeutic actions, to in spaces of management and leadership (Cordeiro, 2018, p. 70).

The work of a manager requires practical, inventive and astute intelligence, beyond the academic dimension of doing, incorporating in technical action, attributions that involve leadership, planning and response to demands for results.

Methodological Course

This research, part of a study developed between 2016 and 2019, is anchored in a qualitative approach (Minayo, 1996). The study that strictly focuses on occupational therapists who manage accessibility centers in HEIs was organized in simultaneous phases that included:

 The identification of the 55 accessibility centers referenced in the document of the Department of Continuing Education, Literacy, Diversity and Inclusion/Secretariat of Higher Education - SECADI/Sesu (Brasil, 2013) and location of undergraduate courses in occupational therapy in these HEIs. In order for private HEIs to also be covered, the location of Occupational Therapy courses active in Brazil was also carried out through electronic contact with the coordinator of the National Network for Teaching and Research in Occupational Therapy (RENETO), which made available the list of public courses and private entities active in the country on 07/13/2017. At the time, there were 37 active courses in public and private HEIs in the country.

The choice of using only HEIs with a degree in occupational therapy was due to the fact that the study aimed to identify and reflect on the experience and actions of management of centers carried out by occupational therapists, considering, including their contribution to the graduate training⁵.

⁵The research was limited to institutions with an occupational therapy degree. This does not exclude the possibility that other institutions, which do not have occupational therapy professionals, be hired.

- 2) Electronic contact with the 37 public and private institutions that had an Occupational Therapy course to recognize their participation in Inclusion programs and their general and management activities in order to discuss the contributions of occupational therapists to their development. For that, an online form was used that dealt with the dynamics of these Inclusion programs, answered by 15 HEIs.
- 3) Among the respondents' HEIs with a degree in Occupational Therapy, eight (57%) had occupational therapists' participation in institutional programs. In five of them, the coordinator of the nucleus was an occupational therapist; in the other three HEIs, occupational therapists participated in the support and development committee of the Nucleus.
- 4) Based on the responses to the online form, the 05 occupational therapists who participated in the nuclei in the role of managers were virtually interviewed, using a semistructured interview script composed of questions that allowed the professional to present the time of work of the Program and its link as a manager, the institutional and actors' perspectives on understanding disability, discuss the actions carried out with students, teachers, employees and, in particular, those of her responsibility as manager.

During the study, all ethical procedures were respected, including the consent and preservation of the identity of the participating institutions and occupational therapists, with their authorization through the Free and Informed Consent Term (TCLE).

Data processing was performed considering their ordering, classification and final analysis. These are steps indicated by Assis & Jorge (2010) as dynamic and intercomplementary, that is, as the data is organized, possible associations emerge that lead to possibilities for the construction of categories.

The organization of the data had the objective of establishing the identification of the empirical material collected in the field of study. For that, all the interviews were transcribed and, later, validated by the research participant⁶; then, a preliminary reading of the material was carried out, which made it possible to start classifying the data.

Data classification was carried out by skimming the interviews, in order to identify the central ideas about the object of study based on the literature previously presented (Baleotti & Omote, 2014; Cabral, 2018; Cabral & Santos, 2018; Oliver et al., 2013; Omote, 2018; Ponte & Silva, 2015; Rocha et al., 2018). From this process, two categories which highlight the dimension of management work emerged, the first being the individual dimensions of work and the second being collective dimensions of the daily work of management, considering its political-institutional implications and the repercussions on activities and practices developed with different actors. These categories make it possible to know the contributions and challenges posed to the area in Inclusion programs in higher education, to know the different perspectives of understanding the disability of managers in dialogue in Inclusion programs and in the respective HEI, as well as to pay attention to the importance of the theme for the academic and professional training of future occupational therapists.

⁶The validation of the interviews took place by sending the transcribed material to the participants, via e-mail, so that they could read it and check if they wanted to change or add any information to the statement.

Results and Discussion

Initially, Table 1 presents the characterization of the five managers who collaborated in this study (with fictitious names) and information about their role in the program, their HEI, the region of the country, as well as time of work and condition of contract, with four of them work in Federal HEI programs and one in private HEIs. Subsequently, the results and discussion of the collective and individual dimensions identified in the work of the occupational therapists interviewed are indicated.

Participant	Name/Year of program creation	Function / Program name/year of binding	Hiring condition	HEIs	Region
Gabriela	Accessibility Coordination - COAss/SAEst Created in 2012	Coordinator of the Technical Sector Specialized in Physical and Multiple Disabilities since 2012	Hired as an Occupational Therapist (non-teaching)	Federal HEIs (A)	North
Ana	Accessibility and Inclusion Center of NAI. Created in 2008	Director of the Nucleus since 2015. Exclusive dedication to it since 2018	Graduate Professor in Occupational Therapy; at the time of data collection, she was exclusively dedicated to activities of NAI	Federal HEIs (B)	Southeast
Adriane	Inclusion and Accessibility Committee (CIA). Creation of the program in 2013.	Coordinator and President of the CIA since 2013	Graduate Professor in Occupational Therapy; at the time of data collection, she was exclusively dedicated to the activities of the CIA	Federal HEIs (C)	Northeast
Cintia	Diversity and Inclusion Attention Program (PADI). Creation of the program in 2007.	PADI Coordinator since 2014	Coordinator of the Graduation in Occupational Therapy and Coordinator of the Nucleus. At the time of data collection, she dedicated part of her time, 40 hours per week, to coordinating PADI actions	Private HEI (D)	South
Eliza	Accessibility and Inclusion Center (NAI). Creation of the program in 2008	Coordinator of Accessibility	Graduate Professor in Occupational Therapy; at the time of data collection, she dedicated part of the time, 40 hours per week, to the coordination of NAI actions.	Federal HEIs (E)	Southeast

Table 1. Participating occupational therapists by program, institution and hiring.

Source: own elaboration.

Among the participants, only Gabriela (HEI A) was not directly linked to teaching and to the Graduate Course in Occupational Therapy, being hired specifically for the role of coordinator of one of the areas of the inclusion program: the area of physical disability⁷. This hiring guarantees only part-time work, which, for the professional, would be insufficient for the development of actions considered necessary. In the case of this HEI, the professional reported being involved in extension and research activities linked to the accessibility nucleus, which favors a closer relationship between undergraduate students in Occupational Therapy and students with disabilities.

Ana, from HEI B, and Adriane, from HEI C, are linked to the undergraduate course and, at the time of the interview, they were exclusively dedicated to the program, that is, they did not carry out other activities related to teaching at the HEIS.

Cintia, from the private HEI (HEI D), hired with a dedication of 40 hours per week, revealed that, among her teaching activities and undergraduate coordination, she is also responsible for coordinating the development of activities in the accessibility program. In this case, the coordinator of the graduation in Occupational Therapy also coordinates activities that involve students with disabilities. This may indicate, on the one hand, recognition of the area for direct intervention with HEI students; but, on the other hand, it can overload the activities of a single professional, who performs several administrative and practical tasks.

At HEI E, Eliza has a full-time teaching contract; however, has part of this workload available for coordinating activities for an inclusion program that was being started.

The professionals interviewed highlighted the institutions' recognition that occupational therapists are professionals qualified to develop the coordination of programs, including in some HEIs, appointing a professional exclusively for the development of actions.

In some HEIs, the teams that make up the programs are highlighted as a positive point, as indicated in the excerpts of the reports below.

[...] eight sign language interpreters, one pedagogue, four, five administrative assistant technicians, there are five technicians working with the fifteen fellows and me (Ana).

[...] I, the coordinator, teacher X who is also an occupational therapist, who has very few hours in the program, but has six hours, I have five interpreters, one was transferred to another sector of HEI D. There were six, I have two students from the Occupational Therapy curricular internship taking care of the students and that is it (Cintia).

[...] The committee's infrastructure technical team today is like: I am coordinating for 8 hours a day, I had an administrative technical server who asked to be reassigned and I should get another one for now to perform the secretarial role. I have 6 sign language interpreters fixed on the board and I have 4 braille proofreaders. These people are all people applying for vacancies that the committee opened that did not exist at the university before. Therefore, these are our vacancy codes, from the committee (Adriane).

⁷The program in question is subdivided into specialized technical coordination, with the following sectors: High skills and giftedness; intellectual deficiency; visual impairment and blindness; hearing deficiency; and Pervasive Developmental Disorders (PDD). Each sector has a specialized technical coordination. In the case of the Occupational Therapist interviewed, she coordinates the physical disability and multiple disabilities sector.

The possibility of exclusive dedication to carry out the activities and actions of the program seems to be more adequate for its effective development, since the professional could have more time to carry out actions among the entire academic community.

Following the discussion, the context of the individual and collective dimensions of the managers' work is analyzed, with emphasis on the various immersions necessary for this professional in the daily work. Therefore, it is understood that exclusive dedication to the coordination of programs can favor better results and attention to people and the universe of academic inclusion.

Dimensions of management work by occupational therapists

The nature of management is characterized by the intertwining of factors and initiative, which include actions more aimed at people with disabilities, but mainly an intense dialogue with the collective dimensions, directly linked to pedagogical issues, with other students, teachers and coordinators. Figure 1 presents dimensions that characterize the management work developed by the research participants.

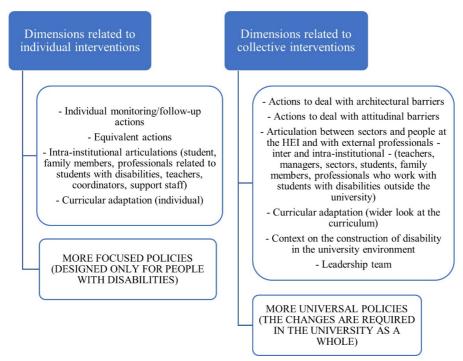


Figure 1. Dimensions of the work intervention of the occupational therapist manager.

In the presented context, the work of the professional occupational therapist manager intertwines with the hidden curriculum of the student with disabilities inserted in the reality of higher education. The university life routine includes not only the contents learned in the classroom during curricular or extracurricular subjects, but everything that is part of everyday life, named by some authors as hidden curriculum (Berg et al., 2017; Wilcox et al., 2005). Commuting to get to school and moving around the academic environment to research in a library are movements inherent to academic activities and these are not always seen as activities to be adapted and eligible for the indication of equivalent measures.

The work of a professional manager has dimensions that are punctually generated by equal measures more directed to people with disabilities, weighted in more focused policies, as well as in the understanding and actions aimed at more universal policies, which favor changes in the entire academic context in articulation with other social sectors.

It is pertinent to highlight that the manager's work is involved in direct evaluation systems, whether for those who receive the service, but also for those who are part of the team managed by the professional. In this way, the management position requires dealing with the evaluation of the team, the student with a disability, the family and professionals who provide care for this student, the professors directly and indirectly involved in the institution, institutional managers, employees and the cultural context, which are part of the process of social construction of disability. These different dimensions indicate the need for actions that can prove to be potent for the effective possibility of participation of people with disabilities in the context of higher education. Although the dimensions indicated are intertwined, they demand actions of an individual scope, aimed at people with disabilities and others of a more collective nature, which incorporate all those who circulate in the university space.

Dimensions relating to individual interventions in the work of management

We name individual interventions those that refer to the fulfillment of more focused policies, designed directly for people with disabilities. This management context includes the organization of individual follow-up actions, supported or not by the actions of monitors, intra-institutional articulations between the student, family members, professionals of the student with disabilities, teachers, coordinators, support staff, as well as the equitable curriculum adaptation.

These focal actions are necessary for the development of the programs and are part of the routine of activities reported by the management professionals. In educational processes, these dimensions of support (translated into the practice of equitable actions⁸) are necessary, as well as the subjective singularity, which is presented in the particularities of everyday life, when the occupational therapist manager intervenes facilitating the reconstruction of school relationships for greater possibilities of exercising autonomy. For this, according to Rocha et al. (2018).

The goal of occupational therapy should be towards making all the subjects who are in the school visible and powerful [...] The purpose is the construction of autonomy, which depends on good encounters. Good encounters are the ones that expand our ability to think and act. [...] Occupational Therapy must strive for the unveiling of the different meanings that difference, disability can

⁸Equitable actions are characterized as methodological strategies operated by professor in communication processes and possibilities for students to participate in activities of university life. These actions would include, for example, reviewing teaching materials and adapting assessment processes, such as delaying test time.

have for everyone involved in inclusion, the proposal is to deconstruct the superstitious imaginary in relation to diversity, whether of race, gender, social class, disability or any other in the educational context. This is a work that is not clinical, nor is it focused only on the specific aspects of students with disabilities, or even aimed at the elaboration of specific pedagogical actions - we are not pedagogues, or even an action aimed at defining proposals for correct attitudes or appropriate behaviors. The work must be done in explaining the difficulties, feelings, emotions, prejudices, submissions that permeate relationships. The unveiling of the meanings of difference, of disability is a way of breaking down sad passions – prejudices, fears, feelings of impotence – and composing the joyful passions, which are manifested in good encounters (Rocha et al., 2018, p. 24-25).

It is understood that occupational therapists involved in inclusion processes should support, in a joint construction with the student and the educational institution, possibilities of coexistence, making it possible to face the difficulties encountered in the daily academic life. This support is a specific contribution of the occupational therapist and it can be presented, discussed and/or oriented towards greater student participation in their training process and awareness of the inclusion of different institutional actors in this process.

In the reports of occupational therapists participating in the research, we identified that many teachers and coordinators of disciplines and/or courses, for example, have never lived with people with disabilities, both in the educational institution and in everyday life, which indicates the need to identify the imaginary about the disability and reflection on its repercussions on the ways of living and interacting with students with disabilities. It is these managers who have mediated the debate and action on ways to overcome situations of prejudice experienced by students, through strategies to facilitate with institutional participants (colleagues, professors, academic support staff, and coordinators) the "being" with people with disabilities.

People with disabilities must also initiate this "being" in a relationship. For this reason, it is important that the manager be a proposer/mediator of recognition of the limitations and potential of people with disabilities and educational institutions.

Partnerships with the courses present in the HEIs were also mentioned to provide attention to students with disabilities, such as attendance at the Clinical School of the Health Area. At this point, it must be considered that these are intervention actions directly linked to the monitoring of people, with regard to the support needed to overcome limitations posed by physical, mental or sensory impediments experienced. In many cases, students did not have or do not have care in the public health or social assistance network and, when they enter the university, they receive health care focused on rehabilitation or on obtaining assistive technology resources. Such services are linked to the inclusion centers of the HEIs, since it is understood that, in some cases, this service would be essential to enhance the autonomy and independence of these students in university life.

> The Integrated Health Center is the health center where all courses in the health area carry out their practices. So if in our services we detect the need for anything that can influence, from testing because the psychology course does testing,

vocational assessment and our vocational assessment here at HEI D are not tests, there are eight meetings in which you can see skills and competences, since they are children, what they identify with, what they like to do, testing comes in too and when we send them, we send them with an opinion (Cintia).

At the clinic, Psychopedagogy works with tests, so this group had to adapt the tests so that they could use them, then it was together with the OT students, the OT interns and the pedagogy interns, for the clinic to see how these materials could be adapted so that we could know what happens in the tests and what tests we could use, you know? [...] And we have, for example, yeah, sometimes sexual issues of wheelchair users appear at the time of evaluation, which they want to know or something, like, "I want to live alone and my father doesn't let me", a lot of questions appear and what do I do [with them]? These OT interns have one day of the week that they spend at the OT clinic and we refer people to OT clinical care. So the interns have experience within the evaluation committee, pedagogical follow-up and clinical follow-up, you know? (Adriane).

The monitoring and actions developed by professionals and interns linked to the service centers of educational institutions mobilize students with disabilities to deal with experiences related to limitations in body structure and function and the understanding of disability as a social process and its repercussions in everyday life and coexistence in educational institutions, as well as offering support of different types, such as assistive technology equipment or adaptations, individual and/or family guidance, dialogues with the teams of the inclusion centers to establish common strategies.

Another reality presented in the programs is the involvement of undergraduate students in monitoring/tutoring with students with disabilities. More individualized monitoring was perceived with the presence of a scholarship holder/monitor with students with disabilities, a strategy that, according to the coordinators' report, was effective.

Monitor scholarship that we call. We have it in the interiors, we have it in X⁹, there is in an X, that is another thing that we do, which I did not mention. We train these monitors, indicating their role, we guide this monitor on the activities, possible adaptations of course, together with the faculty, with the professors of the discipline that the student with disabilities will be studying, this is an action too, but today in our sector, we are the sector that has fewer monitors of this type, monitoring monitors, what we have the most is ASD, right, a lot, some blind people, right, so monitoring, we are with it more inside, why? Sometimes there are students with a lot of impairments in writing and the use of technological has not helped, or even multiple disabilities, low vision and physical disability. This one needs a follow-up monitor (Gabriela).

There are fifteen scholarships reserved by the central administration to be, fifteen scholarships and the NAI opens a public notice for any student of any course at HEI B. Opens this public notice and he applies and makes the selection, as if it

⁹X is the symbol used for a city name, which was removed here, preserving the identity of the HEI. In other subsequent reports, the same symbol will be used when designating the name of a professor, HEI or city.

were a monitoring selection notice. The monitors come to the NAI to work with students with disabilities who need some specific support. In addition, they work on producing some work to present at an event, developing an article or something that the NAI wants to publish based on what is (Ana).

The participation of student monitors supports equitable actions and works as a practical instrument to ensure the permanence of people with disabilities in higher education. However, we draw attention to the need to investigate/take care of whether this monitoring could compromise the student's autonomy, harming their professional training, since the actions of these companions must be integrated into the set of measures that facilitate the academic learning process, considering the autonomy of the student in the face of everyday challenges. The accompanying person cannot be solely responsible for the student. Tutoring/monitoring is foreseen in the National Policy on Special Education from the Perspective of Inclusive Education (Brasil, 2008), as well as being a reality in International Education Systems and was reported as an important action of equalization by authors such as Siew et al. (2017), Hamilton et al. (2016), Asgari & Carter (2016), Rodger & Tremblay (2003), Collings et al. (2014) and Crisp (2010).

Dimensions related to collective interventions in the work of management

In the collective dimensions, there are the challenges of activities aimed at administrative management, which give voice to the manager's role of articulation and mediation. The interviewees reflected on the difficulties in carrying out management activities, considering that factors that hinder inclusion are intertwined with the organizational culture and the need for strategies to overcome attitudinal barriers, which, effectively, can contribute to the necessary transformations in the educational routine, advancing, for example, to make the curriculum more flexible.

The characteristics of the tasks assigned to the coordination of the programs are directly linked to the actions that involve planning, monitoring and evaluation of services, in order to adapt them strategically to the organizational context. Identifying individual particularities and problems and their collective articulation is essential so that the professional can effectively develop a management with decisions based on the expansion of social participation of students with disabilities.

In this sense, the study participants emphasize that the occupational therapeutic management of the situations brought by the students, or even the participation of the professional as an articulator of institutional partnerships, can, sometimes, take on a primarily administrative or mediation character, without, however, translating an effort or an institutional policy that, in fact, privileges the confrontation of barriers found for inclusion. Therefore, the study participants reported institutional difficulties, such as insufficient human and material resources to implement or expand actions for individual monitoring of students and/or institutional mobilization through more collective and institutional strategies to enable inclusion processes.

Despite the issue raised, this study highlights the ability of occupational therapists as mediators and active in carrying out actions so that institutional partnerships produce a dialogue between needs and resources. Professionals assume the dimensions of support for educational processes, translated into the practice of equivalent actions, which articulate institutional demands and the uniqueness of students' daily lives, affirming their technical, ethical, aesthetic and political commitment in social inclusion processes (Rocha et al., 2018).

The following reports record the routine of the programs and the mediation role of the occupational therapist as a manager.

I also work with the administrative and political part so, sometimes, we have to get out of this direct issue of follow-up, being more in charge of the other technicians, and in these thematic meetings, people who help in the follow-up have been trained to take a little of the coordination (Ana).

In that academic routine between student-student, it is still a possible barrier, we are going to do what we call raising awareness of the relationship with people with disabilities, sometimes it is just our team or sometimes we do it, then we work along with other sectors. [...] it would be the work really directed to the teachers, the technical team or to some sectors as we are going to do in the RU, right, how to approach these people, but we also do it with the classes, when we talk and I go directly between the lines and realize that it is the attitudinal in that coexistence. [...] I can't just evaluate and let it go, I have to monitor, advise his entire process and there are these other questions, I need to talk to the girl from the RU (University Restaurant), ask how is the portfolio, I have to schedule a sensitization, I have a meeting with the engineer, I have to do such a thing (Gabriela).

Here at HEI D, the program grows, you know, you see the professors coming to you, asking for help, asking me what they can do and already managing to look at the student beyond the disability, you know or regardless of whether they have identified them as disabled or not, they can already see that student who is different in the classroom, you know? (Eliza).

The managers' statements indicate the complexity of their daily work, in which it is essential that each educational institution is sensitized to build and agree on an inclusion program, considering the articulation of institutional policy dimensions, such as, for example, in collective and planned awareness of the different instances of power and the different actors for the participation of people with disabilities in opportunities provided for the training path of all students. This could include holding Sensitization Workshops, debating legislation on inclusion, overcoming identified physical and/or attitudinal barriers, including, in this agreement, the allocation of human and material resources for their development.

In order to increase the institutional repercussion of the programs and the management capacity of professionals, the involvement of the program teams with the academic community is mentioned for the development of their actions with partners of engineering teams to deal with demands related to physical space adaptations, library for adapting teaching material and professionals coordinating the courses, and, consequently, their teachers. These are examples of the construction of initiatives throughout the process of setting up the programs, and their proposition as a previous inter-institutional articulation was not evident. Apparently, the direction of actions is

always individualized and organized based on each student who enters the HEI. It is noted that all the therapists interviewed positively articulate their activities with those of other sectors of the HEI, being recognized as the responsible professionals and who can solve issues related to inclusive issues, being contacted in several instances in the HEI, to participate in any resolution or direction of matters relating to students with disabilities, which translates into recognition of their abilities; however, at the same time, it indicates the importance that actions for inclusion have greater institutional articulation, as stated by the participants Ana, Gabriele and Eliza in the previous reports.

It was evident the engagement with which occupational therapists report their professional practice and daily routine. In their speeches, there is passion and contentment with the evolutions that occur, especially with regard to the challenges related to attitudinal accessibility, which require continuous efforts to articulate micro and macro processes of sensitization that made it possible to identify and deal with existing contradictions and prejudices. Involvement and commitment to inclusion processes can be built on intersubjective relationships between actors: students, teachers, employees, coordinators and institutional and program managers who are willing to deal with attitudes and processes resulting from values and imaginaries about difference and disability. Observing the positive result of these processes can produce passion and contentment necessary for the continuity and permanence of professionals in the management work, which, as shown in the characterization of some managers, is an activity associated with teaching functions.

The professional profile is directly linked to those who have accepted institutional challenges and have faced clashes in defense of the right to participation of people with disabilities in higher education.

When asked about the difficulties in developing the actions, the five interviewees mentioned architectural barriers as one of the main difficulties, an aspect that directly involves financial and material investment for adaptation, including institutional mechanisms and communication. Access to students was also remembered as a difficulty, a fact linked to HEIs A and E, which have more than one campus and are far from each other. In these cases, the program focuses on coordination and creates local committees for each campus.

There are notes on the attitudinal barriers in the contact between students with disabilities and students without disabilities or even with professors and coordinators, who resist making didactics more flexible, or even among students without disabilities, who resist respecting the rights of access to equal measures by the students with disabilities. The reports below indicate part of the challenges encountered by the program management processes.

The second biggest problem is the attitudinal barriers. I am going to campaign on this second semester about "Committee of inclusion and accessibility: what is my role?". Many people go out there, make phone calls, send e-mails complaining that the committee doesn't do this, that the committee doesn't do that, that I don't know what, then I ask the person: what is their role? What I want to ask in the second semester is what is your role like, what do you need to do and why? (Adriana). Even more than the architectural ones I would say, perhaps because every day I face the situation of having to deal with a student who could not be welcomed due to this lack of sensitivity, which I think is bad (Adriane).

We talk and I go directly between the lines of an assessment or follow-up service for students with disabilities and you can see that it is the attitudinal in that coexistence, in that academic routine between student-student is still a possible barrier. We are going to do what we call raising awareness of the relationship with people with disabilities [...] we work together with teams from other sectors. The same goes for training with professors and training with other actors at the University, such as the professionals at the university restaurant (Gabriela).

The reports inform about the importance that, during the program development process, institutional guidelines are built considering the importance of sensitization processes for the implementation of the programs, always articulated to the objective conditions of the different educational institutions, in view of the guidelines placed by the National Policy on Special Education from the Perspective of Inclusive Education (Brasil, 2008), by the guiding document of the Inclusion Program - Accessibility in Higher Education (Brasil, 2013) and by the Brazilian Law of Inclusion (Brasil, 2015), which reaffirm the right the participation of people with disabilities at different levels of education and the need for public and private institutions to carry out initiatives for their affirmation.

In higher education, the transversality of special education is effective through actions that promote the access, permanence and participation of students. These actions involve the planning and organization of resources and services to promote architectural accessibility, communications, information systems, didactic and pedagogical materials, which must be made available in the selection processes and in the development of all activities involving the teaching, research and extension (Brasil, 2008, p. 16).

On the other hand, the professional from HEI B cites the program's action related to curricular adaptation as positive aspects, which deserves to be highlighted as a guideline for equitable actions.

> Yes, we already do. [...] we work very directly with the collegiate and the course professors who will receive the student or who are in class. Every six months we meet with them, because each semester there are different disciplines. So we try to create a curriculum, a curriculum plan for this student according to the semester, so we can, for example, try to articulate disciplines in the same area of the student, focus on a specific area. We can work on the format of the different discipline to be able to meet the needs of that student or, simply, the production of teaching material. We can work with more time spent at the institution, so it varies, but this is discussed every semester with the professor and collegiate coordinator, so it is defined together (Ana).

The participants pointed out few references to actions aimed at attitudinal, communicational, programmatic, methodological accessibility, to deal with adaptations

for evaluation processes, new methodological and curricular organizations or even changes in communicational behavior¹⁰.

Building actions to face the challenges of accessibility implies expanding the debate and the involvement in a more collective way of the different members of the academic context. According to occupational therapists, this dimension would need to be strongly expanded in order to face the barriers posed by the theme of including people with disabilities in higher education, in order to avoid understanding equivalent measures as necessary modifications understood only as a rite for compliance of accessibility standards. This posture can lead to the presence of ineffective adaptations, such as parking spaces on uneven terrain, uncovered access ramps for rainy situations, elevators to access upper floors that do not work, auditorium stages without a ramp or even restrooms that are partially adapted.

Dialogue between the individual and collective dimensions of management work

The management of occupational therapists in the researched programs revealed the need to emphasize the subjectivity of the people being monitored, while considering that the technique produces an objectivity of life with which the subject needs to deal. From this perspective, it is possible to reflect on questions such as: what technical actions are possible to be carried out in certain institutional policies when they are more universal and when they are more focal?

This dilemma is present in the struggles of people with disabilities, as well as in the concrete action and attributions of a program manager. A recognition that presupposes understanding the specificities/differences is necessary. For this reason, the importance of a focal policy is emphasized, which provides specific alternatives, without cancelling out differences (de-differentiation).

The development of the inclusion program takes place in the context of affirmative policies, which implies concretely supporting opportunities for permanence and expanding circulation and social participation, which are also objectives of the occupational therapist's technical action in a program for the inclusion of people with disabilities in higher education. Social circulation favors the possibility of the disabled person being together with others, but this action alone does not guarantee the expansion of public space for the subject. In this way, a political axis of action of the occupational therapist, intends to guarantee, in addition to circulation, the expansion of public space, understanding that the intervention is not restricted to the disabled person, but also covers the other actors in a daily and collective plot. The actions carried out are intertwined in actions that are sometimes more directly aimed at people with

¹⁰Examples: Attitudinal accessibility: actions directly linked to the perception of the other. Reduction of prejudices, stigmas and stereotypes; Communicational accessibility: actions related to the elimination of barriers in interpersonal communication in verbal, written or spoken language, including digital accessibility; Programmatic Accessibility: actions linked to public policies translated into norms, regulations, ordinances, decrees; Methodological accessibility: teaching performance, for example, in the restructuring of teaching and learning techniques.

disabilities, understood here as punctual, or present actions of a more universal and collective nature.

In this sense, it is possible to consider the importance of the elements indicated by the co-management proposal by Campos (2003), presented earlier. The programs are intertwined in the *pedagogical actions*, in which professionals and HEIs must consider the need to sensitize the different actors to recognize the challenges of the experience of disability in society and in the institution, and, thus, activate reflection/learning processes to build management for inclusion, in such diverse institutional and social realities. Programs can also develop *clinical* actions to support the development of necessary actions, both for students with disabilities and for the whole of the HEI, in order to meet the needs of students to participate in academic activities. On the other hand, programs are responsible for meeting *political* dimensions, that is, giving materiality to the guidelines of national inclusion policies, but also to those that mobilize the creation of inclusion programs in the institutions themselves, including elements necessary for inclusion to be the translation of more collective perspectives. We cannot forget that these different and important dimensions are permeated by the powers, knowledge and affections that constitute the management and teaching-learning process in the academic universe.

The professionals revealed that, in the organization of practice and in their attributions, for example, the recognition of skills, there is a need for a way of evaluating individual conditions through standardized instruments. This fact was simultaneously linked to the sensitive speeches of the professionals to what was individual, in particular, to the student's life stories. In this way, it is understood that the use of standards, in search of a common language, would give voice to the technical action of the occupational therapist in front of the other team members, emphasizing that, in the cases studied, the occupations of the students, beyond their academic life, were one of the focuses of professional action to support students. In this sense, occupational therapists directly contribute so that accessibility programs or centers are involved in different aspects of everyday life in higher education.

Promoting social circulation to ensure the possibility of the presence of people with disabilities in the university environment is the objective of the occupational therapist's technical action in a program for the inclusion of people with disabilities in higher education. Moreover, expanding this circulation may be part of the professional attributions of occupational therapists who are members of programs, considering the needs of the student and their collective. At the same time that it is necessary to expand social circulation and face the challenges of accessibility as a technical action, it is necessary that these are guidelines for the institutional action of the programs.

To the extent that the program manager occupational therapist proposes to carry out actions in a political management axis, influencing and pressured the institution to assume this dimension, it may become more evident that the intervention of programs and professionals should not be restricted to the person with disabilities, as it must also encompass a plot of collective daily life, which is even extended beyond the university environment.

One of the actions that was considered as the most collective action in the axis of architectural accessibility was reported by Ana, from HEIS B, when she mentions the implementation and work according to the Universal Design of learning. This model "is, therefore, an innovative concept with enormous potential, deserving of in-depth investigation, which seems to us relevant for an inclusive school and education" (Alves et al., 2013, p. 121).

The model, which is inspired by the concept of Universal Design applied to architecture, intends to make accessibility easier for everyone, with regard to architectural conditions, structure of services, products and educational solutions. The model, initiated by the United States Department of Education in 1999, in Wakefield, Massachusetts, presupposes a network of recognition, strategy, engagement and affectivity in the learning relationship. This model is linked to the pedagogical planning of content and learning in different networks, so that different pedagogical methodologies are used to promote learning and "advocates the design of a curriculum in order to include objectives, methods, materials and assessments that support the students, by reducing barriers and, at the same time, providing effective support for learning" (Alves et al., 2013, p. 122).

Alcoba (2008), in the conclusion of his thesis, also mentioned the terminology of Universal Design as one of the needs to advance inclusion in which

cation differently. Bringing Universal Design principles to the educational environment, the design of disciplines and courses should be planned to be used by the greatest number of students and to the greatest possible extent, rather than taking into account the profile of an idealized student, and without the need for to resort to course adaptations in the case of students with disabilities, in order to make it an exception. Greater curricular flexibility would benefit all students, who could trace paths that are more meaningful for themselves, which could also mean diversified approaches to some content or subjects (Alcoba, 2008, p. 209).

According to Rocha et al. (2018), the intervention of Occupational Therapy in Education must be "developed in the school collective, considering students, educators, managers, families and communities". The authors indicate what is part of the propositional actions and object of the profession's intervention:

Environment, physical space, equipment, materials are also objects of observation and intervention, as well as school daily life, routines, activities, educational proposals, institutional dynamics, the relationship with parents, with the community, with the territory to be that the school belongs to. [...] These premises define the displacement of the object of intervention of Occupational Therapy in Education, from action on and with the individual with a disability or with some "difficulty" to an action in an educational space composed of different groups that interact and interact with and affect each other on a daily basis (Rocha et al., 2018, p. 22).

Pollard & Block (2017, as quoted in Minich, 2016) warn of the need for professionals to be attentive and in dialogue with social movements and the reflections proposed by disability studies.

If occupational therapists are concerned with building reflective and critical alliances with clients, then it is necessary to take into account the correlation between disability studies and activism, such work must directly address the intersectional experiences of persons with disabilities, and, in particular, experiences of people with disabilities that also involve racial issues and sexual and gender experiences. Critical work in relation to disability studies, which recognize the concept of 'Nada sobre nós sem nós' as central (Pollard & Block, 2017, p. 422, our translation¹¹).

This pertinent discussion indicates that there would be significant advances in the inclusion of people with disabilities if the programs, as well as the actions of their managers and teams, were directed to the intersectionality of the experiences and daily existence of disability, to the propositions and development of equitable actions and institutional policies. Considering also the importance of linking the challenges of practices and actions to the context of theoretical studies, which indicate the importance of expanding the concrete experiences of people with disabilities beyond individualized actions, since the problems experienced by this group originate in social processes of disability construction.

We emphasize that occupational therapists assuming the role of managers have the ability to act considering the intersectoriality of actions beyond the field of health, by recognizing the emergency of educational and administrative action. However, it is necessary to alert to the need to incorporate the social context in the actions, also aiming to foster activism, as proposed by Pollard & Block (2017), which could effectively advance circulation opportunities with a view to the social and political participation of people with disabilities in the context of higher education.

In the process of inclusion in university life, and in program management activities, the occupational therapist can create opportunities so that, in the programs, both he and the team can relate to students with disabilities, through sensitive listening, which can welcome the individual suffering experienced, as it is part of the social construction of disability. Talking about listening to the ideas, affections and experiences of each subject and consider that, "when we intervene in the plane of life, we also interfere in the micro and macro political plane, insofar as our constructions and/or daily reconstruction always impact on the defense of the autonomy, citizenship, law" (Galheigo, 2016), is a fundamental part of the guidelines for the work of the occupational therapist.

Incorporate into the educational project the need to identify and overcome the suffering of individuals, providing for the encounter, coexistence, collaboration, recognition of the uniqueness and potential of each person, which should aim at the happiness of individuals and groups. "This requires daily care, the observation that interpersonal relationships must abolish discrimination, prejudice, and stereotypes, as they bring suffering" (Rocha et al., 2018, p. 23).

¹¹Transcript of the original excerpt: If occupational therapists are concerned with building reflexive and critical alliances with clients, then they will need to take account of the strong sense of disability amongst scholars and activists that such work should directly address the intersectional experience of disabled people, and in particular experiences of disability people of color, as well as gendered and sexual experiences of disability (Minich, 2016). Critical work within disability studies recognizes the concept of "Nothing About Us without Us", as central (Pollard & Block, 2017, p. 422).

The discussion of the issue of disability, when seen by different people who are part of the academic space, would allow a more global understanding of everyday reality in HEIs. Direct and intensive contact between students, professors, or any other professional, who more directly follows the academic path process, has been possible in HEIs that have an Accessibility Center. The programs/nuclei have made it easier to follow the academic process, providing connections not only with professors, but also with coordinators and other institutional leaders who are directly linked to the academic routine. Among these, we can mention those who are part of the sector responsible for architectural and communicational accessibility.

The necessary advance is in the direction of ensuring actions less focused on differences and more consistent with the understanding of the production of knowledge provided by plurality, recognizing different skills as positive powers of knowledge construction. More collective actions that move in this direction can overcome prejudice in interpersonal relationships and favor adaptive measures that can be more easily incorporated into the academic routine. There are, however, many challenges in this process that need to have space to be revealed in order to ensure/allow more collective actions.

Conclusion

The objective of this article was to identify and discuss actions carried out by occupational therapists who manage inclusion centers in a higher education institution in order to reflect on how these are constituted and how they can support the right to social participation of young people in these institutions.

Social participation is not a theoretical concept that is easily replicated in the practice of life. The conflicting clashes of human relations, mediated by the educational system, always indicate new ways of blocking or selecting those who may or may not be present and even more participants in social life in the educational space.

It is observed as a problem, when we cite as inclusion, the continuous indication of actions to be performed on the young person with disabilities, and little is observed about practices in relation to aspects of the social production of disability, including in the university environment. In this way, it is understood that the focus should be on inclusion and access for all and not just on meeting individual equal measures, making the person with a disability a "depositary" and receiver of actions. The demands change, depending on the people, but they are tiny and would be conducted in a mild way if the context of acceptance of access for all permeated the higher education educational system.

The actions carried out in the accessibility centers, which have occupational therapists, indicate that, although there is investment, this is not enough to carry out the necessary actions, in order to implement the equivalent measures. There is a common axis that refers to the difficulty of access due to architectural barriers, listed as those that demand greater cost for accessibility. On the other hand, there is constant action produced through institutional partnerships; at this point, it is important to highlight the expertise/skills of occupational therapists as mediators. These partnerships seek to produce a dialogue between needs and resources, demonstrating a comanagement model, which is guaranteed to be effective in this context.

Programs at HEIs are fundamental to fostering inclusion; however, they cannot be restricted to one area or to the responsibility, only, of the teams of the accessibility centers. They must be an institutional project and encourage institutional spaces to serve students with disabilities and to have specialist support when necessary.

It is important that the management of these programs lead HEIs to understand the equivalent measures as necessary modifications, not only as requirements of legal norms, for example, architectural accessibility, but as alternatives to enable student participation in the university environment.

It is understood that the action of the occupational therapist manager in the educational space is permeated by the singular and collective conditions of everyday life also of university life, in correlation with the other everyday spaces in which the person lives. Therefore, it is essential to emphasize the complexity of the field that involves the action of the occupational therapist in the inclusive context. It is also important to highlight that the experience of disability in the context of higher education is faced with challenges that go beyond the academic context, such as, for example, the difficulties of transport, housing, architectural access outside the university, in addition to the different signs of need for changes in attitudes and relationships between people. The difficulties for the inclusion of people with disabilities in higher education are part of those found outside the university environment and the efforts to overcome them must be part of a collective construction, which implies the participation of different actors and, mainly, of the students with disabilities themselves, recognizing them as a subject of rights, considering the challenges of understanding the social processes of disability construction and the possibilities of dialogue with social movements and activists of this segment of the population.

The investigated programs are recent; the context is one of reduced investment in human and financial resources and even little reflection on the evaluation of its activities. For these reasons, it is understood that the maturation of the programs tends to make new actions possible for more collective aspects. These actions can collaborate to overcome prejudice in interpersonal relationships and favor that adaptive measures can be more easily incorporated into the academic routine.

It must be considered, therefore, that the individual experience of professionals could have a space to be shared in the collective, since, in the five HEIs, the programs have similarities in the difficulties and possibilities they find for their implementation and development.

This article can contribute to a more structured reflection on the intervention of the Occupational Therapy area with people with disabilities in inclusion programs in higher education, and on how the training processes for new professionals should broaden the discussion on the challenges posed by the social construction of disability and its impact on the daily life of people with disabilities and on program management activity. We do not infer that the occupational therapist is the only or most suitable professional for management; we only present the possibilities of action of this professional as a manager in programs in Brazilian HEIs in the studied period.

This can be a topic of studies and debates among occupational therapists who manage programs, and are trying to deal with the challenges to improve their practice, as professionals who are part of teams and institutional projects concerned with increasing the possibilities of participation in higher education, with possible repercussions for the participation in social life of students with disabilities. Contributions and challenges in the management of occupational therapists in higher education inclusion programs for students with disabilities

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Contributions and challenges in the management of occupational therapists in higher education inclusion programs for students with disabilities

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