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## RESEARCH ARTICLE

### FAMILY PERCEPTION AND PARTICIPATION IN THE CHOICE AND INCLUSION OF PwD IN WORK FAMILY AND VOCATIONAL CHOICE OF PwD

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#### ABSTRACT

The inclusion of people with disabilities (PwD) in work is encouraged by legislation, with the World Health Organization (WHO) recommending the provision of vocational guidance (VG) and training programs for them. The aim was to investigate the family perception and participation in the process of vocational choice and inclusion of PwD, through interviews and completion of a questionnaire with 19 family members of PwD referred for inclusion in a Vocational Education and Rehabilitation Program of a Specialized Rehabilitation Center. The qualitative data were evaluated through Content Analysis using the NVivo software. We concluded that the family members of the PwD knew the importance of work for the development, however, understood the difficulties that the PwD would encounter and their need for support in the process of vocational choice and inclusion.

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## INTRODUCTION

Vocational Guidance (VG) began in the 20<sup>th</sup> century with the 3<sup>rd</sup> industrial revolution. The aim of vocational guidance, as it was called at the time, was efficiency through the adjustment of the person to the role. In the second half of the 20<sup>th</sup> century, there was a decomposition of the industrial model and a revaluation of creativity, taking vocational guidance in new directions. The focus became the individual's satisfaction and feelings of accomplishment, resulting from an adequate vocational choice, with productivity and efficiency resulting from this choice (Lassance & Sparta, 2003). Since then, vocational guidance has gone through several changes,

including changes in the nomenclature, starting to be called VG and later Vocational and Career Guidance (VCG). Duarte, Teixeira and Ribeiro (2019) wrote about the career paradigms present in the 21<sup>st</sup> century, explaining that the vocational/social question of the 20<sup>th</sup> century was related to how individuals could find suitable activities or professions for which they could qualify. In the second half of the century, the question became how individuals could validate their experiences, aiming for professional advancement and career development. Although PCG has expanded its possibilities of action, the idea of constructing a life and career project is still very new, especially in Brazil, and scientific production and most interventions in the area end up being focused on the process of choosing professions for young people who are graduating

from high school or who are in university. Ambiel, Campos and Campos (2017) carried out a review and analysis of Brazilian scientific production in VG for the period 2011 to 2015. The results highlighted a reduction in the number of annual productions on VG, fewer publications of a theoretical nature and prevalence of studies aimed at high school and higher education students. They also concluded that it is important, for the design of new studies, to select and identify new populations and new themes, such as specific populations at risk. People with disabilities (PwD) can be understood as one of these vulnerable populations, given the history of exclusion in their social participation. According to article 2 of Law No. 13. 146/2015, PwD can be considered “someone that has a long-term physical, mental, intellectual or sensory impairment, which, in interaction with one or more barriers, may obstruct full and effective participation in society on equal terms with other people” (Brasil, 2015, p. 1). The study of Lopes (2006) reported the experience of conducting a VG program for young people with cognitive impairments. The proposal came from the observation that there was a population of young people that wanted to work, however, did not know how or where to seek an occupation. The author developed an intervention divided into meetings that worked on the following subjects: work, choice, skill versus personal interests, and life projects. Through this intervention, it was concluded that there were gains related to social skills, assertiveness and awareness of the choice process.

Yoshida and Ivatiuk (2010) carried out a literature review of publications from 2000 to 2009 on VG with PwD and found 55 references among articles, theses, dissertations, chapters and books. The authors considered this number of productions to be relatively low, making it difficult for professionals in the field to conduct actions and use techniques and to reproduce them in other studies. When searching for the term “disability” in the database of the Brazilian Journal of Vocational Guidance (*Revista Brasileira de Orientação Profissional - RBOP*), in all fields and without restricting the year of publication, a total of four results was found, two empirical studies and two bibliographical reviews. The search for the terms “disability” and “vocational guidance” in the CAPES Journal Portal, for national works, from 2010 to 2019, obtained the same results with the addition of the work carried out by Cabral, Mendes and Anna (2015), which reported on the academic and vocational guidance of students with disabilities in Italian universities. The study by Levenfus (2016), on VG with different populations, presented the internal (abilities, skills, personality and educational background) and external (values, affections, family beliefs and social, cultural, economic and political context) factors that influence the VG process. The author indicated the family environment as the first and most significant context of choices, in which the first experience of knowledge and structuring of the subject’s relationships with themselves and with others occur.

It is extremely important to take into account the family relationship in the various VG processes, since the family is the first nucleus of socialization of the individual and an intermediary agent of culture, interpreting values and behaviors in different social subgroups. Therefore, in VG interventions it is important to reflect on the value that the family places on education, the comprehension of professional success by the parents, the attitudes and values approved and encouraged within the family, and the forms of discipline and control exercised, as well as the pressure that the parents exert

on their children and/or the omission of their opinions, for fear of influencing their vocational choices (Spaccaquerche & Fortim, 2009; Terruggi, Cardoso, & Camargo, 2019). Santos (2005) developed a study to verify the perceptions of adolescents regarding the influence of family and third parties on their vocational choice. The author observed in the adolescents’ statements that no matter what the adolescent plans, it primarily is in the family that they tend to seek legitimacy and support. Gonçalves and Coimbra (2007) described, in their study with Portuguese parents, the influence of the family context on the development and planning of vocational projects for adolescents and young people. The quality of these projects depends on the possibilities that the family context provides, especially in terms of emotional and material support. Almeida and Melo-Silva (2011) conducted a literature review investigating the influence of parents on their children’s career choice process. They described that interventions with parents can contribute to the production of knowledge about the emotional quality of the family bond and generate conditions that facilitate the vocational choice process and the development of the young person.

Vocational Guidance for PwD and other actions aimed at the inclusion of this population in work, must be part of the professional habilitation and rehabilitation process, provided for in Law No. 8213, also known as “Law of Quotas (*Lei de Cotas*)” (Brasil, 1991). Although the law has been mandatory for almost 30 years, the numbers show that the application of affirmative action is still not sufficient. Garcia (2014) wrote about advances in national legislation and the International Convention on the Rights of PwD, which contrast with the low participation of these people in the labor market. The author highlighted some aspects that may be related to this reality, such as: precarious accessibility, persistence of prejudice, family overprotection, passivity in school and in vocational training, inadequacy and insufficiency of legislation, and cultural issues. Lima, Tavares, Brito & Cappelle (2013) studied the meaning of work for PwD and found that work has been shown to be a moment of learning, which provides a feeling of accomplishment, competence and independence, in addition to offering a favorable space to make new relationships. Taking into account the articles cited on the importance of VG for PwD and family participation in the process of choice and inclusion in the labor market, this study sought to analyze and discuss the perception and participation of family members of PwD in these processes, as well as the expansion of VG actions so that both PwD and their family members benefit.

## METHODS

**Participants:** Study participants were 19 family members of PwD, 10 mothers, 3 fathers, 3 grandmothers and 2 sisters. There was a predominance of family members of people with intellectual disabilities (10), followed by those with the diagnosis of autism (6) and cerebral palsy (2); of males (12), aged between 14 and 16 years (15), enrolled in the 2<sup>nd</sup> cycle of elementary education (15) and with more than one year of participation in the rehabilitation program at the institution (11). The respondents had varied education, with 6 indicating they had not completed elementary school, 3 that they had not completed high school, 5 that they had completed high school, and 2 that they had started but not completed higher education. Only 1 family member reported having completed higher

education and another was unable to respond. Regarding family income, most indicated living on less than 2 minimum monthly wages (12) and 6 received the Continuous Benefit (*Benefício de Prestação Continuada - BPC*), with the benefit being the only income for 2 of the families. The professions of the participants were also diverse, although most were linked to an activity considered to be of an operational nature, that is, more strongly marked by manual, repetitive and low-complexity work. The mothers and grandmothers reported being unemployed and/or being responsible for the care of the home and children (10). The rest of the females reported jobs with flexible hours and/or lower workloads, such as manicurists, cleaners, artisans or credit recovery services. The professions performed by men in the families were activities that indicated employment with fixed hours and better remuneration, such as truck driver, doorman, general service assistant, harvest worker/rural worker, newspaper delivery, salesperson, labeling operator and builder.

**Instruments:** For data collection, a socioeconomic questionnaire was used to characterize the population, containing eight closed questions, five to investigate the degree of kinship, gender, age and family income, and three to assess the participation of this family member in the vocational choice process of the PwD. A semi-structured interview was also performed, which sought to identify the perception of family members in the process of inclusion of the PwD in the labor market.

**Procedures:** The study was conducted in a rehabilitation institution of São Paulo state, with family members of PwD referred for evaluation and possible inclusion in the Vocational Education and Rehabilitation Program (PERP). The study was previously authorized by the institution's board and approved by the Research Ethics Committee (Authorization No.). After investigating the screening evaluation schedules for the program, the researcher approached family members that were at the institution and invited them to participate in the study. The family members that agreed to participate received and signed a consent form, which was read and explained by the researcher. Then, the data collection procedure was carried out through the application of the socioeconomic questionnaire and the semi-structured interview.

**Data Analysis:** The answers to the socioeconomic questionnaire were graphically recorded by the researcher, while the interviews were audio-recorded and later transcribed. The transcripts were inserted into the Nvivo software, version 11, for data organization and categorization. Some of the categories were defined in advance by the researcher based on the questions suggested for the interview. The set of categories was validated by three researchers, after choosing categories in a double-blind system, in order to ensure data reliability and consistency. To carry out this work, we selected the six categories with the highest incidence and that were considered most relevant for understanding the participation and perception of the interviewed family member regarding the process of choice and inclusion of the PwD in the labor market.

## RESULTS AND DISCUSSION

The majority of the family members interviewed indicated that they had already talked to their child/grandchild or sibling about issues related to the labor market (14) and about the professions of interest to them (14), although only 4 family

members had encouraged the PwD to seek information about vocational and academic courses. The categories selected for discussion, directly related to the theme, were: 1) possible difficulties in the work environment, 2) encouragement and participation of the family member during the vocational choice process, 3) perception of support, 4) professions, 5) the importance of work for the PwD and 6) the family member's opinion on the inclusion of the PwD in the labor market. Subcategories were created for those categories of which the themes were most explored in the respondents' responses, namely, "1) possible difficulties in the work environment, 2) encouragement and participation of the family member during the vocational choice process, 3) perception of support, and 5) the importance of work for the PwD".

**The role of work for the personal and professional development of the PwD:** The participating family members had a positive view of the function of work for the PwD and mentioned the process of personal development, learning and increased autonomy and self-esteem (Table 1). Studies that sought to investigate and analyze the meaning of work for PwD have shown that, just as the participating families expected, work has a positive role in the development and social inclusion (Pereira-Silva, Furtado, & Andrade, 2018; Lima et al., 2013).

Table 1. Category "Importance of work for the PwD"

Importance of work for the PwD	<ul style="list-style-type: none"> <li>• Learning and Development</li> </ul> <p>"We have to think ahead. Be positive. If have come this far with him already, he's developed a lot, I believe he can develop more" - P2</p> <p>"It's good for her, it's development, it's good for her to learn on a daily basis, professional development, it's in the service that we learn to live, interact with people, so she's not just sitting there. . . You have to interact with everyone, you have to learn to live right." - P6</p>
	<ul style="list-style-type: none"> <li>• Autonomy</li> </ul> <p>"Because I think that, he has to mature and have responsibility. Having autonomy, which he doesn't have much, he's learning now. So this is valuable." - P8</p> <p>"To have more autonomy. Like, being more independent. I think every mother wants that for her child. Independence in everything, because, nowadays he is very dependent for everything, like if he needs to go downtown or something, I have to go with him." - P9</p>
	<ul style="list-style-type: none"> <li>• Improved self-esteem</li> </ul> <p>"I think it's also great for their self-esteem, you know? It increases it, their self-esteem evolves, so I think it's very important for that." - P11</p> <p>"I think it's good for their self-esteem. Like mine, his self-esteem is low. Everything he. . . Any little thing you give him to do, he feels important, even a small, basic thing, for him that day was a big day because he did this thing." - P8</p>

Pereira-Silva, Furtado & Andrade (2018) investigated inclusion at work from the perspective of people with intellectual disabilities and reported that these workers were clear about what occupational activities can provide: autonomy, independence, personal satisfaction, productivity and responsibility. They described that the participants indicated the family as a unit of emotional support and encouragement in the process of inclusion in the labor market. Lima et al. (2013) carried out a study that aimed to analyze the meaning of work for PwD and observed that the participants related it to survival and social inclusion, with work experiences being associated with the capacity and

usefulness to society, corroborating the statements of the participants of the present study.

The positive view of work may be related to greater participation and encouragement by the family in the process of choice and inclusion of the PwD in the labor market, as 77. 7% said they had already talked to their child/grandchild or sibling about matters related to the labor market and professions of interest.

**Perception of support:** The participants described 3 sources of support in the process of VGand inclusion in the labor market, namely: the school, family and rehabilitation institution. This information is presented in Table2.

**Table 2. Category “Perception of Support”**

Perception of Support	<ul style="list-style-type: none"> <li>●School</li> </ul> <p>“Maybe he, with some help, he would be able to have more insight into things. Understand?And now in high school I would like him to choose a technical high school, just to enter with this basis.”- P1</p> <p>“I lost my job, my ex-husband lost his job we had to put them in a public school. I thank God, because that’s when there was a light, it was his teacher who, in the first month, saw the difficulty he had, and she asked me if she could request a referral to here.”- P1</p>
	<ul style="list-style-type: none"> <li>●Family</li> </ul> <p>“I get help from my father. I always talk to him, I talk about them, right?I don’t j just have one child, I have five. I explain what’s going on. My father practically raised the girl, he made sure she didn’t get lost and didn’t do wrong things.”- P6</p> <p>“He has a cousin of his who talks a lot with him, who has now graduated as a physical education teacher. He says “Whatever you want to be, it’s sure that you’ll be successful, because it’s no use wanting to have a profession that you don’t like, to please someone else, you’ll never be successful like that” - P10</p>
	<ul style="list-style-type: none"> <li>●Rehabilitation Institution</li> </ul> <p>“Yes, now here at..., yes. Not before. Before, it was just more conversations with psychologists and my other brothers, but on the outside. Only here is there security and professionalism.”- P4</p> <p>“In the rehabilitation, yes, by the professionals here. Whenever I had any questions or difficulties like that, they always helped me a lot.”- P9</p>

The family is the individual’s primary support unit and is understood, according to the systemic model, as a complex and integrated circuit, its members being interdependent, exerting reciprocal influences among them. In their theoretical-philosophical study,Barbosa, Balieiroand Pettengill (2012) reflected on the perspective of family-centered care and the practice of the health team in caring for children with disabilities and their families, and on the need to care for family members living with a child with a disability, concluding that it is essential to strengthen them to face adversity and for the maintenance and quality of family interactions. Fiamenghi and Messa (2007) discussed articles about the families and the situations that occur when there is a child with a disability among the members. The authors highlighted the existence of several studies that showed the negative aspect of this experience, however, showed some studies on the positive aspects, concluding that families constituted in this way will not necessarily be problematic, especially if they have extensive family, economic and social support. The diagnosis of a child with a disability can be

marked by different feelings, which the family, each in their role, learns to deal with and face. Williams and Murray (2015) carried out a study that explored how mothers that care for a child with a disability negotiate the social exclusion they experience. It clearly demonstrated that mothers were not ignorant of the challenges they faced and that the gap between the real and the ideal was not necessarily articulated in a negative way. The report by Singh (2019) described how the diagnosis of a child with a disability can impact the construction of the identity and the development of the skillsets needed to navigate the structures associated with disability. The study highlighted that providing support for a child with a disability is a task that requires the adaptation of various aspects, such as work, career and life plans, due to society’s lack of flexibility in helping this family, including work demands and lack of specialized care in nurseries and schools. For Brignol et al. (2017), family members and healthcare providers make up the support network of PwD. Based on the functions of the significant social network, proposed by Sluzki (1997), the authors studied the types of support perceived by PwD and observed:social company/social support, emotional support, cognitive guidance, material and service help and access to new contacts. The support network, in which the quality of relationships affects the health of the people and family members, in the view of Sluzki (1997), influences the perception of the care and disability of the PwD (Brignol et al. , 2017).

Accordingly, the services of diagnosis, reception and psychosocial care for PwD, such as the institution where the present study was carried out, are an important part of the support network and play a fundamental role in the strengthening and inclusion of PwD. School support in the vocational choice is important, considering the indication of public policies and studies in the area of the need for the school to approach the experiences and projects of students. Levenfus (2016) reported that social changes have provided the possibility of the school to align itself with the life projects of its students, seeking to improve them. The study emphasized that professional fulfillment, through the execution of a work activity that was linked to personal interests, was a privilege of a few, however, today, with the advent of affirmative action and a change in thinking regarding the role of work, professionals present in the school can provide information regarding inclusion in an academic environment and various professions, expanding the options for choice. Cabral, Mendes and Anna (2015) described good practice indicators for academic and vocational guidance of university students with disabilities in Italy and highlighted academic career planning and development, considering: the student’s life project; specialized tutoring services; counseling; promotion of the student’s relationship with the world of work, with the promotion of activities that allow the acquisition of specific skills; consultation of vacancies based on the profile of each student; consultancy for companies that show interest in hiring; encouragement of the relationship between universities and employment centers, aiming to establish strategies for the inclusion of PwD in the labor market; promotion of awareness activities in companies; entrepreneurship programs for young people with disabilities, and updating of the databases. Passerino and Pereira (2014) reported that the educational vision of vocational education should be broader than job training, and should not be thought of only from the perspective of workers with disabilities, but also from that of the employers that hire them, assuming that society must be

educated for inclusion. This implies a process in the opposite direction to what has happened so far, where what was observed was the construction and crystallization of prejudices and stigmas victimizing the PwD population throughout history. It is, therefore, a process of cultural change that simultaneously empowers PwD and reduces the intensity of prejudice and stigmas about disability in society (Camargo, Goulart Jr., & Leite, 2017).

**Difficulties and strategies for vocational guidance for PwD:**

The family members described some difficulties in relation to the vocational choice process, such as uncertainty regarding the comprehension of information provided, lack of interest of the PwD in issues related to professionalization and difficulty in dealing with the feelings of the PwD in relation to the choice process, such as demotivation and anxiety in relation to the barriers encountered in the vocational inclusion process. Barbosa, Balieiro & Pettengill (2012), in a theoretical reflection on the process of collaboration between parents and healthcare providers in the care of PwD, reported that the family does not receive guidance to train themselves in the care, nor is it encouraged to participate in the care and decision-making, a fact that favors the emergence of doubts, anxieties and difficulties in the care provided. Therefore, the institution must offer support to the family being monitored, seeking to strengthen it, so that it can be active and participative in the process of vocational choice and inclusion of the PwD. The participants also mentioned strategies to deal with these difficulties, including encouragement to achieve their goals and guidance on the necessary steps to do so, such as studying, reading books, training in communication, and improving writing; with the help of studies on websites and on video platforms, which enable the visualization of the function and skills necessary (Table 3).

**Table 3. Category “Encouragement and participation of the family member during the vocational choice process”**

Encouragement and participation of the family member during the vocational choice process	<p>•Difficulties                  “Because I don’t know if he understands what I’m talking about, right?Because he agrees, so. . . I never know. So I do have this difficulty.”- P2                  “I think he’s in one of those moments that we need help. I don’t know how to manage this, I show him all different options, but I don’t see any interest in anything. So I don’t know if it’s because of the diagnosis, or not. I get a bit lost.”- P7                  “My biggest fear is this, because he is very. . . How can I explain?Sometimes you want to get his attention to help, it ends up being worse, because he says ‘ah, so I’m not going to be able to do anything, what am I going to do with my life then?’. There are times when I prefer to be quiet and let things go on.”- P10</p>
	<p>•Strategy                  “At first I encourage him not to forget his dream, but I also encourage him to prepare for other possible plans. For example, when reading a book, he trains to speak better, write better, but he still has a little more difficulty with that.”- P4                  “I’ve already searched a lot on Google. She doesn’t look for it, she asks me ‘mother, I wanted to be a veterinarian’, then I go, as I said, I explained everything to her, she says ‘oh poor thing, mother, I don’t want to cut the animal’, then being a veterinarian is not right for you, if she can’t see blood then she can’t see blood.”- P11</p>

The strategies described by the interviewed family members must be practices that the VG for PwD contemplates. The methods and techniques used in the VG must be adapted to the target public and the strategies described should provide guidance on possible adaptations for the public with disabilities.

**Professions:** Regarding the profession, there is a possible relationship between the diagnosis and the perception of viable professions, according to the family members, with autistic people without cognitive deficits, linked to administrative and technological areas, and intellectually disabled people to cash front activities in supermarkets and crafts (Table 4).

**Table 4. Category “Professions”**

Professions	<p>“So, he likes music and instruments a lot, he loves it, he’s finds it very easy to learn, like how he does the drums as it’s very repetitive. I think he might be able to develop that a lot.”- P2                  “I even thought, she likes typing a lot. She likes to pick up a keyboard and type. I used to think it might even be an office thing.”- P3                  “I don’t know exactly what he wants from professions, other than that he dreams of being a football player, but I think he could do whatever he wanted. If the doctors say that it is possible for him to carry out that type of activity, I believe he is capable.”- P4</p>
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Camargo and Feijó (2017) organized an e-book with guidelines relevant to the inclusion of PwD in the labor market, aimed at the hiring companies. They highlighted the importance of the limitations and differences being taken into account, including in the recruitment and selection process, seeking to overcome prejudices and stigmas linked to disability. During the investigation of professions, the parents considered the influence of the functionality on a profession, and took into account the abilities and interests of their children, which can be an element of an adequate vocational choice. Other participants demonstrated that they overvalued some skills, equating knowledge and interest in mobile phone games with the possibility of working in the area of technology, such as in the interview extract below:

I think it’s that kind of service there, of technology, because if it’s another service where it gets heavier, he won’t. . . I don’t think he would do it, because it seems he doesn’t have the stamina, you know? [. . .] On the computer it would be better, because then it is a service that he understands [. . .] in online games, he does all that. -P18

**Barriers in the work environment:** When asked “Do you believe your child may have difficulties at work? Which ones?”, the items indicated were: adaptation of the environment and function, learning, behavior, dependence in the activities of daily living (ADL), physical limitations, prejudice, socialization and vulnerability (Table 5). The items adaptation of the environment/function, physical limitations and dependence in the ADL can be understood as environmental barriers, which can be overcome more easily, considering the technological advances in products and services. Learning, behavior, prejudice, socialization and vulnerability are attitudinal barriers that can be overcome through social support, public policies and inclusive practices. Based on Camargo & Feijó (2017), people with intellectual disabilities are hired less when compared to people with other disabilities, and this shows that attitudinal barriers are more difficult to overcome than architectural barriers.

**Belief in the potential for work:** The family members presented optimism, however, not always realism, regarding what the PwD could accomplish at that time and, therefore, about the skills developed and the functionality presented. In the category “Opinion of the family member regarding the inclusion of the person with a disability in the labor market”, the following responses were highlighted:

“I think it’s excellent. Because everyone has the right to have a profession, to have an income.”- P7

“What do I think? 100% right. Because I think it’s an opportunity that everyone has to have. Now, just because the person is disabled, they can’t be helpful with something, so I think they should have this.”- P10

“She can, from my point of view, do whatever she wants to do, she has no limitations. If she wants to be a doctor, she can be a doctor. I say doctor because it is a more difficult course, but she can be whatever she wants.”- P12

**Table 5. Category “Possible difficulties in the work environment”**

Possible difficulties in the work environment	<p>●Adaptation of the environment and function “I think it would have to be like a place where he can always do the same thing something repetitive.”- P2 “Without noise, because he can’t stand noise, it bothers him.”- P8</p>
	<p>●Learning “I think that in the beginning it would have to be simple things, and since he has difficulty when we ask for several things at the same time, it would have to be one thing at a time, you know? Asking him.”- P1 “Does she learn? She learns, but a week from now she has forgotten. So it’s something like that it doesn’t stick in her memory, it enters, she listens, but doesn’t process. That’s her problem, listening and not processing.”- P11</p>
	<p>●Behavior “Aggressive, angry, very angry... Impatient, does not observe. Inattentive. There are times when he’s affectionate, there are times when you can’t even get close to him.”- P5 “There are times he repeats things there are times he cries and walks away, there are times he gets angry.”- P10 “She doesn’t know how to deal with situations, that’s the problem, her dealing with the situation.”- P11</p>
	<p>●Dependence in the ADL “So she needs me to change her clothes, she needs me to brush her hair, you know? For everything, anything. Even to get up, she doesn’t get up on her own.”- P3</p>
	<p>●Physical limitations “I have no idea, because all the people with special needs I see out there working, even if they are wheelchair users, they have hand movements. A very fluent movement of the hand, it flows well, they pick up things, and she doesn’t have this, she can’t do that.”- P3</p>
	<p>●Prejudice “They say there is discrimination, prejudice in these parts. There are a lot of people who are prejudiced, because I’ve seen and heard people talking several times. Even once, some children were prejudiced against my daughter, I shouted at them.”- P11</p>
	<p>●Socialization “I think that in the job market everyone has difficulty, but I think he has a little more in relationships with other people, with third parties, but that doesn’t mean it’s impossible.”- P4 “She has a lot of difficulty communicating. If she has a problem and she doesn’t know how to deal with it, she gets stuck, she can’t manage, she won’t go. She’s afraid to ask, she’s terribly embarrassed to ask, to say “look, I don’t know this thing”, she doesn’t have that enthusiasm, she doesn’t have that... How can I explain? She doesn’t know how to deal with a problem, she can’t manage.”- P11</p>
	<p>●Vulnerability “Because she’s a child, she’s a little girl with a young woman’s body, but a child’s mentality. People aren’t going to look at her mentality, they’re going to look at her body, that’s the problem. Her body’s very developed, soon she’ll be taller than me.”- P11</p>

The International Classification of Functioning, Disability and Health (ICF) was originally published in 2001 and is an international classification publications developed by the World Health Organization (WHO). It is a complementary classification instrument to the International Classification of Diseases (ICD) with information on functionality and disability associated with health conditions. The form of classification using the ICF helps in the process of comprehending disability as a condition resulting from the person’s interaction with the environment, overcoming the biomedical paradigm. This interaction with the environment takes into account the concept of barriers, which limit functionality and cause disability, and facilitators, which improve functionality and reduce the disability of the PwD. Camargo and Feijó (2017) highlighted that the biopsychosocial model adopted by the ICF can signify and facilitate a change in public policies of health, inclusion and legislation that often still focus on the individual and their limitations. Access to higher education can be a time for the PwD to interact with different types of barriers, present in the physical and social environments and in the attitudes of the population. Martins, Leite and Lacerda (2015) indicated that there has been a rise in the number of PwD enrollments in Brazilian higher education, however, that they still represent a minimum tier of the population with disabilities in this stage of schooling. Schools have been preparing professionals that accompany the development and participation of PwD, however, there is a lot to be done in Universities so that there is more equity in the inclusion of PwD in university.

Leonel, Leonardo and Garcia (2015) relate the low number of students entering higher education as a reflection of a basic and secondary education that does not meet the needs of the PwD and postulate that the existence of public policies that guarantee access to higher education institutions, does not guarantee permanence and adequate academic training. In addition to the barriers found in the professionalization process, Camargo, Goulart Jr. and Leite (2017) discussed the inclusion of PwD in work, highlighting the obstacles and challenges present in the Brazilian reality, such as prejudice, the unpreparedness of organizations and their managers, and architectural and attitudinal barriers. They stressed that the inclusion practices must go beyond the opportunity of access, aiming at permanence and due support for the PwD, as well as professional development and, perhaps, advancement to leadership and management positions, a fact that is likely to be considered rare in the Brazilian context. Redig and Glat (2017) reported the characteristics of an inclusive school environment, in which there is no obligation for students of the same age group to carry out exactly the same activities, since individual needs must be considered. The authors indicated the importance of adopting this logic for the labor market, which is in line with the concept of work customization, according to which there must be an effort to promote the inclusion of PwD, with all the necessary adaptations. The participants in the study

presented here reported the desire for the family member with a disability to work, in contrast to that found by Garcia (2014), who described family overprotection as one of the aspects linked to the low participation of PwD in the labor market.

**Final Considerations:** The study demonstrates that family members of PwD often need support for their guidance, development and referral to the labor market, which tends to be more critical in families with people with intellectual disabilities, with Autism or Cerebral Palsy. Financial and material issues are an important focus of guidance for those that do not have a lot of resources to access assistive technology and quality transport. In these cases, the referral for inclusion in the social register and receipt of BCP during periods of unemployment is important. It should be noted that in this study, even with limited family income, and the BPC value being low, families showed interest in including the PwD in the labor market, due to the possibilities for development, independence, autonomy and socialization. The rehabilitation institution has a fundamental role in guiding the PwD and their family members and, for this guidance and possibilities for constructing more autonomous paths to materialize, it needs to work with the concepts of functionality and not only with the diagnoses by type and degree of deficiency. Dialogue with PwD and family members should include lists of functionality (what the PwD already does, what they can do, and what might be difficult for them) to avoid underestimating the PwD. Family overprotection should also be discouraged when observed. Families are seen in the literature as overprotective or dependent on the BPC, however, in this work they demonstrated that they presented development-seeking behaviors for the PwD and sought the preparation program for the labor market. The study also highlights an ongoing transformation, since in addition to increased PwD hiring, the professionals working in PwD education and rehabilitation, as well as the families, have already realized the importance of inclusion in the labor market.

How this can be operationalized is still seen as a challenge and there are few works and studies on this theme. Therefore, PwD, family members, rehabilitation and inclusion professionals and recruiters need more structured information. The assessments of the PwD and their life projects need to be personalized, as they usually receive common or general diagnoses, without highlighting their differences, features, family support, aspects of resilience, and other relevant information. Both aspects of vulnerability and aspects of family adaptation need to be mapped, with qualitative studies being important to support actions that, in part, will be planned for conducting the services, and, in part, will be constructed with the subject and with the family, in connection with employers or specific people (recruiters and selectors, people managers, immediate leaders, industry colleagues, etc.) that will support these people in the labor market. Despite the difficulties raised, PwD are being included more in the regular schooling and in the labor market and this may have changed the perception of the PwD themselves and their families. The researchers worked with the hypothesis that fear of family members would figure as an impediment to inclusion in the labor market, however, this was not central to the responses of the participants. Vocational Guidance, previously inaccessible to PwD, already occurs in isolation, however, can be considered a relevant practice within the process of rehabilitation, inclusion and preparation for work. The program in which the study was carried out has sought to act

according to the paradigm of inclusion and, therefore, with principles aligned with PCG. However, for the construction of life and vocational projects with PwD, their individualities need to be considered. Guidance actions regarding employers' expectations and on the culture of organizations may also be necessary, especially for those with intellectual disabilities, which does not mean going back to the view of adaptation of the worker for the job or the organization. Training in a particular profession, for example, can facilitate the first job and open space for the career development of the PwD. These are initial adaptations, which for some people can boost future protagonism, therefore, critical thinking and the possibility of a wide choice. For the construction of life projects supported by the desires and potential of the PwD it is necessary to overcome social, attitudinal, economic, and political barriers, among others. The possibility of giving a voice to a population that has, for a long time, been silenced by social exclusion, however, which can also choose and change the work environment, depends on transformations that transcend the spaces of VG but can be initiated in these practices.

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