

ARTICLE

FROM HISTORICAL STIGMA TO SELF-DECLARED DISABILITY: A STUDY WITH
UNIVERSITY STUDENTS¹

LÚCIA PEREIRA LEITE¹

ORCID: <https://orcid.org/0000-0003-2401-926X>
<lucia.leite@unesp.br>

LEONARDO SANTOS AMÂNCIO CABRAL²

ORCID: <https://orcid.org/0000-0003-3520-3687>
<leonardocabral@ufscar.br>

ANA PAULA CAMILO CIANTELLI¹

ORCID: <https://orcid.org/0000-0003-3605-6009>
<aninhaciantelli@gmail.com>

¹ Universidade Estadual Paulista (Unesp). Bauru, São Paulo (SP), Brazil.

² Universidade Federal de São Carlos (UFSCar). São Carlos, São Paulo (SP), Brazil.

ABSTRACT: The multiple current understandings of disabilities have incited, in the historical-cultural perspective, critical revisions in the Higher Education scope. Facing this challenge, the present research aimed at identifying and analyzing, in the context of two Brazilian public institutions of Higher Education, multiple conceptions of disability, specifically from the point of view of 81 university students (under graduation and postgraduation) who declared themselves as being disabled. Through an online questionnaire, together with the Intercultural Scale of the Conceptions of Disability (EICD), the statistical analysis of the collected data revealed a trend of the participants' agreement regarding the biological conceptions of social disability, even though the metaphysical conception was also identified. Therefore, the study revealed a complex and necessary debate over the socio-anthropological phenomenon of disability encompassing all areas of knowledge, to promote the recognition and legitimation of the rights of people with disabilities as citizens. There is also tension on the self-declaration to define the condition of disability at the university.

Keywords: Disability, Psychology, Higher Education.

DOS ESTIGMAS HISTÓRICOS À AUTODECLARAÇÃO DA DEFICIÊNCIA: UM ESTUDO COM
UNIVERSITÁRIOS

RESUMO: As múltiplas compreensões circulantes sobre a deficiência têm incitado, na perspectiva histórico-cultural, revisões críticas inclusive no âmbito da Educação Superior. Frente a esse desafio, a

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pesquisa em tela visou identificar e analisar, no contexto de duas instituições públicas brasileiras da Educação Superior, as concepções de deficiência especificamente de 81 universitários (graduação e pós-graduação) que se autodeclararam com essa condição. Por meio da aplicação de um questionário online de caracterização, somado à Escala Intercultural de Concepções de Deficiência (EICD), a análise estatística dos dados coletados revelou a tendente concordância dos participantes às concepções biológica e social da deficiência, ainda que a concepção metafísica tenha sido identificada. Portanto, o estudo desvela um complexo e necessário debate sobre o fenômeno socioantropológico da deficiência, com potencial interface de todas as áreas do conhecimento, com o escopo de fomentar o reconhecimento e a legitimação dos direitos cidadãos dos sujeitos com deficiências. Tensiona-se, ainda, sobre a autodeclaração para definição da condição de deficiência.

Palavras-chave: Deficiência, Psicologia, Educação Superior.

DE LOS ESTIGMAS HISTÓRICOS A LA DISCAPACIDAD AUTODECLARADA: UN ESTUDIO CON ESTUDIANTES UNIVERSITARIOS

RESUMEN:

Las múltiples interpretaciones que circulan sobre la discapacidad han impulsado, desde una perspectiva histórico-cultural, revisiones críticas incluso en el ámbito de la educación superior. Ante este desafío, la investigación en cuestión tuvo como objetivo identificar y analizar, en el contexto de dos instituciones públicas brasileñas de educación superior, las concepciones de discapacidad especificamente de 81 universitarios (de grado y posgrado) que se autodeclararon con esta condición. Mediante la aplicación de un cuestionario de caracterización en línea, sumado a la Escala Intercultural de Concepciones de la Discapacidad (EICD), el análisis estadístico de los datos recopilados reveló la tendencia de los participantes a estar de acuerdo con las concepciones biológica y social de la discapacidad, aunque también se identificó la concepción metafísica. Por lo tanto, el estudio revela un debate complejo y necesario sobre el fenómeno socioantropológico de la discapacidad, con una interfaz potencial de todas las áreas del conocimiento, con el objetivo de fomentar el reconocimiento y la legitimación de los derechos ciudadanos de las personas con discapacidad. También se pone de relieve la autodeclaración para definir la condición de discapacidad.

Palabras clave: Discapacidad, Psicología, Educación Superior.

INTRODUCTION

The development of societies throughout history has been permeated by significant philosophical, anthropological, biological, cultural, economic, political, ethnographic, relational, and psychological influences. This process has resulted in changes in individual behavior and in society's treatment of its constituents (Barrett, 2015; Mello, 2015; Pleger, 2019).

The sociohistorical and cultural construction of subjective criteria and processes for identifying individual and collective differences, and for understanding normality, disabilities, and corporealities, has currently fostered moral and ethical dilemmas in various social spheres. This has occurred at all levels, stages, and educational modalities (Pessotti, 1984; Silva, 1986; Canguilhem, 2009; González Rey, 2013).

Recent research has indicated that higher education, a context historically marked by competitiveness, has often been marked by social attitudes that are not always positive. This is particularly

noticeable in social groups that confer stigmatized subjective multiplicities, such as those classified as people with disabilities (Barembilit, 2002; Valdés, 2006; Chomsky, 2017; Cabral, 2018).

In a competitive, medicalized, and positivist society, the separation between history, psychology, philosophy, anthropology, and other sciences that seek to understand human beings in movement hinders the potential to overcome situations of negative discrimination. This gap can both impoverish the exercise of understanding empirical, historical, cultural, and social complexity, and reinforce strictly descriptive, inductive, and operationalizable concepts and practices.

Although Chudnovsky (1988, p. 15) warned that “one cannot fail to recognize that, over the course of many decades, the problem of subjectivity in our science and social practice has been undervalued,” it is crucial that the intersections of individual and collective human experience be brought to the fore.

Therefore, this process must be linked to social history, its symbolic, psychic, cultural, ontological, and epistemological characteristics, in the quest to confront theories, break theoretical dogmas, and overcome the recurring external determinism (Vygotsky, 1997).

On the other hand, González Rey (2012) supported the defense of social subjectivity as “social spaces are configured and reconfigured permanently and through different channels, one of which is the subjective configurations of the people who share social practices within them” (p. 182).

However, this article is based on socio-historical-cultural assumptions, as we understand that a subject's development conditions external influences on their own subjectivity. This process is described by Bock (2004) as a psychological phenomenon that develops over time, tied to human history, elaborated at the individual level, and based on participation in a symbolic social world. In the author's words, subjectivity, which is particular to the human condition, is

[...] conceived as something that was constituted in the material and social world, a world that only exists through human activity. Subjectivity and objectivity constitute each other without being confused. Language is a mediation for the internalization of objectivity, allowing the construction of personal meanings that constitute subjectivity (Bock, 2004, p. 6).

From this perspective, historical markers reach the subjective sphere, contributing to the construction and social representation of concepts and their associated interpretations within a given culture. This influences the contexts of those currently recognized internationally as “people with disabilities” (UN, 2006). They present bodies and subjectivities with physical, sensory, intellectual, and/or behavioral attributes that demarcate stigmatizing differences, leading to a prevailing collective devaluation. This devaluation is reinforced by associating their representations with the notions of incapacity and/or inferiority. Consequently, the historically conceived definitions and interpretations of disabilities have been, and continue to be, hybridized across various domains, affecting the legitimization of citizens' rights and shaping contemporary history while posing the risk of negative discrimination.

However, to support possible analyses of the conceptions of disability circulating in Brazilian Higher Education Institutions, a brief contextual systematization is necessary, based on historical constructs of Education and Psychology.

CONCEPTIONS OF DISABILITY AND HIGHER EDUCATION: FROM ANTIQUITY TO THE PRESENT DAY

From a historical, cultural, and economic perspective, it is important to examine contextual portraits, their respective conceptions, and prevailing social attitudes toward disability, considering the necessary care in temporal divisions and factual analysis (Le Goff, 2015).

In the Ancient Age or Antiquity (4000 BC to 476 AD), the predominantly agricultural economy encouraged the social and cultural conception of people with disabilities from a mythical, transcendental, and/or religious perspective, resulting in attitudes of dehumanization and extermination (Pessotti, 1984; Amaral, 1998).

Between the fall of the Western Roman Empire (476 AD) and the capture of Constantinople (capital of the Byzantine Empire) by the Ottoman Turks (1453 AD), a period of four phases of the Middle Ages, historical records indicate, in its first two phases, the predominance of the religious conception of disability, but still underpinning social attitudes of rejection and extermination.

In the spectrum of the two subsequent phases (Late Antiquity – 5th to 8th centuries; and High Middle Ages – 8th, 9th, and 10th centuries), we highlight the creation of the world's first institution of higher education: the Ez-Zitouna University. Located in Tunisia (Middle East), it was established in 737 with a theological perspective. In Western Europe, the University of Bologna in Italy, founded in 1088, holds its place as the first institution of higher education in the West.

In this context, Pope Gregory IX's 13th-century encyclical letter, *Parens Scientiarum*, recognized the university as an ecclesiastical institution. According to Pernoud (1996), medieval scholastic thought infused advanced studies at universities across various fields, including canon law, medicine, theology, astronomy, logic, rhetoric, natural philosophy (both metaphysics and physics), and the arts. This may partially explain why disability has been represented through religious and philosophical concepts, which have gradually evolved to include scientific (biomedical) concepts, alongside attitudes ranging from rejection and extermination to overprotection and welfare, as well as a focus on scientific categorization.

Many historical elements constituted the Modern Age (1453 AD to 1789 AD): the fall of the Western Roman Empire (the capture of Constantinople by the Turks); the transformations in the culture, religion, politics, and economy of Medieval Europe; the French Revolution; the centralization of power; the transition from feudalism to hints of capitalism; the shattering of the foundations of the Catholic Church; religious reforms (Lutheran, Calvinist Protestant, and Anglican Churches)²; Humanism and the Renaissance (Silva, 1986).

In this context, individuals transitioned from being viewed as mere servants of religion to actively pursuing invention, research, and inquiry, which ignited advancements in the sciences and the arts. Consequently, these transformations influenced the understanding of disability, exacerbated by attitudes that led to research and clinical treatments. Disability began to be perceived primarily in biological terms, often assigning blame to individuals for their condition. This perspective necessitated the establishment of specialized institutions intended to “heal” these “abnormal” bodies, ultimately resulting in the segregation and inhumane treatment of these individuals (Aranha, 2001).

The Contemporary Age (1799 AD to the present day) presents different conceptions of disability. In its first phase (18th and 19th centuries), with the end of absolutism followed by the opening

²In 1502, the Martin Luther University of Halle-Wittenberg, in the Holy Roman Empire (present-day Germany), was one of the bastions of the Protestant Reformation in Europe, alongside the predominantly Calvinist universities: the University of Heidelberg (Rhenish Palatinate), the University of Basel, and the University of Geneva.

of public participation in political decision-making and the Industrial Revolution, the Royal Academy of Artillery, Fortification, and Design³, was founded in Brazil under Portuguese sovereignty in 1792.

During that period, societies still carried over conceptions of disability from the Modern Age, strongly influenced by biomedical concepts, but gradually demonstrated attitudes toward changing contexts, primarily through the creation of institutions and the gradual understanding of the educability of individuals with disabilities.

In the first half of the 20th century, the world was marked by the Russian Revolution; two world wars; the division of Germany; the creation of agencies dedicated to peacemaking and diplomacy between conflicting countries (UN) and unions with economic objectives (NATO, OAS, EU, MERCOSUR, Warsaw Pact).

In Brazil, this era marked the emergence and growing prominence of higher education institutions. Notable examples include the Bahia School of Surgery and the Rio de Janeiro School of Medicine, both founded in 1808; the Law Schools of São Paulo and Olinda, established in 1827; the Free University School of Manaus, which was founded in 1909 and granted university status in 1913; the Federal University of Paraná, established in 1913; the Federal University of Rio de Janeiro, founded in 1920; and, in 1934, the University of São Paulo.

As perspectives of normalization and integrationism joined the conceptions of disability brought from the early Contemporary Age, the biopsychosocial perspective gained traction, even permeating the contexts of higher education institutions.

In the 1930s, Vygotsky championed this perspective in Russia, assuming that both biological and social aspects promote human development. This supported the importance of societies developing and offering the necessary compensatory support for people with disabilities in all settings, including educational settings. This perspective was still distant from the knowledge disseminated in Brazil. At that time, North American and European parameters predominated, supporting criticisms of models of total institutions, with segregated practices strongly guided by medical ideals.

The second half of the 20th century was marked by terrorist attacks. The rise and fall of communism and military dictatorship (backed by the United States); and by conjunctural and structural social movements. Notable among these were civil rights organizations, represented by the Black, Student, Feminist, Gender Diversity, and Ecological movements; in parallel, the emancipation movements in Africa and Asia and the achievements of voting rights⁴.

In the field of disability studies, specifically, important movements have also emerged that contribute to both the break with the individualistic, clinical, and ableist perspective and the approximation of the biopsychosocial perspective and the social understanding of disability. In this sense, Disability Studies⁵ remains, to this day, one of the most representative movements in the defense of the

³ Currently, the Polytechnic School (Poli-UFRJ) and the Military Engineering Institute (IME) claim to be descendants of that institution, being a precursor of higher military and engineering education, both in Brazil and on the American continent.

⁴ Without intending to exhaust the list of documents from that period, a brief compilation of the following diplomas can be made: the Declaration of the Rights of the Child, 1959; the Declaration on the Elimination of Discrimination against Women, 1967; the Declaration on the Rights of Persons with Disabilities, 1975; the Salamanca Declaration: on principles, policies and practices in the area of special educational needs, 1994; the Guatemala Declaration, 1999 (Cabral, 2018).

⁵ Beginning in England in the late 1960s, the assumptions of the Disability Studies movement achieved great international visibility after the mid-1990s, beginning to understand disability in a way that contextualized its occurrence, breaking the idea of a pre-fixed standard (Gavério, 2017).

human rights of people with disabilities. Piccolo and Mendes (2012, p. 472-473), discussing this topic, state that:

If society incapacitates people with disabilities, the only way for them to change this situation is through intense struggles to transform the current state of affairs and take control of their own lives. The new universe created by the social model opposes the colonizing discourse expressed by normative, medical, clinical, and rehabilitative knowledge with a critical, sociological, political, inclusive, and contextualized praxis, generating, when consciously internalized, a new way of thinking.

Simultaneously, higher education witnessed a challenge to its identity due to the erosion of its cultural dimension and the simultaneous expansion, popularization, and reallocation of its functions in response to emerging social and economic configurations (Santos, 2013; Cabral, 2018).

During this period, despite the establishment of the “International Year of Persons with Disabilities” in 1981, there was a clear emergence of interactionist and biopsychosocial perspectives, even as religious and biomedical viewpoints continued to dominate. In Brazil, the interactionist conception of disability was represented as follows:

Regarding attitudes, the bricolage of integrationist and normalizing perspectives and signs of inclusive actions were notable. Traces of rejection, overprotection, and welfare were still present, and research focused not only on clinical treatments and rehabilitation, but also on changing contexts (Oliveira, 2004, p. 64).

Representing the “last” phase of the Contemporary Age, the 21st century has been a scenario marked by liquid societies, the continuation of terrorist attacks, technologies, the rise of conservatism, and political polarization. In the context of higher education, in-person and online courses at Brazilian Public Higher Education Institutions (IPES) have shown a growing representation of university students with disabilities (INEP, 2000; 2019).

However, even with so many contextual, collective, and subjective shifts, conceptions of disability have been permeated by exclusionary attitudes represented by overprotection, welfare, normalization, clinical rehabilitation, and rejection, in light of religious, biomedical, integrationist, and normalizing perspectives. Nevertheless, the social conception of disability has been strongly defended theoretically and politically today. According to Leite & Lacerda (2018, p. 436), this conception

Disability is interpreted as a distinct organic condition associated with causal factors of a social, emotional, economic, and/or educational nature that influence human constitution. Here, disability stems from factors inherent to the individual and environmental factors, but to interpret it, it is necessary to center the analysis on the individual presenting it.

Given this brief historical overview, from Antiquity to the present day, the scientific literature (Silva et al., 2018) reveals the predominance of three types of conceptions related to disability: (a) Metaphysical Conception⁶: initiated in the medieval period and justified by transcending human responsibility, with a religious bias, it tends to superimpose on the subject with a disability the idea of

⁶Metaphysical conception can also be understood as “any philosophical system aimed at an ontological, theological or suprasensible understanding of reality” (Houaiss & Villar, 2009, p. 1281).

having a demonic soul or divine designs, linking it to beliefs or superstitions⁷ (Pessotti, 1984); (b) Biological Conception: considers a series of impairments in the organism resulting from differentiated genetic patterns, neural lesions, hereditary malformations and/or other occurrences that lead to a differentiated functioning of the subject's physical organism – superimposed on the idea of normal and pathological (Canguilhem, 2009); (c) Social Conception: supported by a historical-cultural perspective, it defends interpreting disability as dynamic, relational and procedural based on the relationship between the individual and the context of its occurrence, which causes differentiated human development, adjustable according to expectations and attitudes directed towards it, ceasing to be an exclusively natural fact (Leite, 2017).

The conceptions of disability are intricately linked to various other characteristics, including race, gender, age, social class, sexual orientation, religion, political beliefs, and numerous other factors that shape distinct social attitudes. It is therefore essential to contemplate the labels ascribed to individuals based on what they lack or how they differ, whether in sensory, motor, cognitive, or behavioral domains. In essence, the experience of disability often takes precedence over other identity traits, leading to the perception that their disability defines them: “failing to consider their gender, sexuality, social class, or cultural affiliation, and regarding them solely as disabled” (Angelucci, 2014, p. 121). This perspective arises from the expectation that individuals with disabilities should resemble those without disabilities, as if it were possible for all humans to be 'equal,' thus deeming differences as grounds for diminishing their value as human and social beings” (Aranha, 2001, p. 17).

In this context, it is important to consider the current configuration of predominantly competitive societies, in which competition and power relations override cooperation and individual and social subjectivity. Therefore, it is necessary to promote debates and critical reviews regarding concepts and actions aimed at people with disabilities in different social, historical, and cultural contexts.

In particular, such discussions must be fostered within Higher Education and its interfaces, as it is an important locus for training future professionals, both with and without disabilities, who will work directly with this population segment, which, in recent years, has entered this landscape, including due to recent affirmative action policies (INEP, 2000; 2019). Thus, difficulties emerge in grasping the current understanding of the phenomenon of disability, specifically in light of the conceptions of university students with this condition and social demarcation.

In this context, this article sought to identify and analyze the current conceptions of disability among students with disabilities enrolled in undergraduate and postgraduate programs at public higher education institutions. In particular, the following sections bring to the debate considerations about how these individuals perceive themselves and the potential impacts of identifying themselves as people with disabilities on their academic trajectories.

⁷Based on Houaiss and Villar (2009), the definition of belief can be related to the conviction that something is right or true based on doctrines, sacred teachings, or things compatible and coherent with rational reflection. Credulity, in turn, is the quality or state of someone who believes in superstitions of popular origin, without a basis in institutionalized religions and, therefore, without their sanction.

METHODOLOGICAL PROCEDURES

Within the scope of two Public Higher Education Institutions (IPES) in the State of São Paulo, one at the state level (IPES_E) and one at the federal level (IPES_F), data were collected through an online form, consisting of two main sections: 1) Participant Characterization⁸; and 2) the Intercultural Scale of Conceptions of Disability (EICD) (whose metric properties are published in Leite et al., 2021).

The first session of the instrument enabled the verification of the participation of 81 university students who self-declared as having a disability. Among these: 13 students (16%) with visual impairment; one with blindness (1%); one with low vision (1%); 11 with physical disability (13%); one with Larsen syndrome (1%); 18 with hearing impairment (22%); four deaf (5%); four with autism spectrum disorder (5%); nine with visual alterations (11%)⁹; two did not inform (2%); two with learning difficulties (3%); 12 with specific functional disorder (15%)¹⁰ and four with mental disorders (5%)¹¹.

Some of the categories mentioned are not classified as disabilities in Brazil, including visual impairments and learning difficulties. On the other hand, although not very common, the classification of mental disorders has been associated with disability, in the interpretation of the Brazilian Inclusion Law, within the spectrum of mental impairment, in the following terms:

A person with a disability is considered to be someone who has a long-term impairment of a physical, mental, intellectual or sensory nature, which, in interaction with one or more barriers, may obstruct their full and effective participation in society on an equal basis with other people (Brazil, 2015, Art. 2).

Therefore, there is difficulty and confusion in naming and classifying different physical, sensory, cognitive and/or behavioral conditions on the part of participants, a fact also observed in other studies (Cabral, 2013; Ciantelli & Leite, 2022; Fossey et al., 2017; Lima, 2013; Moríña, Molina & Cortés-©, 2018; White, Summers, Zhang & Renault, 2014).

In this process of identifying participants, some students with disabilities end up not declaring themselves as part of this population, suggesting that some students are unaware of the need for self-declaration, “perhaps linked to the fact that people are unaware of the criteria that define the condition or even the concept of disability, due to it being a complex and multidetermined phenomenon” (Silva, Martins & Leite, 2018, p. 10). It is worth mentioning that the study portrayed is part of a larger research project that has a favorable opinion from the Ethics Committee (CAAE: 84374018.2.1001.5398).

With an average age of 30 years (range 18-56), a balanced statistical distribution was observed between participants who self-identified as female (50.6%) and male (48.1%), in addition to 1.2% who declared themselves as "other" unspecified. With an average enrollment time of one and a half years, undergraduate (49.4%) and postgraduate (50.6%) students participated in the study.

⁸Sociodemographic questions (year of birth; gender; name of institution and campus); type of course (undergraduate or postgraduate) and name of the course; major area (humanities, biological and exact sciences), year of entry into the institution and year of the course; state and country of origin; self-declaration of whether or not the person has a disability and what their disability is).

⁹Included in this category: Monocular vision, Color blindness, Myopia, and Use of glasses.

¹⁰Included in this category: Dyslexia, Attention Deficit Hyperactivity Disorder (ADHD) and Difficulty concentrating.

¹¹According to the DSM-V (p. 20), “Mental Disorder is a syndrome characterized by clinically significant disturbance in an individual’s cognition, emotion regulation, or behavior that reflects a dysfunction in the psychological, biological, or developmental processes underlying mental functioning [...]”. Included in this category: Anxiety Disorder, Generalized Anxiety, Depression, and Schizophrenia.

The second section of the instrument is represented by the Likert-type EICD, in which for each of the 43 affirmative statements that address the conceptions of disability (17 for the biological conception, 15 for the social conception, and 11 for the metaphysical conception), the participant could indicate, per statement: I strongly disagree (1); I disagree (2); I neither agree nor disagree (3); I agree (4); or I strongly agree (5). To understand the analysis of the present study, consider the following table, which presents the distribution of confidence intervals for agreement and disagreement values in relation to each conception of disability:

Table 1

Ranges of agreement and disagreement values by conception of disability:

Conceptions	Dissagreements	Tendency to disagree	Tendency to agree	Agreement
Biological	17 to 34	35 to 42.4	42.5 to 67	68 to 85
Social	15 to 30	31 to 37.4	37.5 to 59	60 to 75
Metaphysical	11 to 22	23 to 27.4	27.5 to 43	44 to 55

Note. Prepared by the author, based on data collected through the application of the Intercultural Scale of Conceptions of Disability (EICD-*Escala Intercultural de Concepções de Deficiência*).

The quantitative data were tabulated, coded, and transported to the statistical analysis software IBM SPSS version 20. The inferences enabled descriptive analyses based on the literature in the areas of Social and Political Sciences, Psychology, Anthropology, Education, Special Education, and related areas.

RESULTS AND DISCUSSIONS

In the initial analysis, focusing on the characterization of the participants as outlined in the research methodology, three notable distinctions can be observed: a) individuals who identified themselves as people with disabilities according to national normative criteria; b) individuals who went beyond these criteria, reflecting on their disorders, differences, and challenges in perceiving themselves as part of this demographic; and c) individuals who, despite identifying as people with disabilities, opted not to specify their conditions.

The nuances of these situations give rise to several important questions: What influences, criteria, and perceptions shape the self-identification of participants regarding their status as individuals with disabilities? Even in cases where some do not exhibit characteristics of a disability as defined by current national regulations, what factors lead them to identify with this condition? Could socioeconomic factors, social stigmas, and the need for support—regardless of whether they align with traditional definitions of disability—encourage an individual to see themselves as part of this demographic? Additionally, what about those who choose not to disclose their condition, despite needing contextual adjustments, opting instead for anonymity and silence?

This process, which demonstrates different understandings of disability, is based on current concepts of this condition, depending on whether they lean toward the social, metaphysical, or biological conception. This possibility prompted subsequent analysis, culminating in the descriptive identification of the conceptions of the sample of participants, as identified through the application of the EICD:

Table 2

Descriptions of conceptions of disability in the general sample

	Social	<i>Metaphysics</i>	Biological
Mean	46.74*	<i>17.35**</i>	51.65*
Median	45	13	52
Standard Deviation	14.1	9.1	15.2

* In bold, scores that reached a tendency towards agreement.

** In italics, scores that reached disagreement.

The results indicated that participants tended to agree with the biological conception of disability ($\mu=51.65$), followed by those with a significant approximation to the social conception ($\mu=46.74$). However, the high standard deviation ($SD = 14.1$ and $SD = 15.2$) suggests heterogeneity and divergence of opinions on both conceptions, showing that the concept is unstable and subject to different interpretations. Regarding the statements of the metaphysical conception, the sample presented statistically homogeneous disagreement ($\mu=17.35$) ($SD = 9.1$)¹².

These results are similar to the reflections of Bock and Nuernberg (2018), who highlight the importance of the biomedical model or biological conception of disability, especially regarding the development of scientific knowledge. However, the authors suggest that this movement still carries the idea that the body of the individual with a disability becomes susceptible to correction, repair, or cure, suggesting a tendency to seek organically and culturally determined normality to differentiate different social groups, denoting disability as abnormal.

Thus, in this perspective there is an individual bias towards disability, in which the significant difference, deviation or abnormality is measured through statistical criteria, structural/functional parameters, denoting a malfunction, associated with the metric of approximation or distancing from an ideal model of subject: “young, male, white, Christian, heterosexual, physically and mentally perfect, beautiful and productive” (Amaral, 1998, p. 14).

This data is sensitive and worrying, as it may suggest an ableist perspective, including in the educational field: when certain learning difficulty(s) and/or disability diagnosis(es) are identified, there is a tendency towards medicalization and welfare, with a situational focus on only one individual; and when a good performance in learning is presented, there is a tendency to conceive a social representation of a “victor”, a “hero”, and someone who has overcome all barriers, going beyond the limits of their disability.

This panorama is characterized by paradoxes concerning the relationship between self-declaration and the concept of disability, as well as the ongoing dominance of a biological perspective today. Disability, viewed as a processual phenomenon, is shaped by collective understandings influenced by historical, political, economic, social, and cultural transformations. Concurrently, perspectives and

¹²All concepts received maximum scores and, therefore, total agreement with the respective concept. On the other hand, unlike the metaphysical and biological concepts, the social concept received the lowest scores, meaning no student completely disagreed with it.

behaviors towards individuals with disabilities are intertwined with social relations, shaping societal attitudes.

The act of being positioned and recognized in the category of person with disabilities in inconstant contexts of understanding about this condition, involves a complex subjective process, which tends to reveal (mis)information, stigmas and prejudices repressed throughout their respective life stories, culminating in possible attitudes of denial and, at times, anonymity (Marinho & Omote, 2016; Martins, Leite & Ciantelli, 2018).

Identifying predominantly biologizing conceptions among the university population with disabilities, even today, whose international perspective aims at the biopsychosocial perspective, suggests some considerations: (a) the possible misinformation and appropriation of this population regarding their rights; (b) the subjection of bodies to predominantly neoliberal cultures, which incite the ideal of body and normalization; (c) the reinforcement of disabled identities, which supplant other markers such as gender, sexuality, ethnicity, race, and socioeconomic class (Piccolo & Mendes, 2012; Angelucci, 2014; Gavério, 2017; Ciantelli & Leite, 2022; Durantes, Tavares, Portes & Gesser, 2020).

On the other hand, when the data relating to social conception indicate significant statistical significance, it is possible to infer considerable signs that the social model of disability is underway, especially when we consider, anthropologically, the socio-historical and cultural perspective in the process of political-identity construction, reinforced, especially in recent decades, by Disability Studies.

Let us not be naive: even within a liquid society, as Bauman (2005) noted, the pursuit of collective approval may drive individuals to adopt [politically correct] stances, which can directly influence the responses of participants in this study. From this viewpoint, it becomes apparent that agreement with socially accepted statements does not exempt individuals from the tendency to repress stigmatizing, stereotyping, and prejudiced intersections. We are confronted with a troubling ethical dilemma: there is often a lack of coherence between expressive language and underlying thoughts, as behavior and narratives may be shaped by distinct psychological and social processes (Spinoza, 2007; Deleuze & Guattari, 2014).

The concerns arising from the data analysis process are reinforced when some participants agree with statements corresponding to the metaphysical conception of disability. Since the biopsychosocial perspective of disability is currently advocated, when a conception of disability prevails in ancient and medieval times, including in the understanding of students in higher education, it highlights the challenges that arise in the process of disentangling disability from religious, mystical, mythical, and transcendental precepts.

As articulated by Leite (2017, p. 35), this perspective views disability as a “posited phenomenon, which depends little on human action,” suggesting a naturalizing and static interpretation. Furthermore, this understanding diminishes the possibility for transforming society's moral and ethical values, as it relies on a religious framework—primarily of Christian origin—to explain the causes of disability. This reliance hinders the emancipation and legitimization of individuals with disabilities across all social spheres, as they remain subject to the judgment of a higher, transcendent authority.

Among these intersections, students who chose to advocate for a social conception of disability are appreciated, perhaps due to their social commitment to resisting the collective perception of this difference as inferiority (Leite et al., 2021). It is important to emphasize, however, that the problematization raised from a sociological and anthropological perspective does not aim to deny or

diminish the importance of advances in biomedical fields of knowledge, nor the beliefs and cultures that enrich humanity in its diversity.

Overcoming biologizing and metaphysical understandings means, within the discussions presented here, reinforcing the need to understand disability as a synthesis of multiple determinations (personal, social, environmental, cultural) involved in the process of subjectivation and legitimization of rights of the multiple and hybrid identities present in societies and cultures, as well as race, gender, age, social class, sexual orientation, religion (Diniz, 2007; Canclini, 2015; Bock & Nuernberg, 2018).

FINAL CONSIDERATIONS

This text explores the interdisciplinary approach of the Social Sciences, Psychology, Education, and the Exact Sciences within the realm of anthropological studies on disability, highlighting the relational, political, and historical dimensions involved.

By situating the discussion within a historical framework of Higher Education and examining the evolution of disability concepts over the centuries, the text aims to provide a comprehensive sociohistorical and cultural overview of the perspectives held by undergraduate and postgraduate students. It focuses on their responses to three prevalent conceptions of disability in society: the biological, the social, and the metaphysical, drawing upon extensive research.

Understanding that disability evokes diverse understandings, experiences, and moral, ethical, and methodological dilemmas, the research results reveal a lack of knowledge and confusion among these students regarding the concept of disability, often using typifications or nomenclatures that are not classified as disabilities in Brazil.

Furthermore, the numerical findings demonstrated that participants tended to agree more with the biological conception of disability, followed by the social conception, and disagreed with the metaphysical conception of disability.

We expected that the sample studied would agree more with the social conception of disability, believing that occupying the benches of the public university, which seeks to defend critical teaching, concerned with the emancipation of the subject, would imply the deconstruction of a biological model and consider disability as yet another human difference, in which the context would seek to welcome and adjust to physiological, structural, sensory and/or behavioral changes in the recognition of plurality.

This pursuit clashes with the disqualifications of such changes, which ultimately leave individuals with disabilities feeling inept, inefficient, and unproductive, among many other adjectives related to social inferiority.

This observation is supported by a historical exploration of the contextualization of disability from ancient times to the present day. Throughout history, we see a persistent presence of forces challenging dominant social structures and models in their quest to shift perspectives and paradigms. This struggle aims to ensure that individuals classified as disabled are respected, valued, and recognized as citizens with rights and responsibilities. Nevertheless, discriminatory practices remain prevalent today, reflecting lingering remnants of segregation and exclusionary attitudes rooted in mystical, religious, transcendental, medical, normalizing, and pathological ideals within society.

Therefore, we believe that the way society thinks and acts toward people with disabilities influences and guides the actions planned and implemented for them, which highlights the importance

of analyzing the different conceptions of disability to promote changes in these concepts and reduce the stigma, prejudice, and discrimination still suffered by these individuals.

These data confirm the need for various social spaces, and particularly higher education, to provide teaching, research, and outreach opportunities that foster cooperative engagement among academic community stakeholders: faculty, administrative staff, and students, whether with or without disabilities. These activities can demystify misconceptions, as well as foster positive attitudes, empowerment, and the legitimization of the rights of people with disabilities, ensuring they have the necessary conditions for autonomy and belonging throughout their academic and life journeys.

In addition, enhancing awareness and understanding of the topic through courses, training sessions, lectures, forums, discussion groups, campaigns, and intervention groups—guided critically and reflectively by educators and psychologists—can foster a greater sense of social responsibility. This approach can lead to the development of professionals who are more committed, responsible, and attuned to their environment and peers. It can also help reduce accessibility barriers, deconstruct attitudinal obstacles, build support networks, transform attitudes and practices, and promote a greater acceptance of differences, ultimately creating a sense of belonging for these individuals within the university community.

Finally, as researchers and advocates for a more equitable society, it is essential, along these lines, to inform, question, give visibility, and critically reflect on a concrete topic, yet still heavily influenced by a discourse biased by social acceptance, highlighting the perspectives and experiences of people with disabilities who are currently pursuing higher education.

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DECLARATION OF DATA AVAILABILITY

The underlying content of the research text is found in the manuscript.

AUTHORS'S CONTRIBUTIONS

Author 1 - Project coordinator, actively participated in data analysis and review of the final draft.

Author 2 - Data analysis, writing of the text, and final review.

Author 3 - Data analysis, writing of the text, and final review.

CONFLICT OF INTEREST STATEMENT

The authors declare that there is no conflict of interest in this article.