

Participation, agency and disability in Brazil: transforming psychological practices into public policy from a human rights perspective

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Participation is a little discussed or researched concept in the social sciences, despite its importance in understanding activism. This article presents some theoretical and methodological considerations for promoting social participation and agency for disabled people through the work of psychologists associated with Brazilian public policies. This article takes the form of a discursive study, based on the dialogue between: a) Brazilian legislation on disability; b) Bader Sawia's Ethical-Political Psychology; and c) Disability Studies. Based on the assumption that psychological practices should promote participation and agency for disabled people, we present the elements that hinder or control participation. We then present theoretical-methodological contributions to build practices that promote participation and agency, highlighting: a) critiques of moral and biomedical models of disability; b) understandings of disability from intersectional perspectives that incorporate it as a category of analysis; c) including disabled people in the construction of research and professional practices disabled people and d) the rupture with ableism, which blocks the participation of disabled people. Participation has shown to be a multidimensional concept that covers a spectrum of aspects – from the practice of activism to the constitution of subjectivity in disabled people.

Keywords: Participation; agency; human rights; disability studies.

Introduction

It is estimated that over a billion people worldwide are disabled (WHO and World Bank, 2011). According to information gathered in the last census (2010) carried out by the Brazilian Institute of Geography and Statistics (IBGE, 2011), approximately 45 million Brazilians were living with a disability, which represented 23.9% of the total population. Of these, 13 million experienced impairments with high support needs of a physical, visual, auditory or intellectual nature. Moreover, 56.6% of the total number of disabled people were women, and 43.4% were men. Additionally, 67.73 % of people over 65 years have a disability, indicating that the number of disabled people is on an upward curve due to an increase in the population's life expectancy.

Starting in 20st century Brazil, after a long period of exclusion, disabled people began to participate in the political struggle for social rights. The emergence of this movement was influenced by the political events that took place in Brazil in the late 1970s. That historical moment prompted a debate about organizations geared towards disabled people— which were broadly based on philanthropy— and the appearance of organizations led by disabled people. This represented a significant political step for this social group (Lanna Júnior, 2010). Disability activists worked collectively to construct a common agenda to claim their rights, which was then incorporated into the text of the 1988 Brazilian Federal Constitution (Maior, 2017). Concepts of charity and care also began to be questioned by participants of the Political Movement of Disabled people, thereby contributing to the creation of a disability social model in Brazil (Lanna Júnior, 2010).

The reinforcement of this political base was strongly boosted by the United Nations' proclaimed International Year of Disabled Persons in 1981, and the founding of the National Coordinating Agency for the Integration of Disabled People (CORDE) in 1986. As a result of the 1988 Constitution, the National Council for the Rights of Disabled people (CONADE) was established in 1999, and there were Conferences on the Rights of Disabled people from 1996 onwards, bringing together disability activists, service-providers and relatives to discuss the social inclusion of disabled people. These developments were important in consolidating the political struggle of disabled people (Maior, 2017).

Lanna Júnior (2010) and Maior (2017) highlight how the Brazilian Disability Rights Movement played an important political role both in the construction and fight to ratify the Convention on the Rights of Persons with Disabilities (UNCRPD), as well as the drafting of Law 13.146 (the Brazilian Law for the Inclusion of Persons with Disabilities (LBI). Maior (2017) stresses that after the approval of the LBI, the set of Brazilian laws covering persons with disabilities became recognized as one of the most comprehensive in the world.

Nonetheless, the issues of integration-inclusion still persist to this day, and current legislation has not always been enough to ensure the participation and agency of disabled people (Maior, 2017). As such, research being carried out by the Brazilian Social Psychology has shown that there is still some way to go to implement this legislation, which does not always guarantee the rights set out therein. This question will be discussed further when we address the barriers to participation of disabled people in Brazil.

Disability has been widely approached in scientific literature in an objectified way, especially in studies that circumscribe it to a biomedical model of normalcy. Having an ideal of capability and normativity, this model turns disabled people into objects of knowledge and sites for interventions in the field of rehabilitation, dehumanizing them, delegitimizing their participation and taking away their agency.

Also, according to Mello et al. (2012) and Gesser et al. (2014), an understanding of disability based on the biomedical model erases its status as a social category- such as race, gender, sexuality, generation, social class, and region. In addition, it sustains disability as an individual problem resulting from an injured and impaired body, rendering invisible social barriers that transform disability into an experience of oppression and preventing the participation of disabled people.

Referring to the American context, Olkin et al. (2003) and Linton (1998) argue that the production of knowledge and psychological practices are also largely referent to the medical and rehabilitation models. The authors state that, although about 15% of the American population experience disability, the pathologization of disabled people- and often the reduction of this experience to a medical tragedy- still dominates the context of training and professional practice of psychologists. When proposing strategies in the field of clinical psychology, Olkin (2017) points out that psychology can improve its practice by incorporating Disability Studies principles.

In the context of the United Kingdom, authors such as Goodley et al. (2006), proposed a field of studies they called the Critical Psychology of Disability. Based on a dialogue with Critical Disability Studies, it emerged from a critique of the psychological, individual and pathological trends of dominant psychological theories which are guided by the paradigm of normality and deviation and delineate their interventions towards social adjustment. The authors highlight that disability studies take an emancipatory perspective to disability activism and consider the heterogeneity of disabled people's experiences; therefore, this field contributes to proposed radical social and theoretical changes in Psychology.

In Brazil too, psychology as a science and profession, tends to reiterate the objectification of disability, especially in areas embedded in biomedical approaches. This process is based on allegedly scientific knowledge that, when establishing the parameters to define what is considered normal, construct disability as a category of deviation (Gesser et al., 2014; Gomes et al., 2017, Pizzinga et al., 2018). However, in Brazil and in other countries such as the United States, authors have argued that psychology can transform its practices through a dialogue with the field of disabilities studies, breaking with the historical processes of normalization, pathologization and medicalization of disability (Gesser et al., 2014, Moraes et al., 2017). Olkin et al. (2003) are the US pioneers in this debate. In the paper 'Can disability studies and psychology join hands', the authors criticize the practice of psychology, broadly related to the field of rehabilitation, and propose a dialogue with disability studies, which they understand as being an interdisciplinary field that includes psychology. The authors point out that disability studies offer an alternative conception to traditional conceptualizations of disability as denoting the abnormal- a deviation from abled-bodiedness- or the 'special' that has historically corroborated with the segregation of this social group.

Although in Brazil the field of disability studies took time to be recognized in the area of psychology (Gesser et al., 2012), since the end of the 20th century some researchers from the field of social psychology, educational and school psychology, have been forming critical perspectives on disability. In the 1990s, for example, Amaral (1995) investigated and theorized prejudice in relation to disabled people. Amaral was an academic woman with a disability who became a pioneer in appreciating the singularity of the disability experience and the attitudinal barriers faced by disabled people. Omote (1994) too, published important research on the social perceptions of disabled people in social interactions. In broaching the issue of difference and diversity in school as a challenge for education, Omote became one of the first to develop a social approach to disability in Brazilian Special Education.

In the 2000s, the influence of the movement and theoretical field of inclusive education helped bring Psychology closer to viewpoints validating the human rights of disabled people. In this manner, publications linked to educational and school psychology started to outline a perspective in which disabled people were conceived of in terms of their right to education and participation in the school environment. One of the important publications from this period was the book *Educação Inclusiva - Direitos Humanos na Escola* (Inclusive Education - Human Rights in School) (Machado et al., 2005). Machado, one of the main authors of the time, brought psychology closer to the inclusive principles of education, helping to spread the notion of human rights in the field of educational and school psychology.

Regarding the importance of these studies, none of them addressed the biomedical concept of disability to the point of representing a theoretical leap. The concept of agency was not highlighted, and these studies did not mention the disability rights movement. In Brazilian critical social psychology, for example, disability has remained a rare theme in publications, almost always appearing on the periphery of studies on prejudice (Satow, 2000).

In relation to school psychology, discussions on the right to education, failed to include disability issues, such as accessibility to knowledge in schools, and ableism within curricula and pedagogical practices. Furthermore, it should be noted that the national social psychology and school psychology events promoted by the respective associations (ABRAPSO and ABRAPEE), were not concerned with the effective participation of psychologists with disabilities until the first decades of this century, there being no resources for interpreters, readers and accessible spaces.

As such, we may state that since the 2000s, Brazilian psychology has undergone an important transition in the direction of including disabled people. However, in its biomedical conception of disabled people, it does not view them as political subjects and agents of their condition. This study aims to highlight how important it is for psychology to make advances on this issue.

The goal of the present paper is to present theoretical and methodological contributions to the promotion of social participation and agency of disabled people in the work of psychologists who influence Brazilian public policy. This discussion is in line with the Brazilian legislation on disability, which highlights the social participation of disabled people as a guiding principle of the public policies addressing them.

In this discussion article, we will first present the Brazilian legislation on disability, with an emphasis on the practice of psychology in Brazilian public policy. Then, the theoretical perspective on participation and agency will be discussed as well as the connection between them. We will also present some elements that have historically hindered the participation and agency of disabled people. We conclude the article by presenting some theoretical and methodological contributions, which are in line with the Brazilian legislation on disability, to promote participatory processes for disabled people.

Psychology and legislation for disabled people in Brazil

In this section we will briefly present an overview of Brazilian legislation on disability, emphasizing the UN Convention on the Rights of Persons with Disabilities. First of all, it is important to say that this legislation emphasizes the need for training professionals who are able to implement specialized practices to eradicate the oppressive processes of normalizing, pathologizing, and medicalizing disability. The current Brazilian legal apparatus also calls for professionals involved in disability policy development to work in collaboration with disabled people, and with that, promote their participation and agency.

In Brazil, the re-democratization process and the promulgation of the Federal Constitution of 1988 (also known as the ‘Citizen Constitution’), brought a significant growth of social policies and services promoting health, education, and social welfare to address the population’s needs. Along with the services, there was also a political process to reaffirm psychology as a field of research and professional practice that must be present in public policy development. Psychology, until this point, centered on a biomedical perspective restricted to private clinics and work psychology, was able to expand into the fields of education, social welfare, health and, less prominently, law. In these latter areas, psychological practice has focused on evaluation and special education.

Despite the overall benefits that the influence of psychology in public policies brought to the Brazilian population, it is still possible to identify a few gaps in the process, including policies and practices related to disabled people. This is due to the fact that psychology still places disabled people as the object of practices directed at correcting alleged disorders and deviations instead of, as proposed by Fontes et al. (2014), building these practices *with* disabled people. It is also important to point out that intersectionality is already present in

discussions in psychology. In Brazil, several psychology research centers, especially within social psychology, focus on dialogues related to gender, sexuality, age, race (Gesser et al., 2012). However, disability is still absent from most of these discussions, both theoretically and in professional practice, and is rarely present in training.

Such perspectives reduce disability to rehabilitation practice. There is a failure to consider it an intersectional analytical category constitutive of subjectivity and to address the multiple layers of social barriers that oppress and segregate disabled people. This is in disagreement with the most recent Brazilian legislation on the matter. In August of 2008, the country ratified the UN Convention on the Rights of Persons with Disabilities along with its Optional Protocol and enacted it into its legal system as a constitutional amendment through the Federal Decree n. 6.949/2009 (Federal Decree n. 6.949/2009). Ever since the legal approach to disability has significantly changed as we will argue below.

The CRPD enactment revoked many previous Brazilian laws and stimulated an expansion of the Brazilian Law of Inclusion of Disabled people (Law n^o. 13.146, 2015). Both documents uphold the removal of barriers preventing the full participation of disabled people, ensuring inclusion with equal conditions. The need to consider the specificities of each disabled person is also emphasized, since both the CRPD and the Brazilian Law of Inclusion point out that gender, sexual orientation, social class, and age, among other factors, might produce different experiences of disability. This is an approach aligned with the work of several disability scholars such as Linton (1998), Mello et al. (2012), Kittay (2015), Olkin (2017), and Shakespeare (2018).

Moreover, both the UN Convention and the Brazilian Law of Inclusion of people with disabilities state that all social policies to promote legally guaranteed rights— whether related to social assistance, health, or education— must be built on a concept of disability that aims to eradicate social barriers (Santos, 2016). Considering that psychologists are more and more involved in such policies, the need for disability to be of part of psychologists' training is imperative. However, this training must prioritize an approach that is not connected to biomedical models, which only contribute to the pathologizing and medicalizing of bodies experiencing disability, and hence delegitimizing their voices and creating oppression.

Participation of disabled people in all issues that concern them is a fundamental and integral aspect of Brazilian legislation. Hence, the legislation declares that participation should be promoted by the Councils of Disabled people, in which at least 50% of the members must be disabled people, and by National, State, and Municipal Conferences of Disabled people. In addition, there is a constitutional guarantee that disabled people can actively participate in all matters related to them, an indicator of their agency in these spaces (Law n^o. 13.146, 2015).

In the following sections, we will present the contribution of disability studies and Sawaia's

Ethical-Political Psychology to the building of practices that promote the participation and agency of disabled people.

Participation and agency: problematizing the concepts

As previously mentioned, the participation of disabled people is a key element in Brazilian public policies, and is guaranteed by the country's main legal provisions. It also has a fundamental role in eliminating social barriers and improving the services offered to this population.

But what is participation after all? How is it possible to promote the participation of disabled people in the construction, implementation, and supervision of Brazilian social policies? Which practices within Psychology may hinder/disallow the participation of disabled people? And which practices might expand the participation of these subjects? Do all modes of participation promote agency? These are a few questions that will be discussed in the following sections.

Participation: a polysemic concept

Participation as a concept has been widely discussed in several social spaces. In academia, many authors discuss the risks and opportunities of social participation in distinct contexts (Sawaia, 2002; Williams, 2004; Mirza et al., 2016). Several social groups claim, based on different arguments, that participation is an integral element of daily life in this day and age. Civil Rights Movements advocating for social rights, building on the slogan 'Nothing about us, without us', demand the right to take part in all political decisions concerning one's life. The Disability Rights Movement is prominent in this arena. In 2006, it had a significant role in approving the CRPD after years of strenuous debate. The adoption of this pivotal document resulted from the participation of many disabled people from organizations all over the world.

Even so, participation has also been an object of dispute. The World Bank has used the concept of participatory development in the 'World Development Report 2000/1: Attacking Poverty' (World Bank, 2001) to promote political prescription and a liberalization agenda. This approach made some authors avoid the term, fearing it might change into an instrument for disciplining the excluded (Williams, 2004). Big corporations have also tried to implement participatory practices aiming to amplify productivity and increase profits (Sawaia, 2002).

Problematizing the participation of disabled people, Mirza et al. (2016) argue that the standardization of the term is based on the regulations for disabled people and on progressive

ideals because only some modes of participation are recognized. The authors highlight the importance of considering the active role disabled people have in choosing the activities they want to take part in, as well as the opportunities offered in a community. Furthermore, they state that individual experiences of participation 'are deeply conditioned by material realities and structural barriers that are common across large numbers of disabled people' (Mirza et al., 2016:163). Thus, participation inherently relates to social justice.

Despite the different meanings attributed to the concept of participation, which, as stated above, can even be used as a political strategy for controlling excluded people, we argue that it is a potent term to reflect on processes of promoting agency. Agency is understood here, in consonance with Judith Butler's (1993) work, not as a volitional action in a relation of external opposition to power, since it cannot be thought of outside of it. Thus, it is the capacity to perform and make evident the flaws and cracks in this process of subject-constitution. We also draw on Giddens (1984), for whom agency is a human action capable of both keeping the social forms of structure reproductions and changing them. Furthermore, considering the scope of the concept of participation, which is notably present in the Brazilian legislation regarding the inclusion of disabled people, we argue that to foster its meaning based in the idea of agency is a political act.

When addressing the concept of agency, Wilkerson (2002) establishes a relationship between sexual and political agency. For the author, discourses that represent non-conforming bodies as asexual, infantilized, and/or associate the exercise of one's sexuality as a possible threat, diminish the political legitimacy of disabled people. This happens because sexuality is a dimension of life, and its control involves the control of the person as a whole.

Sawaia (1997) offers an important analysis to understand the complexity of elements that work towards increasing or lowering people's participation in different spaces. For Sawaia, 'political participation goes beyond *action efficacy* to be presented as action potency and *subjective legitimacy* which means having the right to feel you have the right to be heard and recognized as a member of argumentative communities that define collective 'common good' policies' (1997:155, emphasis in original). Hence, for participation to occur, social legitimacy must also be present, and this depends on the affective dimension of feeling- that one has the same rights as other members of a community.

In this sense, Williams (2004), when discussing participatory development, criticizes the idea defended by many authors that participatory practices are necessarily a way of maintaining political control over a population, which depoliticizes its critique. Through a Foucauldian perspective, he develops three main arguments: 1) even though participation could be a form of subjugation, its consequences are not predetermined, and its subjects are never fully controlled; 2) participation is a new space for political action; 3) instead of seeking the institutionalization of participation, one must construct practices aimed at emancipation.

Finally, the author suggests a re-politicization of participation ‘as an opened and ongoing process of engagement with political struggles at a range of spatial scales’ (Williams, 2004:557).

Supporting the debate on participatory development, Chambers (2017:119) suggests that ‘participatory methodologies (PMs) have an almost unlimited potential for knowing better together, and that in most cases they are ‘win–win’ because they bring gains in quality of data and insights while at the same time empowering those who generate them’. Sawaia (2002), despite also drawing attention to the risk of a possible appropriation and control of participation as a concept, stresses the term’s positivity. Based on the work of Vigotski and Espinosa, this important scholar in Brazilian Social Psychology has argued that social participation is inherent to the human condition. In this regard, we only become humanized in the social relations we form with others. It is to say that, in Vigotski’s (2000:35) words, ‘Man is a social person = an aggregate of social relationships embedded in an individual’. One’s existence is only possible through social relationships and, more than that, through the preeminent encounter with many others, and which characterize cultural experience. Moreover, Sawaia (2002), referring to Espinosa, stresses that it is social participation that enables the subject to not only ‘preserve the being, but to expand it’. What we can understand as the widening of its human capacities towards a future.

Within disability studies, the philosopher Kittay, presents an important theoretical and methodological framework that expands and complexifies discussions on participation. By opposing the ‘myth of independence’ that permeates and constitutes all of us, the author points out that human beings are interdependent, and that our survival depends on many others (Kittay, 2015). Based on her experience as the mother of an intellectually disabled woman with large and intensive support needs, Kittay questions what intangible criteria should be considered to legitimize both participation and the guarantee of rights for people who cannot personally fight for them and whose very humanity has been put into question. A similar perspective is endorsed by Erevelles (2011), who vehemently criticizes standardized perspectives of participation, while proposing a more inclusive understanding of the term based not on an autonomous individual, but on the possibilities of interdependence and community support.

Based on the dialogue between disability studies and Sawaia’s Ethical-Political Psychology, we see participation as inherent to the human condition and a fundamental human right. Although we agree with the argument that the removal of barriers is vital to broadening the participation of disabled people, we believe there is a need to break free from the standardized concepts of what it means to participate– which only cover people capable of reproducing the normative requirements of corporeality and functionality. As such, a perspective that promotes participation needs to recognize and appreciate the experience of people with different functional conditions in the construction of theories and policies related

to them. In addition, we would also like to highlight that participation encompasses identity as well, since disabled people recognize their experience as being inherent to a collective oppression due to lack of social acceptance. To conclude, based on Vigotski's (2000) theory, we would stress that participation is a constitutive dimension of the person, without which humanization is impossible.

Considering that participation is part of the human condition, why are many disabled people still segregated and lacking the social legitimacy to participate in society? Which historical conditions have undermined their chance of participating in society and fighting for their rights? These questions will be addressed in the following section.

Main barriers to participation and agency of disabled people

Taking into consideration that we are all social beings and that participation is part of the human condition (Sawaia, 2002), it is important to address the historical conditions that prevent the participation of certain social groups or that use it as a tool for discipline and control (Mirza et al., 2016; Erevelles, 2011). When talking about disabled people, there are many elements that limit and delegitimize their equal participation. One of the elements hindering social participation of disabled people is ableism, which is widely present in Brazil. According to Anahi Mello (2016), a cultural anthropologist, a person with a disability and a Brazilian disability rights activist, ableism is materialized through prejudiced and discriminatory attitudes that rank people in relation to how their bodies conform to standards of beauty and functional capacity. Ableism leads to disabled people being generally treated as incapacitated (unable to work, learn, care, love, feel, desire and be desired, have sexual relations etc.). As such, ableism deprives disabled people of numerous rights.

Although we consider ableism to be defining of the processes that hinder the participation of disabled people, since they tend to view them as incapable of participating in the different social spaces, we also believe that escaping ableist frames based on the biomedical model is essential, but not enough. We must also disrupt professional intervention strategies that, by not taking intersectionality into account, homogenize disabled people and produce barriers that prevent access to education, health, social services, and justice. As the World Report on Disability (WHO and World Bank, 2011) has shown through the analyses of several studies, one's gender, sexuality, race, social class, religion, and age might make some people more vulnerable when experiencing disability and also potentially more vulnerable to acquiring a disability. This is important to take into account throughout the planning, implementing and evaluation of public policies.

In Brazil, there are few studies that connect disability and other social markers of difference. One of them was conducted by Gesser et al. (2013) to analyze the intersection between

gender and disability. The results point out that gender and disability are categories that intersect regarding corporeality, labor, and motherhood. The women interviewed, also adopted identity/subjective expectations and positionalities regarding attributes seen as feminine, such as getting married, having children, and cultivating a fit body in line with current norms of beauty and attractiveness. Besides that, gender cultural narratives contribute to intensifying the experience of disability as oppressive, legitimizing violence, and producing vulnerabilities, as has been also identified by Lopes (2018) who studied the experiences of gestation and maternity of women with physical and sensorial disabilities.

Eugenic practices which had historically produced segregation, imprisonment, sterilization (Carey et al., 2014), and in some contexts such as Nazi Germany, even the systematic elimination of disabled people, are another element that prevents their participation. According to Rafter (1988), the eugenics movement as a social ideology had the fundamental goal of ‘cleaning and transforming society’ to prevent degeneration and, with that, to lower the number of people who depended on the state. In the United States, eugenic studies were essential for the institutionalization and sterilization of disabled people. The author also states that ‘even though eugenics itself lost credibility in the 1920s and 1930s, its ideology of natural hierarchy and heritability of social traits remains healthy today’ (Rafter, 1988:44). Likewise, Gill (2015), in his research on the sexuality of people with intellectual disabilities, points out that sterilization is a common procedure within this social group. Such practices are justified by eugenic ideas and the belief that many people with intellectual disabilities are insatiable when it comes to their sexuality, or can be victims of sexual violence. The author argues that the agency of people with intellectual disability has been denied based on assumptions of inappropriateness and incompetency (Gill, 2015).

Involuntary sterilization can also be identified in a study conducted in south Brazil by Regis (2013) to analyze parental discourses surrounding the sterilization of 23 women with intellectual disability. The author identified that the reasons presented to justify the procedure, were the need to cease menstruation, to avoid pregnancy, and to protect the women against sexual violence. The information obtained showed the eugenic character of sterilization, since the possibility of having a disabled grandchild was perceived as a problem for all the interviewed families. This evokes the idea of disability as a personal and medical tragedy and a determining factor for unhappiness. Most surgeries were performed by the Brazilian National Health System (SUS). In only three cases, legal procedures were followed and the surgery was authorized by the judiciary. These women were usually not consulted about what was being done to them, informed consent was not sought, and some of them even expressed their desire of being a mother.

There are, as presented in this paper, several aspects that prevent the full participation of disabled people under conditions of equality and social justice or with the recognition of their agency. This must be understood in the context of the social position that disability has

historically occupied within society- a positionality based on frames that situate disability in the realm of deviance, lack, inequality, infantilization, and which delegitimize the possibility of participation based on the perspective of agency. Considering that the role of disabled people in society is a social and political production, in the following section we will address a few contributions that Brazilian psychology– which is embedded in the country’s public policies– can make to the promotion of participatory processes of disabled people in different social spaces.

Theoretical and methodological contributions for psychologists working with Brazilian public policies

In this section, some theoretical and methodological contributions will be presented so that psychology can contribute to the promotion of participation and agency of disabled people, in different spaces of knowledge production and professional practice in Brazilian public policy. As previously indicated, psychologists take part in Brazilian public policy in different areas of professional activity, such as health, education, social welfare, and justice. In addition, the participation of disabled people has legal implications as claimed by social movements of disabled people. We argue that psychologists in their various fields of expertise can contribute to the removal of the numerous social barriers that hinder the participation of disabled people. Moreover, based on the principle that subjectivity is built from the social context in which the person is constituted, we believe that there are certain principles which, when followed by psychologists, can contribute to making disabled people feel they have the same rights to participate, as Sawaia (1997) proposes. This offers the possibility to be able to advocate for the removal of the barriers that hinder their participation.

As psychologists, we must know the different models of understanding disability and their implications for the care of disabled people, their families and the community in which they are located. This is important because some of these models have historically limited the participation and agency of disabled people. One of these is the pre-scientific moral model which places disability as an incarnation of evil, as a punishment due to a family member or ancestor’s transgression, a gift or even a mission (Mackelprang et al., 1999; Olkin, 2017; American Psychological Association (APA), 2012). These historical constructs of disability need to be identified by psychologists when present so that they can be deconstructed. Although this model has not been taught in psychology or other fields of knowledge, it is still prominent in some shared public sensibilities (Olkin, 2017). This is demonstrated in research aiming to identify changes to conceptions of disability before and after training processes conducted by Gesser et al. (2019) with teachers participating in a continuing education course offered in southern Brazil. The authors point out that the pre-scientific model was present in the lives of participants and influenced some of them in the planning of pedagogical strategies among students with disabilities. Therefore, psychologists need to be attentive to

the presence of this model in the different spaces where they practice professionally, as well as to build professional practices aiming at its deconstruction.

Another model that hinders participation and agency of disabled people was previously presented and strongly reproduced in psychological research and practice in the Brazilian biomedical model. Based on the notions of normalcy and deviation, it pathologizes and medicalizes the disabled person— turning disability into a medical tragedy. Professional practices based on this model, tend to be focused on the person's deficits and the elimination of a pathology or restoration of functional capacity. This perspective can lead disabled persons, their families and communities to focus only on healing or rehabilitation instead of encouraging them to fight for the removal of social barriers present in different spaces that operate as an obstacle to participation on equal conditions.

We understand that both the pre-scientific moral model and the biomedical model hinder and delegitimize the participation of disabled people on equal terms. Thus, it is necessary for psychology to break with practices that pathologize and objectify disabled people, as well as to seek to deconstruct the myths, taboos, and prejudices that are still very much present in the general population, placing disability in the field of guilt, pity or punishment. Dialogue with the field of disability studies is of great importance so that psychological practices involving disabled people can promote social participation and agency.

In addition to psychologists breaking away from models that segregate and oppress disabled people, another major contribution mentioned in our introduction, is to consider disability as an analytical category constitutive of subjectivity, similar to gender, social status, sexuality, age, race, and region. In the international scenario, advocacy efforts pushing for disability as a category of analysis, have been in place for a long time, mainly by feminist authors engaging in this field. One of these most prominent authors, Rosemarie Garland-Thomson (2002), considers disability as a constituent category of identity and stresses that its intersection with other categories such as gender, race, and class, intensifies processes of oppression and social exclusion. Several international authors linked to the disability studies have shown the multilayered relations of disability with gender, sexuality, social status, race/ethnicity with experiences of oppression (Banks, 2018; Gill et al., 2017; Ben-Moshe et al., 2014; Linton, 1998). The psychologist needs to be aware of all the elements in the different spaces of his or her professional practice.

Another very important element for psychologists practicing in different social policy areas, concerns the knowledge of Brazilian disability legislation. While this is strongly focused on valuing the participation of disabled people in the entire process of creating and implementing the various services intended for them, the examples shown in the previous section, highlight how this has not always occurred in Brazil. In spite of this, the UN Convention and the Brazilian Inclusion of Disabled people Act have challenged psychologists

to redirect their actions toward ensuring the participation and agency of disabled people.

Another important action to be developed by psychologists practicing in public policy, is to develop research in collaboration with Social Movements of Disabled people, which have an essential role in the development of Brazilian legislation for this population, especially regarding their participation on matters that concern them. Thus, building practices through a dialogue with Disability Rights Councils and the promotion of actions to widen the participation of disabled people in political spaces are central for the construction of more inclusive society. Several studies have shown that participation in political spaces aimed at supporting civil rights and disability justice and denouncing inequalities has had a very important political role for the re-signification of disability (Santos, 2016; Gesser et al., 2014; Diniz, 2007). Hence, through this practice, it is possible to break with conceptions of disability based on the medical and charitable models historically present in the Brazilian context (Lanna Junior, 2010), and instead contribute to disability activist movements and their claim for rights and justice. In addition, based on the emancipatory perspective of disability (Fontes et al., 2014), we propose that the strategies of professional practices with disabled people should be planned based on objectives established in collaboration with disabled people. In this way, it is possible to incorporate the motto of the disability political movement, 'Nothing about us, without us'.

Considering the issues raised above, it is important to highlight the need for psychology to carry out research and practices in collaboration with disabled people, and hence aligned with the CRPD and the BLI. Fontes et al. (2014) sustain and offer important contributions for research carried out collaboratively with disabled people, so that they can participate in the whole process, from the conception of the study right to the analysis of the data. The authors argue that, in this way, disabled people can take ownership of the knowledge produced in academia and even bring theoretical discussions and translational practices in disability studies to political activism in legitimized social and policy making spaces. Recently in Brazil, a new law was passed that guarantees slots for disabled people in federal university technical training programs and higher education degree programs (Law n°. 13.409, 2016). Because of this, the number of students with disabilities at universities has been increasing. Psychologists at these universities can contribute through educational accessibility centers in the construction of practices that guarantee the participation of students with disabilities in the decisions related to the resources needed to guarantee the inclusive process in higher education. In addition, they can provide spaces for the training of disabled people so that they can learn about disability studies and its political potential for the social transformation of environment and relationships between disabled and non-disabled people. In this way, it is possible to contribute to the resignification of disability through academic political activism, as proposed by Garland-Thomson (2002).

To conclude, we would like to propose a break with ableist disability frameworks, which,

based on the ‘myth of independence’ (Kittay et al., 2005), deny our human condition of dependence and interdependence. Breaking with ableism is a very important step for the implementation of a policy focused on care as a public and human rights issue. We believe that when care is offered based on more potent justice-based frameworks of disability—without denying the many dependencies inherent in the human condition and our inevitable interdependence— it can corroborate to the promotion of agency. Without the intention of exhausting the debate about the psychologist’s practice with disabled people, it is worth noting that the proposals presented above, may contribute to the promotion of an ethical, political, intersectional and inclusive professional practice in the different social policies accessed by disabled people.

Conclusion

Brazilian legislation on disability has been changing in recent years, arising from the struggle undertaken by the political movement of disabled people. These changes point to the need for psychology professionals to construct new practices in the different social policies in which psychology is included. We emphasize the relevance of the focus on the participation and agency of disabled people in all matters related to them.

However, promoting the participation and agency of disabled people in the fields of knowledge production and professional practice such as psychology, has been a great challenge. This is because biomedical conceptions still dominate this field. Based on universal notion of human ableism and marking disability as a deviation, this field still proposes practices aimed at objectifying disabled people, delegitimizing their participation and reducing their agency. In this sense, we proposed that psychology, in order to construct practices in line with current Brazilian legislation, should incorporate the different contributions of disability studies in the field’s research and professional practice realms. Thus, it is possible to recognize disabled people’s common humanity which has been ‘lost’ due to its association with deviation and pathology.

Based on the dialogue between disability studies and the Ethical-Political Psychology of Bader Sawaia (2002, 2014), we would argue the relevance to construct an intersectional, political and inclusive perspective on disability. The main features of this approach are: a) the argument for the inclusion of disability as an analytical category for psychology which, at the intersection with gender, race, generation, region, and religion, produces subjectivity (Garland-Thomson, 2000; Gesser et al., 2012); b) the understanding of disability as an expression of human variation (Linton, 1998; Shakespeare, 2018); c) the need to break with ableist practices anchored in the medical model so as to promote the participation and agency of disabled people (Mello, 2016); d) the principle that research and professional practice should be carried out collaboratively *with* disabled people (Fontes et al., 2014); e) the

promotion of practices aimed at the inclusion of disabled people in the different areas of their lives.

We believe that the inclusion of disability studies' approaches can contribute to training psychologists who are better prepared to understand, accept and accommodate the human and physical variation from conceptual, scientific and professional perspectives. By questioning the ideal of normalcy, disability studies can contribute to psychology rethinking practices which have been widely based on flawed evaluation processes, the differentiation between the fittest and the unfit, pathologizing and legitimizing the processes of segregation, institutionalization and/or medicalization of those who are different from what is considered typical.

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