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Repercussion of inclusive public policies according to disabled people

Repercussão de políticas públicas inclusivas segundo análise das pessoas com deficiência Repercusión de políticas públicas inclusivas según el análisis de personas con discapacidad

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ABSTRACT

Objective: The repercussion of inclusive public policies was analyzed from the perspective of people with hearing, visual and physical impairments. **Methods:** Descriptive and quantitative study, based on the Hybrid Model of concept analysis. Disabled people were interviewed, using a structured questionnaire. Data were organized in tables and Crosstab and Chi-Square tests were carried out. **Results:** The disabled people indicated policies that contributed towards inclusion, with partial agreement among the three types of disability. Free transportation was relevant for the hearing impaired (65.0%) and the Integration Law for Disabled People for the visually (82.5%) and physically impaired (62.5%). Among the intended and not implemented policies, the non-execution of the laws (hearing 67.5% and motor 45.0%); Accessibility Law (visual 80.0% and motor 45.0%) and attitudinal changes (visual 80.0%) were indicated. **Conclusion:** The creation and implementation of policies is relevant, to guarantee the rights of these clients.

Keywords: Public Policies; Disabled Persons; Nursing; Human Rights.

RESUMO

Objetivo: Analisou-se repercussão de políticas públicas inclusivas na óptica das pessoas com deficiência auditiva, visual e física. Métodos: Estudo descritivo, quantitativo, apoiado no Modelo Híbrido de análise de conceito. Entrevista com deficientes apoiada em questionário estruturado. Dados organizados em tabelas, realizados testes Crosstab e Chi-Square Tests. Resultados: Os deficientes apontaram políticas que contribuíram para inclusão, havendo concordância parcial entre os três tipos de deficiência. Foram relevantes para os auditivos o passe livre (65,0%) e, a Lei de Integração da Pessoa com Deficiência para os visuais (82,5%) e motores (62,5%). Das políticas previstas e não implementadas foram apontadas a não efetivação das leis (auditiva, 67,5% e motora 45,0%); Lei de acessibilidade (visual (80,0% e motora 45,0%) e mudanças atitudinais (visual 80,%). Conclusão: É pertinente a criação e implementação de políticas a fim de garantir o direito dessa clientela.

Palavras-chave: Políticas Públicas; Pessoas com Deficiência; Enfermagem; Direitos Humanos.

RESUMEN

Objetivo: Analizar la repercusión de políticas públicas inclusivas bajo la perspectiva de las personas con deficiencia auditiva, visual y física. Métodos: Estudio descriptivo, cuantitativo, apoyado en el Modelo Híbrido de análisis de concepto. Entrevista con deficientes apoyada en cuestionario estructurado. Datos organizados en tablas, pruebas Crosstab y Chi-Square Tests. Resultados: Los deficientes indicaron políticas que contribuyeron para la inclusión, con concordancia parcial entre los tres tipos de deficiencia. Para 65,0% de los auditivos, fue relevante el billete libre. La Ley de Integración de la Persona con Deficiencia fue la medida más importante para aquellos con deficiencia visual (82,5%) y motora (62,5%). De las políticas previstas y no implementadas, fueron indicadas la no efectuación de las leyes (auditiva: 67,5%; y motora: 45,0%); Ley de Accesibilidad (visual: 80,0%; y motora: 45,0%) y cambios actitudinales (visual: 80%). Conclusión: Se necesita la creación e implementación de políticas para garantizar el derecho de esa clientela.

Palabras clave: Políticas Públicas; Personas con Discapacidad; Enfermería; Derechos Humanos.

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INTRODUCTION

The World Report on People with disabilities (PwD) reports that 15% of the population has some type of disability¹. Currently, the word disability presents greater visibility in society, the fruit of long fights for public policies that ensure the rights of PwD. It can be mention, among these, the conditions to understand the basic needs, such as employment, leisure, health, education, transport, accessibility, and housing. However, in General, the PwD are excluded and, sometimes, considered incapable. Such an attitude is prejudiced, because all have their civil rights, political, economic and social, as guaranteed by the Constitution².

The society's acceptance and inclusion of people with disabilities is influenced by the prospect, as this is understood³. This understanding is one of the factors that interfere in the public laws and policies established for this social group⁴. Inclusion of disabled person requires support from the public and private institutions, on the differences and providing inclusive care⁵.

To ensure rights and inclusion in society, people with disabilities claim policies that guarantee them access and equality. In Brazil, the first speeches related to rights of PwD occurred in the 1960; being then claimed the right to social coexistence. Given that progress was made in the process of politicization of social subjects, contributing for the State to take responsibility in developing public policies designed to meet the demands of this social group³.

Although Brazil has been one of the most inclusive countries of the Americas for coordinating administrative, legislative, judicial measures and public policies, the social movement of the PwD demand practical actions of implementation of such policies in order to achieve all of this segment, since advances are not possible without the committed and militant action of organized civil society⁶. Urges the effective implementation of actions for inclusion in the various spheres. Still, these sectors, must act together with the community and families in order to strengthen the efforts of society to improve the conditions for the inclusion of PwD.

These practices should not be the role of inclusion only in theory, but in attitudes, and know the impact these movements have for those people with disabilities is, effectively, identify the effectiveness and the reality of such facts as these people who exercise the right that they are offered.

In this scenario, are the questioning: how the PwD realize inclusive public policies, which they regard as more effective? In this context, the present study sought to examine the impact of inclusive public policies from the standpoint of hearing, visual and physical PwD.

METHOD

Descriptive and quantitative study was supported by the Hybrid Model of Concept Analysis, which is composed of the theoretical, field and analytical stages. In the theoretical stage selects the concept, literature and a working definition.

In the field, it negotiates entry, select and data collection. In the analytical phase, the results are written. In this study it was used the last two, the field and analysis phases, continuing the previous study⁷, which included the first phase, when inclusive public policies were identified and the impact thereof on the concept developed for PwD.

The field phase occurred from March to August 2012, initiated with visits to four major associations of PwD in the State of Ceará to invite them to participate in the study, according to inclusion criteria: be at least 18 years old, presenting visual and hearing or motor impairment. Established were randomly number of 40 subjects with each type of disability, totaling 120 subjects. There was no exclusion criteria. The data collection instrument, structured questionnaire, was constructed from study on the subject⁷ contemplating demographic profile and public policies that contributed to the inclusion of PwD.

For the visually impaired, interview was conducted, in which the researcher filed the instrument, the deaf answered with the help of a sign language interpreter and people with physical disabilities responded in their own handwriting. Some people with disabilities responded via electronic mail. The duration of the instrument was, approximately, thirty minutes. The use of different strategies came about in order to respect the peculiarities of each disability access, facilitating the acquisition of information. Analysis with the Crosstab tests and Chi-Square Tests to verify the level of statistical significance of associations. It also discussed the results with the literature pertinent to the subject.

Study authorized by the ethics on Research Committee of the Federal University of Ceará (UFC) under number 297/10, being respected the ethical-legal aspects, in accordance with resolution 196/96 of the National Health Council (NHC).

RESULTS

Among the study subjects, the majority was male, except for the hearing (47.5%). The age group most representative of 18 to 29 years (67.5% and 40%), except for the motor of 30 to 49 (60%). The study time of 2 to 16 years, the majority of singles, with household income of 1 to 7.2 minimum wages (Table 1).

Table 2 lists inclusive public policy and the perception of auditory, visual and motor PwD on effectiveness.

The PwD mentioned aspects of public policies that have not been implemented in full, as is evident in table 3.

DISCUSSION

They were grouped under the name of public policy laws, decrees, regulatory government agencies documents and inspection of public and private actions, events that generated documents or recommendations that address issues inherent in the PwD. The analysis pertaining to public policies that contributed to the inclusion of PwD you can see that there is a significant difference of values expressed among people on most of the policies identified.

Table 1. Socio demographic Profile of people with hearing, visual and motor skills. Fortaleza, 2013

	Deficiencies							
Variables	Hearing		Visual		Motor			
	Nº	%	Nº	%	Nο	%		
Gender								
Female	21	52.5	15	37.5	16	40		
Male	19	47.5	25	62.5	24	60		
Age Group								
18-29	27	67.5	16	40	12	30		
30-49	11	27.5	15	37.5	24	60		
50-79	2	5	9	22.5	4	10		
Years of schooling								
2-12	30	75	27	67.5	35	70		
13-16	-	-	4	10	-	-		
Without record	10	25	9	22.5	5	12.5		
Family income								
Up to 1.0	18	45	17	42.5	10	25		
1.1-2.0	6	15	6	15	11	27.5		
2.1-7.2	5	12.5	17	42.5	13	32.5		
Without record	11	27.5	-	-	6	15		
Marital status								
Married/stable union	13	32.5	10	25	22	55		
Single	27	67.5	30	75	18	45		

The responses of the three groups for two of these events: Free pass on Interstate public transport (p 0.569) and the Convention of Persons with Disabilities (0.130). Free pass in interstate collective action was more agreement between hearing PwD percentage (65%), visual (65%) and motor (55%) and one can infer that this law is mentioned and recognized as important for the financial benefit immediately providing the subjects covered by it, as this right in several municipalities and between cities that are already consolidated.

This result differs from that of research conducted in Brazil in which reports transport as one of the greatest obstacles to access healthcare. In addition, those reported by Australian and Japanese researchers about the difficulties of transportation to the eye health services for people in rural areas in Timor-Leste⁸.

With regard to mobility, ensure treatment Away from Home - PDT, benefit ensured by assistance to patients seen by the public or insured/employed by the Unified Health System - SUS the healthcare services of another county or state, since exhausted all health treatment modalities in the locality where the patient resides.

The second action with statistical significance (*p* 0.130), the Convention of persons with disabilities, with the effective participation of these people and generated a protocol of intentions widely debated. This postulate was the first international

legal instrument to guarantee, expressly, the defense of the rights and the protection of PwD. One of the guidelines include: respect for difference, acceptance of these people as part of human diversity, accessibility, promotion of qualifications and levels of employability, equal opportunities, full and effective participation and inclusion in society.

A second look large on the consolidated results in Table 2 shows that the group of visual PwD showed better percentage in positive responses, ranging from 82.5% to 57%; unlike hearing PwD where the highest percentages were negative, going 77.5% to 35.5%. The PwD considered inclusion Act motor as the more affirmative (62.5%) and the Convention of persons with disabilities as least representative (72.5%).

Although several countries are committed to asserting the rights of PwD laid down by this Convention, remain controversies and gaps regarding the demands of the PwD. An example of this fact is in the account of public policy research aimed at this segment where the authors cite that in the United States prioritize actions to end segregation. In the European Union, the actions focused on autonomy and in Brazil, the implementation of actions to ensure the participation of these people in the labor market⁹.

These two General aspects, agreement and divergence of perceptions about public policies between the study groups, alert to the need to respect and recognize different demands

Table 2. Public policies that contributed to the second inclusion people with hearing, visual and motor skills. Fortaleza, 2013

	Disability							
Public Policies	Hearing		Visual		Motor			
	Nº	%	Nº	%	Nº	%	р	
National Center for special education							< 0,0001	
Yes	12	30.0	28	70.0	13	32.5		
No	28	70.0	12	30.0	27	67.5		
Integration and Special Education Committee							0.030	
Yes	13	32.5	24	60.0	15	37.5		
No	27	67.5	16	40.0	25	62.5		
National policy for integration							0.011	
Yes	17	42.5	30	75.0	21	52.5		
No	23	57.5	10	25.0	19	47.5		
Free pass on public interstates							0.569	
Yes	26	65.0	26	65.0	22	55.0		
No	14	35.5	14	35.5	18	45.0		
Law on integration of people with disabilities							0.001	
Yes	17	42.5	33	82.5	25	62.5		
No	23	57.5	7	17.5	15	37.5		
Accessibility or reduced mobility							0.011	
Yes	17	42.5	30	75.0	21	52.5		
No	23	57.5	10	25.0	19	47.5		
Inter-American Convention on the Elimination of discrimination							< 0,0001	
Yes	11	27.5	30	75.0	17	42.5		
No	29	72.5	10	25.0	23	57.5		
II National Conference on the rights of the PwD							< 0,0001	
Yes	9	22.5	25	62.5	11	27.5		
No	31	77.5	15	37.5	29	72.5		
PwD conventions							0.130	
Yes	19	47.5	23	57.5	14	35.5		
No	21	52.5	17	42.5	26	65.0		
Other							0.002	
Yes	12	30.0	2	5.0	3	7.5		
No	28	70.0	38	95.0	37	92.5		

and experiences amongst the groups in question. Among the policies created to include the PwD in society, most, according to the perception of these people, contributed to the improvement of the living conditions of the same, approaching the equality advocated by the Constitution.

In relation to the creation of the National Center for special education, in 1982, note that the PwD visual were the ones considered that this action contributed to the inclusion of PwD,

as well as the Committee for integration and special education and the establishment of the Coordination for the integration of the person with disabilities (CORDE). Therefore, until the mid-80, the initiatives of the State with the PwD were sporadic, incomplete and often disjointed, disconnected from large and comprehensive public policies. CORDE received the assignment of responsibility for managing policies for the inclusion of PwD in all spheres that make up society¹⁰.

Table 3. Planned Needs and not implemented in public policies for the inclusion of people with hearing, visual and motor skills. Fortaleza, 2013

	Disability						
Requirements provided for	Hearing		Visual		Motor		
	Nº	%	Nº	%	Nο	%	р
Recognition of citizenship							0.004
Yes	12	30.0	24	60.0	11	27.5	
No	28	70.0	16	40.0	29	72.5	
Education and health							0.013
Yes	17	42.5	25	62.5	12	30.0	
No	23	57.5	15	37.5	28	70.0	
Non implementation of laws							0.120
Yes	27	67.5	21	52.5	18	45.0	
No	13	32.5	19	7.5	22	55.0	
(Non) Compliance with inclusion policies							0.186
Yes	8	20.0	14	35.5	15	37.5	
No	32	80.0	26	65.0	25	62.5	
Continuity of exclusion in society							0.321
Yes	8	20.0	13	32.5	8	20.0	
No	32	80.0	27	67.5	32	80.0	
Lack of trust in public services							0.163
Yes	13	32.5	18	45.0	10	25.0	
No	27	67.5	22	55.0	30	75.0	
Accessibility laws							0.004
Yes	21	52.5	32	80.0	18	45.0	
No	19	47.5	8	20.0	22	55.0	
Attitudinal changes in society							< 0,0001
Yes	15	37.5	32	80.0	15	37.5	
No	25	62.5	8	20.0	25	62.5	
Other							0.139
Yes	3	7.5	0	.0	4	10.0	
No	37	92.5	40	100.0	36	90.0	

The National Center for special education and the Committee for integration and special education are directed to the right to an education with equity, that is, where everyone can study together, with equality, but respecting the differences. Yes, inclusive education is a political action, social and pedagogical, cultural, recognizing the right of all students being together, learning and participating, without discrimination of any kind; this represents an educational paradigm that espouses equality and difference as inseparable values¹¹.

So that society develops, the education of PwD should be prioritized. The system of educational inclusion of these people involves the experience of dealing with frustrations, dismal, self-esteem and socialization. The educator in this case, it is recommended that they are a professional who can respect

differences. This makes the PwD member of society free of prejudice, discrimination and obstacles, preparing them for the labor market and the integration into the social environment¹².

The visual PwD, facilitated by verbal communication, appropriated this policy directed to education as a right to be part of the educational system with the seer people, encouraging professionals in this sector to develop strategies to consolidate this integration, facilitated with accompanying teacher traveling, education specialist for the blind establishing the bridge with regular education. Although this scenario is being modified, there are still atitudinal barrier by the regular class teachers to accept the blind student, whether by ignorance of how to act in front of this clientel or prejudice, generating the exclusion, which is perceived by the learner.

Deaf people use sign language a language itself that associates signs, gestures and bodily expressions. In the absence of bilingual teacher, must be accompanied by a translator, resource not always available in mainstream schools; usually deaf students attending special schools in primary and secondary education, which leads to segregation by strict coexistence to their peers with consequent social exclusion. This situation hinders or prevents access to higher education since the universities do not provide translators and public funding are rare for this demand.

This result corroborates that of study in Parana¹³, aiming to check the implementation of inclusive education projects in primary education, in public and private schools. It detected that the schools investigated do not have adequate infrastructure to develop inclusive projects, professionals mostly, were without knowledge and preparation for dealing with the diversity within the classroom that would result in a few conditions for inclusive quality education, compromising the rights of students with disabilities to learning, development and effective participation in society.

The PwD, accessibility barriers are likely to architectural solution with physical interventions in the environment, and thus, the insertion in education policies are not considered relevant to them.

Still, the law advocates the inclusion of PwD, the promotion of accessibility or reduced mobility, the implementation of the Inter-American Convention on the Elimination of all forms of discrimination, and especially the II Conference on the rights of persons with disabilities, all of these, when you perform a comparison of the responses provided by the subject that feature one of three deficiencies, showed statistical difference, standing out the answers of the PwD, of which 62.5% considered that the latter contributed to the inclusion of PwD, while those with hearing disabilities (22.5%) and physical (27.5%) there were few positive responses.

In recent years, the discussion around the topic accessibility and reduced mobility became a constant in political agenda as a result of social protests in support of the cause. Since then Governments began to devote attention to promote public policies that enable the inclusion and integration of this portion of the population. The creation of the accessibility or reduced mobility policy, among other laws and programs, aims to direct governmental actions around this issue¹⁴.

Still, in the questionnaire, was placed as the alternative option "other" referring to a policy that had not been mentioned, however, that the study subjects thought that contributed to their inclusion. This option was marked by some subjects, and to compare the responses, it was observed statistical difference between the three deficiencies. The hearing PwD were the most pointed out, however, did not mention that these other policies would be. This fact can be justified by not having knowledge of the laws mentioned in the questionnaire; they concluded that there are others who can contribute to this inclusion, however, can't say which.

The table for the needs not covered by public policy confirms the effectiveness of the fulfillment of the rights not set forth herein, sentiment expressed by the PwD in this study. The following were factors and sectors, even with regard to the right of these people and inclusion in society. With the spread of inclusion policies, it is necessary to address the rights of PwD with more scope to include them in society. Before the advent of inclusion, these people had no freedom, being that they were completely protected and had more limited life¹⁵.

Among the factors/policies/sectors marked by the subject, there are those who showed no significant difference in responses like: not effective of laws (0.120), non-compliance with public policies of inclusion (0.186), the continuity of social exclusion $(p\ 0.321)$, the lack of trust in public services $(p\ 0.163)$, and the option, other (0.139). Those that presented statistical difference in the comparison of responses were education and health of PwD $(p\ 0.013)$, the execution of the laws regarding accessibility (0.120) and attitudinal change in society (0.0001).

The great contribution of this study is in the last three statements. The perception of PwD that are not dealt with properly as regards its specific nature and health education brings a worrisome component. This study was conducted by health professionals, specifically nurses, with the intention of meeting as the PwD comprise the public policy framework and if these contribute, or not, for their social inclusion. It is recognized that education contributes to the understanding of the determinants of health, that is, if access to the school is compromised, their health will also be. Further, refer to difficulties in accessing education and health system mainly by attitudes/ behaviors not inclusive of professionals.

Corroborating with the idea above, access to services is needed for autonomy of these individuals, requiring interaction of PwD and its sociocultural medium¹⁶. Access extends not only to the architectural as well as job opportunities. Study of 30 PwD showed that the level of education influences the job opportunity because 60% of people said they did not have easy access to work, had primary or secondary education, and 40% who reported having had higher education facility⁷, this shows the need for qualification of such persons for the insertion in the labor market.

Inclusive policies are established, it remains to perform the architectural restructuring and the change in company behavior, as well as training of professionals in the education and health to execute them properly.

FINAL CONSIDERATIONS

Participants were people with hearing impairments, visual and with limited mobility; with male predominance; aged between 18 and 79 years, schooling of two to 16 years. They considered the free pass laws in interstate transportation and the II National Conference on the Rights of People with Disabilities the two most significant public policies for social inclusion. People with visual impairment assessed positively the most related public policies, the hard-of-hearing mentioned fewer inclusive actions.

People with motor limitation cited actions of physical accessibility. There was agreement about the breach of the inclusive actions on education and health.

The feeling of people with disabilities regarding public policies designed to provide the inclusion of these in society is still dissatisfaction, since there's no execution of some policies or that are not relevant to inclusion in society. In this way, it becomes pertinent to the creation and implementation of policies to ensure the right of this clientele to social inclusion.

It is recognized as a limitation of the study sample intentional and non-probability, the capture of the subject in associative environments that contribute to the commitment to social causes, therefore, these results cannot be generalized. Maybe people in other social arrangements have differentiated perceptions regarding inclusion policies concerning people with disabilities raising the urgent need for further research in the area.

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