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# INCLUSION OF STAFF WITH AUTISM SPECTRUM DISORDER IN FEDERAL UNIVERSITIES: DEBATE AND OBSERVATIONS

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## Abstract

The present study aims to analyze the inclusion of staff members with Autism Spectrum Disorder (ASD) at the Federal University of Southern and Southeastern Pará (Unifesspa), in light of Law No. 13,146/2015, known as the Brazilian Law on the Inclusion of Persons with Disabilities (LBI), with an emphasis on attitudinal barriers and the principles of Universal Design. It is based on the understanding that inclusion goes beyond physical and regulatory adaptations, requiring profound cultural transformations in institutional practices. Methodologically, this is a qualitative study, based on semi-structured interviews with seven autistic staff members and thematic analysis. The results show that attitudinal barriers expressed through prejudice, stigma, a lack of institutional listening, and weak policies constitute the main obstacles to effective inclusion. It is concluded that building an inclusive university requires continuous structural actions grounded in active listening, the recognition of differences, and the promotion of accessible and equitable environments.

**Keywords:** Accessibility; Attitudinal Barriers; Universal Design; Higher Education; ASD.

## 1. Introduction

The debate on inclusion has taken center stage on the international stage since the 1990s, particularly with the World Conference on Education for All held in Jomtien (1990) and the Salamanca Declaration (1994), which established inclusion as a guiding principle of contemporary educational policies. These international milestones shifted the focus of education from a selective and

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homogeneous perspective to an approach based on the recognition of human diversity, emphasizing everyone's right to full participation in educational systems.

In the Brazilian context, this movement was strengthened by the ratification of the Convention on the Rights of Persons with Disabilities (UN, 2006), incorporated into the legal system with constitutional *status* in 2009, and by the enactment of Law No. 13,146/2015, the Brazilian Law on the Inclusion of Persons with Disabilities (LBI). These legal provisions represent significant advances by consolidating an approach grounded in human rights and the biopsychosocial model of disability, which is now understood as the result of the interaction between individual impairments and contextual barriers.

However, despite the robustness of the legal framework, the implementation of inclusion in Brazilian higher education still faces structural, cultural, and institutional obstacles. As pointed out by Mazzotta (2011) and Omote and Lopes (2015), the gap between legislation and practice reveals the persistence of an exclusionary logic, sustained by rigid organizational structures and institutional cultures that are insensitive to diversity.

In this scenario, the public university presents itself as an ambiguous and tense space. On the one hand, it functions as *a* privileged *locus* to produce knowledge, critical education, and the promotion of citizenship; on the other, it reproduces historical inequalities and mechanisms of exclusion. This understanding is further explored by Boaventura de Sousa Santos (2010), who characterizes the university as a field of epistemological and social disputes, and by Marilena Chauí (2003), who interprets it as an institution traversed by contradictions inherent to its place in society.

Considering these tensions, this study proposes to analyze the inclusion of staff members with Autism Spectrum Disorder (ASD) at the Federal University of Southern and Southeastern Pará (Unifesspa), with an emphasis on attitudinal barriers. It starts from the premise that such barriers, which are often rendered invisible, constitute one of the main obstacles to effective inclusion, since they manifest themselves in the realm of social relations, values, and institutional practices.

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Methodologically, the research adopts a qualitative approach, based on semi-structured interviews, whose data were analyzed using thematic analysis, as proposed by Braun and Clarke (2006). This approach enables the identification and interpretation of patterns of meaning present in the participants' statements, allowing for an in-depth understanding of their experiences and perceptions regarding the phenomenon under investigation.

Thus, by addressing the inclusion of staff members with ASD in the university context, this study seeks to contribute not only to the improvement of institutional policies but also to the strengthening of a critical perspective on inclusion, committed to the structural transformation of institutions and the construction of a democratic, equitable, and socially grounded higher education system.

## 2 Theoretical framework

### 2.1 Overview of inclusion policies

The trajectory of inclusion policies in Brazil reveals a historical process marked by progressive regulatory advances, yet strained by persistent structural barriers to inclusion. Since the imperial period, with the creation of specialized institutions such as the Imperial Institute for Blind Boys (1854) and the Institute for the Deaf and Mute (1857), an initially welfare-oriented and segregating approach has been observed, centered on the institutionalization of people with disabilities.

Throughout the 20th century, especially from the 1960s onward, special education began to be incorporated into educational policies, still under an integrationist logic that conditioned participation on individuals' ability to adapt to the standards of regular education. This perspective is criticized by authors such as Mazzotta (2011), who point out that integration does not break with the logic of exclusion, but merely shifts its forms of manifestation.

The 1988 Federal Constitution represents a milestone in the consolidation of social rights, establishing education as a right for all and affirming the principle of equal conditions of access and retention. This progress is furthered by the Law on Guidelines and Bases for National Education (Law No. 9,394/1996) and the National Education Plan (2001), which begin to incorporate the perspective of inclusion.

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However, it is with the ratification of the Convention on the Rights of Persons with Disabilities (UN, 2006) and, subsequently, with the enactment of the Brazilian Inclusion Law (2015), that a paradigm shift in the understanding of disability is consolidated. The LBI adopts the biopsychosocial model, shifting the focus from individual limitations to the barriers imposed by society.

In this context, attitudinal barriers take on analytical centrality, being defined as behaviors and attitudes that prevent or hinder social participation on an equal footing. Unlike physical or architectural barriers, attitudinal barriers operate in a diffuse and often invisible manner, being deeply rooted in institutional culture.

Authors such as Diniz (2007) and Werneck (1997) highlight that disability cannot be understood as a condition isolated from the individual, but as a product of social relations that produce exclusion. Complementarily, Sassaki (2009) emphasizes that accessibility must be understood broadly, including communicational, methodological, and attitudinal dimensions.

Despite regulatory advances, recent literature shows that Brazilian federal universities still face challenges related to the implementation of inclusive policies, especially regarding institutional management, resource allocation, and the consolidation of effectively accessible organizational practices (Pacheco; Barcelos, 2025). These challenges demonstrate that inclusion is not achieved solely through legislation but requires structural and cultural transformation of institutions.

In this sense, inclusion can be understood as a political process involving struggles for recognition, redistribution, and participation (Fraser; Honneth, 2003). It is, therefore, an agenda that requires coordination between public policies, institutional practices, and social mobilization.

## 2.2 Universal design and assistive technologies: foundations, tensions, and possibilities

The consolidation of inclusive policies in the contemporary context requires the coordination of integrated strategies capable of acting in a coordinated manner at the structural, institutional, and individual levels.

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In this scenario, the concepts of Universal Design and Assistive Technology emerge as fundamental pillars for promoting accessibility and the social participation of people with disabilities, functioning not only as technical tools but as central analytical and political categories in the debate on inclusion.

According to the Brazilian Inclusion Law (Law No. 13,146/2015, Art. 3, item III), Universal Design refers to the conception of products, environments, programs, and services to be used by all people, without the need for subsequent adaptation or specialized designs. It is, therefore, an approach that seeks to anticipate human diversity, incorporating it as a structuring principle in the planning and organization of social spaces.

From this perspective, Universal Design represents a break with traditional models of accessibility based on the logic of adaptation, which presuppose a standard individual and treat disability as an exception. On the contrary, this approach is grounded in the recognition of heterogeneity as a constitutive condition of human experience, shifting the focus from corrective intervention to the construction of inherently accessible environments.

In the field of education, this concept is embodied in Universal Design for Learning (UDL), which proposes the creation of flexible pedagogical practices capable of accommodating different learning styles from the outset. As Moraes and Vieira (2019) argue, UDL breaks with the paradigm of homogenization by recognizing that educational equity requires multiple forms of representation, expression, and engagement. Thus, accessibility ceases to be a compensatory measure and becomes a structural element of the educational process.

However, although Universal Design proposes comprehensive solutions, it does not eliminate the need for specific strategies tailored to the unique needs of individuals. It is in this context that Assistive Technology fits in, defined by Brazilian law as a set of resources, services, and practices aimed at expanding the functional abilities of people with disabilities, promoting autonomy, independence, and social inclusion.

As highlighted by Sassaki (2005), assistive technology ranges from simple devices to complex technological solutions, acting directly to mediate between the

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individual and the environment. Unlike Universal Design, which operates on a collective and preventive logic, assistive technology acts in an individualized manner, responding to the specific needs of each person.

This distinction, however, should not be understood in a dichotomous way, but rather as complementary. While Universal Design seeks to eliminate barriers broadly, assistive technology works to reduce residual inequalities, expanding the possibilities for individuals to participate in contexts that are not yet fully accessible.

However, this relationship also reveals significant tensions. An exclusive emphasis on Universal Design can render specific needs invisible, while a focus on assistive technology can reinforce the individualization of disability, shifting the responsibility for inclusion onto the individual. From this perspective, authors such as Diniz (2007) and Oliver (1990) warn of the risk of reproducing a logic that holds the individual responsible for their adaptation, to the detriment of transforming social structures.

Thus, the realization of inclusion requires the integration of these two approaches, articulating structural interventions and individualized strategies. This integration must be guided by a critical perspective that recognizes accessibility as a right and not as a concession, as emphasized by Werneck (1997) when he states that inclusion cannot be understood as a favor, but as an expression of citizenship.

In the context of higher education, this discussion takes on even more complex dimensions. Universities, as institutions historically marked by standards of excellence and meritocracy, tend to operate under logics that prioritize homogeneity and normativity. In this scenario, the implementation of Universal Design and Assistive Technology is not limited to technical issues but implies a profound transformation of pedagogical, administrative, and relational practices.

Furthermore, the adoption of these strategies requires institutional investment, ongoing professional training, and, above all, cultural change. As Castro and Mello (2011) point out, assistive technology must be systematically incorporated into public policies, avoiding its sporadic or residual use. Similarly, Universal Design requires integrated planning and institutional commitment and cannot be reduced to isolated initiatives.

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Thus, understanding the role of Universal Design and Assistive Technology in the context of inclusion implies recognizing them as mechanisms that operate at the intersection of technology, policy, and culture. More than mere adaptation tools, they constitute strategies for social transformation, capable of challenging exclusionary structures and promoting the creation of more equitable environments.

Finally, in light of the discussions presented in this study, it becomes evident that higher education institutions must adopt a systemic approach to promoting accessibility. This implies, as previously noted, conducting ongoing institutional assessments, implementing structural measures in the short and medium term, and strengthening spaces for dialogue with the academic community.

Considering this context, it follows that Universal Design and Assistive Technology should not be understood as isolated solutions, but as components of a broader institutional policy guided by the principles of equity, diversity, and social justice. Only through this coordination will it be possible to advance in building a truly inclusive university, capable of recognizing and valuing the plurality of the individuals who constitute it.

### 2.3 Inclusion, work, and occupational health in the university context

The discussion on the inclusion of people with disabilities in higher education often focuses on student access and retention, resulting in the relative invisibility of the experiences of technical-administrative staff and faculty members with disabilities, especially those with Autism Spectrum Disorder (ASD). In this context, it is necessary to broaden the debate beyond the educational dimension, incorporating aspects related to work, institutional management, and occupational health in the public sector.

The university environment constitutes not only a space for academic training but also an organizational context marked by work relationships, productivity demands, institutional norms, and management dynamics that directly impact the health and well-being of workers. As Christophe Dejours (1992) argues, work plays a central role in the constitution of subjectivity, capable of both promoting recognition

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and fulfillment and producing psychological distress, especially when individuals encounter institutional barriers that limit their participation and sense of belonging.

In the context of public service and university management, the absence of institutional policies aimed at neurodivergent employees can contribute to processes of invisibilization, isolation, and emotional burnout. In line with this discussion, the inclusion of workers with ASD requires not only individual accommodations but also organizational transformations related to management practices, forms of institutional communication, working conditions, and occupational health policies.

From this perspective, Seligmann-Silva (2013) highlights that work organization processes and institutional relationships have a direct impact on workers' mental health. Thus, environments marked by attitudinal barriers, a lack of institutional support, and demands for continuous adaptation can intensify processes of suffering, emotional overload, and the weakening of professional bonds.

In the context of public universities, thinking about inclusion implies recognizing human diversity in work relationships as well, understanding accessibility as an organizational principle and a condition for the full participation of individuals. From this perspective, the development of inclusive institutional policies requires coordination between accessibility, university management, occupational health, and the recognition of neurodiversity in the public sector.

### 2.4 Autism spectrum disorder: conceptual foundations

Autism Spectrum Disorder (ASD) is a diagnostic category whose understanding has evolved over time, reflecting not only scientific advances but also changes in social conceptions of normality, difference, and disability. The term autism, derived from the Greek *autos* ("in oneself"), historically refers to the idea of withdrawal and was initially associated with psychopathological conditions.

The first systematic descriptions of autism were made by Leo Kanner in the 1940s, emphasizing characteristics such as difficulties in social interaction and communication, as well as the presence of repetitive behaviors. Subsequently, these descriptions were incorporated into psychiatric classification systems, particularly the

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Diagnostic and Statistical Manual of Mental Disorders (DSM), published by the American Psychiatric Association.

Throughout the various editions of the DSM, a significant evolution in the understanding of autism can be observed. Initially associated with childhood schizophrenia, autism came to be recognized, starting with the DSM-III (1980), as a distinct disorder with more objective diagnostic criteria. This evolution culminates in the DSM-5 (2013), which introduces the concept of a spectrum, acknowledging the heterogeneity of manifestations and the need for different levels of support.

Despite these advances, the diagnostic model has been criticized for its reductionist nature, as it emphasizes deficits at the expense of individuals' potential.

From this perspective, authors such as Orrú (2012) and Bosa (2006) advocate for a broader approach that views autism as part of human diversity, situating it within the field of neurodiversity.

The neurodiversity perspective proposes a significant epistemological shift, understanding autism not as a pathology to be corrected, but as a legitimate variation in human functioning. This approach aligns with the social model of disability (Oliver, 1990), emphasizing that the difficulties faced by individuals stem, to a large extent, from barriers imposed by social and institutional contexts.

In the Brazilian context, the collection of data on ASD is still recent, and the 2022 Demographic Census represents a significant advance by including information on this population. This statistical recognition reinforces the need for specific public policies and more qualified institutional practices.

In the context of higher education, it is observed that clinical diagnosis often takes center stage in institutional practices, conditioning access to rights on the presentation of medical reports. This bureaucratic logic tends to reduce the complexity of the experiences lived by individuals, disregarding fundamental aspects such as active listening, continuous support, and the adaptation of institutional practices.

Thus, understanding ASD in the university context requires moving beyond the clinical dimension, incorporating a critical analysis of the institutional relationships that produce exclusion. Many of these barriers are subtle and invisible, manifesting in

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daily life through practices, discourses, and norms that limit the full participation of individuals.

Thus, the inclusion of people with ASD in higher education must be understood as a multidimensional process, involving not only diagnostic recognition but also the transformation of institutional structures, pedagogical practices, and social relations that shape the university environment.

**Table 1 – Conceptual differentiation of analytical categories**

| Concept | Definition | Theoretical framework |
|---|---|---|
| Ableism | A social and cultural structure that ranks bodies and subjectivities based on normative standards of ability, thereby legitimizing exclusion, and inequality. | Campbell (2009); Mello (2016) |
| Attitudinal barriers | Behaviors, prejudices, and social practices that hinder the full participation of people with disabilities in institutional and social spaces. | Sassaki (2009) |
| Stigma | A social process of devaluation associated with characteristics perceived as deviating from dominant social norms. | Goffman (1988) |
| Symbolic violence | A form of domination exercised in a subtle and | Bourdieu (1998) |

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| | naturalized manner, through the imposition of socially legitimized values and norms. | |

**Source:** prepared by the authors (2026).

## 3. Methodological procedures

### 3.1 Autism spectrum disorder at Unifesspa: empirical and thematic analysis

Considering the institutional context under investigation, the study involved conducting semi-structured interviews with 7 (seven) of the 9 (nine) permanent staff members at the Federal University of Southern and Southeastern Pará (Unifesspa) diagnosed with Autism Spectrum Disorder (ASD). Participants were invited to join the study through direct contact by the researchers, with the following inclusion criteria: having a permanent employment relationship with the institution, having a formal ASD diagnosis, and voluntarily expressing interest in participating in the research. Of the nine employees initially identified, seven agreed to participate in the study, corresponding to an approximate participation rate of 78%. Of the two remaining employees, the first is one of the researchers, and the other chose not to participate and did not provide a justification, which was understood, in accordance with the voluntary nature of the research.

We sought to ensure, in the aggregate profile of the participants, the representation of different gender identities, including men and women, aged between 29 and 58 years. The interviewees are distributed among faculty and administrative staff positions in education, working in different sectors and campuses of the institution, and have varying lengths of institutional tenure, constituting an empirical sample relevant to the research objectives. Given the small number of staff members with ASD at the university, we chose not to provide specific details regarding their department, career trajectory, or campus of assignment, as a strategy to mitigate the risk of indirect identification of the participants.

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The interviews were conducted individually, in a setting and at a time previously agreed upon with the participants, seeking to ensure privacy, comfort, and safety during the sharing of their accounts. The semi-structured interview guide allowed for the exploration of experiences related to institutional inclusion, accessibility, work relationships, a sense of belonging, attitudinal barriers, and conditions for remaining in the university environment.

The research adhered to the ethical principles applicable to research involving human subjects, ensuring participants' right to confidentiality, anonymity, and voluntary participation. All participants were informed in advance about the research objectives, the academic use of the data, the confidentiality measures adopted, and the possibility of withdrawing at any time, having formally authorized the use of verbatim excerpts from the interviews for the purposes of analysis and scientific publication by signing the Informed Consent Form (ICF).

Given the small number of employees diagnosed with ASD at the institution under investigation, additional strategies were adopted to mitigate the risk of indirect identification of participants, including the use of pseudonyms and the removal of information related to departments, specific job titles, career paths, or any elements that could enable their identification within the institutional context. The interviews were stored in a password-protected digital environment, with access restricted to the researchers, and were used exclusively for academic and scientific purposes. Furthermore, every effort was made to avoid any form of professional exposure of the participants, especially given their affiliation with the same institution where the research was conducted.

The research was submitted to and approved by the Research Ethics Committee of the Federal University of Southern and Southeastern Pará (CEP/Unifesspa), under opinion no. 96259026.4.0000.0475.

To identify the statements and preserve the participants' identities, the use of pseudonyms was adopted as an ethical-methodological procedure. This choice is also justified by the need to promote greater freedom of expression among the participants, minimizing potential embarrassment, fears, or risks of exposure in the professional environment. Thus, we sought to build a context of trust in which

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participants could express their perceptions, experiences, and opinions freely and authentically.

Beyond its protective nature, the choice of pseudonyms was guided by a symbolic and respectful perspective, avoiding terms that might imply pathologization or stereotypes associated with Autism Spectrum Disorder. We therefore opted for names that evoke qualities, potentialities, ways of perceiving the world, and human uniqueness, in line with an approach that recognizes diversity as a value.

Based on these reflections, the participants were identified using the following pseudonyms: Luz (Participant 1), which refers to sensitive perception and a unique way of understanding the world; Elo (Participant 2), symbolizing connection and the building of bonds; Vértice (Participant 3), representing the meeting point between different perspectives; Brisa (Participant 4), suggesting sensitivity and delicacy in interactions; Âmbar (Participant 5), evoking something rare, precious, and unique; Nexo (Participant 6), related to the construction of meaning and the organization of thought; and Aurora (Participant 7), representing new beginnings, possibilities, and different ways of perceiving and experiencing the world.

As a result, the pseudonyms serve not only a technical function of anonymization but also a symbolic role, contributing to a more humanized and sensitive approach in presenting the research subjects.

Considering that the research was conducted within the same institution where the participants work, we acknowledge the existence of potential implications arising from the proximity between researchers and the field under investigation, especially regarding previously established institutional relationships and shared dynamics of belonging. Although this condition facilitated access to participants and a contextual understanding of the reported experiences, it also required attention to the possibility of interpretive biases and constraints in data collection.

Seeking to reduce asymmetries and promote greater freedom of expression among the participants, strategies were adopted such as conducting interviews in a private setting, ensuring anonymity through the use of pseudonyms, explicitly stating the voluntary nature of participation, and reinforcing the confidentiality of the information shared. In addition, we sought to conduct the interviews in an open and

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non-directive manner, prioritizing active listening and respect for the experiences narrated by the participants.

During the analytical process, we sought to maintain a reflective and critical stance regarding the interpretations produced, continually revisiting the empirical data, the research objectives, and the theoretical frameworks employed, in order to minimize interference arising from prior assumptions or personal experiences related to the field under investigation.

### 3.2 Data analysis procedures

Data analysis for this study was conducted using thematic analysis, as proposed by Braun and Clarke (2006), as it is a qualitative approach that enables the identification, organization, and interpretation of patterns of meaning present in the empirical data. The choice of this method is justified by its suitability for understanding the experiences and perceptions of public servants with Autism Spectrum Disorder (ASD), especially regarding the attitudinal barriers experienced in the institutional context.

The analytical process was developed in successive stages, inspired by the proposal of Braun and Clarke (2006), comprising: familiarization with the data through exhaustive and repeated reading of the interviews; initial coding of the statements, with identification of recurring clusters of meaning; grouping of the codes into provisional thematic categories; review and refinement of the categories, considering their internal consistency, recurrence, and analytical relevance; and, finally, definition, naming, and interpretation of the thematic categories in light of the theoretical framework adopted in the research.

During the coding stage, initial codes were identified, such as “lack of institutional listening,” “need for constant adaptation,” “fear of disclosing the diagnosis,” “ambiguous communication,” and “isolation in the workplace,” which were subsequently grouped into broader analytical categories, such as “institutional invisibility,” “communication barriers,” “ableism,” and “fragility of belonging.”

The analysis was conducted manually, without the use of specific qualitative analysis software, given the small number of participants and the intended

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interpretive depth. Data interpretation occurred in a continuous and reflective manner, linking participants' accounts to the theoretical frameworks employed throughout the research.

To ensure greater analytical consistency, the thematic categories were successively reviewed during the interpretive process, noting the recurrence of content, its relevance to the problem under analysis, and the coherence between the empirical excerpts, the codes produced, and the categories constructed. Given that the research was conducted by two researchers, the interpretations were also continually revisited and compared with the study's objectives, seeking to ensure greater rigor and internal coherence in the analytical process.

The analysis of the interviews, guided by this perspective, allowed not only for the flexible systematization of the data without losing interpretive depth, but also for the identification of categories that go beyond individual experiences, highlighting the structural and cultural dynamics of the university as a social organization. Thus, the empirical data are not understood as isolated accounts, but as expressions of power relations, institutional norms, and symbolic processes that structure inclusion, or its absence.

The analytical process involved an exhaustive reading of the interviews, the initial coding of the statements, and the subsequent organization of the data into thematic categories, defined based on the recurrence of content and its relevance to the problem under analysis. From this process, eight analytical categories were constructed, which express central dimensions of the participants' experiences and directly address the research objectives.

Based on the thematic analysis of the interviews, analytical categories were constructed based on the recurrence of the accounts, the core meanings identified in the participants' statements, and their relationship to the research objectives. The table below systematizes the thematic categories, the main analytical codes, and representative excerpts from the interviews.

## 4. Results and discussion

### 4.1 Analytical framework of thematic categories

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Based on the thematic analysis of the interviews, analytical categories were identified based on the recurrence of the accounts, the core meanings present in the participants' statements, and their relationship to the research objectives. Table 2 presents the systematization of the thematic categories, their respective core meanings, and representative excerpts extracted from the interviews.

**Table 2 – Systematization of the research's thematic categories**

| Thematic category | Core meaning / codes | Representative excerpt |
|---|---|---|
| Inclusion, invisibility, and lack of institutional listening | Lack of acceptance; absence of participation; institutional invisibility | "The university listens to the autistic student, but the staff member does not." (Luz) |
| Weakness of institutional policies and the creation of exclusion | Isolated actions; absence of permanent policies; institutional discontinuity | "These are isolated actions [...] but not as institutional policy." (Elo) |
| Communication barriers and symbolic violence | Ambiguous communication; lack of predictability; implicit codes | "Things are communicated in ambiguous ways." (Luz) |
| Ableism, normalization, and regulation of bodies | Delegitimization of the diagnosis; demands for productivity; prejudice | "Autism doesn't exist [...], that's just laziness." (Elo) |
| Sense of not belonging, isolation, and fragile relationships | Isolation; lack of collective support; relational fragility | "Sometimes it feels like we're all alone in here." (Brisa) |
| Invisibility and identity management | Hiding the diagnosis; fear of prejudice; protective strategy | "I make myself invisible so I don't suffer from ableism." (Elo) |
| Institutional planning and | Lack of predictability; | "I ended up next to an |

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| crisis prevention | sensory overload; lack of environmental adaptation | extremely loud speaker." (Vértice) |
| Weakness of health policies and lack of support | Lack of emotional support; absence of spaces for regulation | "That space [...] is inside my car." (Vértice) |

**Source:** prepared by the authors (2026).

### 4.2 Inclusion, invisibility, and lack of institutional listening

One of the most recurring themes in the statements of the participants in this study refers to the lack of institutional spaces for support and active listening tailored to the specific needs of employees with Autism Spectrum Disorder (ASD). Participants report that, since entering public service through competitive exams, they have been constantly pressured to adapt to the dynamics and demands of the university, without, in return, their specific needs being properly recognized or addressed by the institution. This perception highlights that inclusion, in the context under investigation, remains marked by expectations of individual adaptation, to the detriment of the development of institutional practices aimed at recognizing diversity. This reality is strikingly evident in Luz's statement that "this inclusion policy for these invisible disabilities is practically nonexistent" and that "the university listens to the autistic student, but not to the staff member." (Luz, interview conducted on April 25, 2026).

The account highlights not only the perceived absence of institutional policies but also a sense of invisibility associated with the place occupied by neurodivergent staff members at the university. By mentioning that "there was no survey [...] we weren't asked 'what do you think about this'," the same participant highlights the absence of institutional mechanisms for listening and participation, revealing that decisions related to inclusion tend to occur without effectively considering the experiences and needs of these individuals.

The participants' statements also indicate an asymmetry in the inclusive actions developed by the institution, which seem to focus primarily on the student

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body, to the detriment of workers' demands. This perception resurfaces when Aurora states that "no one asks what we really need" (Aurora, interview conducted on April 28, 2026), highlighting that the absence of qualified listening has direct impacts on the construction of belonging and on how these individuals perceive their place at the university.

Similarly, Brisa emphasizes: "what works for me doesn't necessarily work for another autistic person," pointing to the heterogeneity within the autism spectrum and the inadequacy of institutional practices based on homogeneous conceptions of disability. The account highlights that effective inclusive policies require recognition of individuals' unique characteristics, as well as institutional openness to dialogue and the collective development of accessibility strategies.

The centrality attributed by the interviewees to institutional listening allows us to understand that inclusion cannot be reduced to the formal existence of norms or policies. More than administrative measures, the accounts highlight the need for effective practices of participation, acceptance, and recognition. With this in mind, the experiences narrated resonate with the reflections of Nancy Fraser (2006), in emphasizing that social justice involves not only the redistribution of resources but also the recognition of differences and identities.

The absence of institutional dialogue can also be understood as a mechanism of symbolic exclusion, as far as it limits the participation of individuals in the construction of the very policies that concern them. From this perspective, Paulo Freire (1996) views listening as a fundamental ethical and political dimension for the construction of emancipatory practices, emphasizing that dialogue is an indispensable element for truly inclusive processes.

The experiences reported by the participants also resonate with Débora Diniz's (2007) reflections on the distinction between the medical model and the social model of disability. While the former tends to place the responsibility for adaptation on the individual, the latter shifts the focus to socially and institutionally produced barriers. In the scenario analyzed, the statements highlight the persistence of institutional practices that still operate under the logic of the normalization of bodies, requiring

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neurodivergent staff to make constant efforts to conform to previously established institutional standards.

Furthermore, the accounts reinforce the perspective defended by Maria Teresa Eglér Mantoan (2003), by showing that inclusion is not achieved by the mere presence of individuals in institutional spaces, but requires a structural reorganization of practices, relationships, and ways of embracing diversity.

In light of the experiences reported by the participants, it is observed that promoting inclusion demands not only formal recognition of differences but also the establishment of permanent institutional mechanisms for listening and participation. From the perspective of Universal Design, this implies developing organizational practices conceived from the outset to accommodate human diversity, including the active participation of neurodivergent staff in the formulation of institutional policies, the definition of administrative workflows, and the development of inclusion strategies. Thus, permanent channels for listening, participatory institutional protocols, and continuous monitoring actions constitute concrete possibilities for operationalizing accessibility in the university context.

### 4.3 Fragility of institutional policies and the production of exclusion

The participants' statements show that inclusion at the Federal University of Southern and Southeastern Pará (Unifesspa) has been perceived as a set of isolated, fragmented, and poorly institutionalized initiatives. This perception is clearly evident in Elo's account, when he states:

> Look, to be perfectly honest, I'm not going to say that Unifesspa is doing anything, because I don't think it is. What we have, and have always had, both in terms of the inclusion of people with disabilities, neurodivergent people, and I could expand this to the category of differences, of otherness, including Indigenous and Quilombola people, are, for the most part, isolated actions: a professor's project, a master's thesis, an outreach initiative, a training activity, but not as an institutional policy. (Elo, interview conducted on April 25, 2026)

The account highlights a recurring perception among the research participants: that actions aimed at inclusion depend predominantly on individual or temporary initiatives, without a continuous and structured institutional policy capable of

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guaranteeing permanent support for neurodivergent staff members. The statement also broadens the discussion beyond Autism Spectrum Disorder (ASD), by linking the fragility of inclusive policies to the way different historically marginalized groups are treated in the university context.

This understanding resurfaces in Aurora's statement, when she says:

> There is no place or department that views us as staff members. So much is missing, starting with the basics; I think everything is missing. I think we need to move beyond lectures and symposia; we need to move beyond mere talk. There might be a great program for students, but what about the staff? (Aurora, interview conducted on April 28, 2026)

The account highlights the perception of a lack of effective institutional support, indicating that existing initiatives are seen as insufficient to address the concrete needs of staff members. By stating that "it needs to literally move beyond the drawing board," the interviewee underscores the gap between institutional discourse on inclusion and its implementation in everyday organizational practices. The recurrence of this type of perception in the interviews suggests that institutional fragility is not understood by participants as an isolated absence, but as a structural element of the experiences of exclusion encountered in the university environment.

The statements also reveal an asymmetry in the inclusion policies developed by the institution, as far as participants perceive that actions are more directed toward the student body, to the detriment of staff members. In this context, the absence of specific policies aimed at neurodivergent workers contributes to feelings of invisibility and a lack of institutional belonging.

The experiences narrated by the participants resonate with the reflections of Boaventura de Sousa Santos (2007) on the production of absences, especially in highlighting how certain demands and individuals can be systematically neglected by institutional structures. Similarly, Maria Teresa Eglér Mantoan (2003) argues that inclusion is not achieved through isolated or episodic actions, but requires systemic transformation and the institutionalization of continuous practices of inclusion and accessibility.

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Therefore, the accounts analyzed allow us to understand that the fragility of institutional policies does not constitute a mere administrative absence, but rather a process that actively contributes to the reproduction of inequalities and the maintenance of barriers to the full participation of neurodivergent staff in the university setting.

The institutional weaknesses highlighted by the participants indicate the need to incorporate inclusion as a foundational principle of university management. From this perspective, Universal Design can contribute to the development of institutional policies that anticipate the diversity of individuals, reducing dependence on ad hoc adaptations or individual initiatives. Among the possibilities for implementation, the following stand out: the creation of permanent welcome protocols, accessible administrative processes, institutional guidelines tailored to neurodivergent staff, and systematic training initiatives for managers and administrative teams.

### 4.4 Communication barriers and symbolic violence

Another recurring theme in participants' statements concerns the communication barriers present in daily institutional life, particularly related to the difficulty of understanding rules, administrative procedures, and established forms of interaction at the university. The accounts indicate that institutional communication is often structured through implicit information, poorly systematized guidelines, and unexpressed expectations, requiring constant effort on the part of individuals to interpret and adapt. This perception is evident in Luz's statement:

> Things are communicated in ambiguous ways; they are implied but not stated. What are the steps? I don't know. I think there is a serious lack of empathy toward others, of asking: 'What do you think about this?' (Luz, interview conducted on April 25, 2026)

The account highlights not only operational difficulties related to access to institutional information, but also a sense of exclusion stemming from a lack of clarity, predictability, and dialogue in communication processes. By asking, "What are the steps?", the participant makes clear the need for more objective and accessible guidance, indicating that institutional communication does not always take into account different ways of understanding and processing information.

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This reality also emerges in Âmbar's statement that "things are said indirectly, as if everyone already knew what to do." The recurrence of this perception among the participants suggests that the university operates based on codes and assumptions shared only by those already familiar with certain institutional dynamics. In this context, individuals who require greater objectivity, predictability, and clarity in information end up facing additional difficulties in fully participating in the work environment.

The experiences reported by the participants show that communication barriers go beyond merely administrative issues, directly impacting processes of inclusion and institutional belonging. The lack of clarity and systematization of information tends to produce insecurity, emotional strain, and limitations on the participation of neurodivergent staff in institutional routines.

This dynamic can be understood in light of Pierre Bourdieu's (1998) reflections on symbolic violence, especially when certain communication patterns are naturalized as universal and legitimate, even though they are not equally accessible to all individuals. Based on this understanding, institutional communication ceases to be a neutral element and begins to operate as a mechanism that favors those already socialized in institutional codes, contributing to subtle and silent processes of exclusion.

The participants' statements also resonate with the expanded understanding of accessibility proposed by Sassaki (2009), highlighting that barriers to inclusion are not restricted to physical dimensions but equally involve communicational and cognitive aspects. In the case of people with Autism Spectrum Disorder (ASD), the need for organized, explicit, and predictable information emerges as a key factor for participation and retention in institutional settings.

Thus, the analyzed accounts allow us to understand that institutional communication can act as both an instrument of inclusion and exclusion, depending on how it is structured. The absence of accessible, objective, and dialogic communication practices contributes to the production of inequalities and to the limitation of the full participation of neurodivergent staff in the university context.

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The analyzed accounts also highlight that communicational accessibility constitutes a central dimension for the inclusion of neurodivergent staff members. From the perspective of Universal Design, institutional practices such as objective communication, predictable routines, clear explanation of administrative workflows, and systematic organization of information can significantly reduce cognitive and communicational barriers. In this context, Assistive Technology resources and communicational accessibility, such as organizational scripts, flowcharts, simplified instructions, and the provision of institutional information in advance, emerge as important strategies for expanding the participation and autonomy of individuals.

### 4.5 Ableism[1], normalization, and regulation of bodies

The interviews reveal the recurring presence of ableist discourse in the institutional environment, expressed through the delegitimization of autism as a legitimate condition and the questioning of the needs presented by neurodivergent staff members. These experiences are strikingly evident in Elo's account, who reports having repeatedly heard statements such as: "Autism doesn't exist [...], that's just a fad, that's laziness." (Elo, interview conducted on April 25, 2026).

The account highlights that certain perceptions of autism are still marked by discredit, misinformation, and stigmatization, producing forms of disqualification that directly affect the subjects' experience in the workplace. By associating autism with "laziness" or "making a fuss," the reported discourses reduce the specificities of Autism Spectrum Disorder (ASD) to supposed individual failures in behavior or performance, disregarding the institutional and social barriers faced by the participants.

This perception also appears in Nexo's statement, when he claims to have heard, on different occasions, that "autism is an excuse for not working properly." The account highlights the association between productivity, normality, and social value, revealing the existence of institutional expectations based on homogeneous

[1] According to Fiona Kumari Campbell (2009), ableism is a normative logic that produces and sustains the idea that certain bodies are naturally superior, while others are perceived as deficient or inadequate. For the author, this structure not only excludes but also regulates social expectations, defining which forms of existence are considered legitimate.

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standards of human performance and functioning. In this context, individuals who do not fully conform to these parameters find their abilities constantly questioned or delegitimized.

The participants' statements indicate that ableism manifests not only through isolated individual attitudes but also through socially normalized practices and discourses that reinforce normative standards of behavior, communication, and productivity. This dynamic becomes even more evident when Elo states: "It's as if this gives people a license to not want to know about it either." (Elo, interview conducted on April 25, 2026).

The account suggests that the absence of institutional policies aimed at neurodivergent employees contributes to the normalization of these practices, producing an environment in which ignorance, neglect, and disregard for the specificities of these individuals become socially tolerated. In this context, the institutional invisibilization of demands related to ASD tends to reinforce processes of exclusion and silencing.

The experiences narrated by the participants resonate with Michel Foucault's (1975) reflections on processes of normalization, especially in highlighting how certain patterns of behavior and productivity are established as legitimate benchmarks within institutions. From this perspective, individuals are constantly evaluated, compared, and regulated according to hegemonic norms of performance, sociability, and functionality.

In this context, ableism can be understood as a mechanism that operates by classifying certain forms of existence as more legitimate, appropriate, or productive than others. It is, therefore, a logic that produces exclusion not only through the explicit denial of rights but also through the imposition of normative standards that disregard human diversity and the different ways in which individuals function.

The participants' statements also align with Sassaki's (2009) understanding of attitudinal barriers, understood as practices marked by prejudice, stigma, and discrimination that hinder the full participation of people with disabilities in social and professional spaces. In the reality under investigation, these barriers manifest

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themselves both in interpersonal relationships and in the absence of institutional actions capable of addressing ableist practices in the university environment.

Thus, the accounts analyzed reveal that ableism is not limited to individual opinions but is linked to institutional and cultural structures that contribute to the reproduction of inequalities, especially when there are no effective policies for welcoming, training, and including neurodivergent staff members.

The experiences reported by participants indicate that combating ableism requires not only individual attitudinal changes but also structured institutional transformations. In this regard, practices grounded in Universal Design can contribute to the creation of more accessible and inclusive organizational environments by making routines more flexible, recognizing the diversity of human functioning, and implementing ongoing training initiatives on neurodiversity, accessibility, and attitudinal barriers.

### 4.6 Lack of belonging, isolation, and fragility of bonds

The absence of belonging stands out as one of the most recurrent themes in participants' statements, appearing associated with feelings of isolation, institutional detachment, and the fragility of collective relationships in the university environment. This discussion also resonates with studies on health and subjectivity at work, especially in the field of work psychodynamics. Dejours (1992) highlights that recognition is a central element in the construction of professional identity and for workers' mental health. In line with this perspective, it appears that institutional contexts marked by isolation, a lack of support, and fragile bonds tend to produce psychological distress and emotional burnout. This perception is significantly expressed by Elo, who states that "we no longer have the university as a space of belonging" and that "people are very isolated." The accounts show that the institutional experience of neurodivergent staff is often marked by a lack of recognition and a sense of not being fully integrated into the university environment.

The experiences narrated by the participants indicate that belonging is not limited to formal presence at the institution, but involves the building of bonds, recognition, and effective participation in collective dynamics. In this context, the

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absence of institutional policies aimed at welcoming and inclusion tends to intensify feelings of isolation and distance among individuals.

This reality is also evident in Brisa's statement that "sometimes it feels like we're alone in here," and in Aurora's account, who says: "It's every man for himself; no one helps anyone else." These statements reveal not only difficulties in interpersonal relationships but also a perception of the fragility of support networks and collective building within the institutional environment. The recurrence of these perceptions suggests that the absence of inclusive practices directly impacts the possibility of forming bonds and strengthening relationships of solidarity among staff members.

The accounts analyzed allow us to understand that the isolation experienced by the participants does not stem exclusively from individual characteristics, but also from the institutional conditions in which work relationships are produced. From this perspective, the fragility of social bonds described by the participants resonates with Zygmunt Bauman's (2001) reflections on liquid modernity, marked by the instability of social relations and the weakening of collective bonds. In the institutional environment analyzed, this fragility appears to be exacerbated by the absence of institutional policies capable of promoting acceptance, active listening, and integration among individuals.

The dimension of recognition also emerges as a central element in the experiences reported by the participants. In discussing the formation of identities and forms of social participation, Axel Honneth (2003) emphasizes that recognition is a fundamental condition for individuals to develop feelings of belonging and social value. From this perspective, the lack of institutional recognition reported by the participants directly impacts not only their well-being but also their opportunities for participation and collective action.

This perception becomes evident in Nexo's statement: "If we came together more, perhaps we would have more strength to change things." The account suggests that the participants themselves recognize the importance of collective construction as a means of confronting institutional barriers. At the same time, it highlights how

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the absence of spaces for coordination and support hinders processes of mobilization and collective empowerment.

Nexo's statement resonates with the reflections of Alain Touraine (1997), who emphasizes the importance of collective action in transforming social and institutional structures. In the empirical scope of this research, the fragility of belonging and support networks ultimately limits the subjects' capacity for organization, hindering the construction of collective movements capable of challenging exclusionary institutional practices. In the field of public management, authors such as Secchi (2013) argue that effective institutional policies require planning, administrative continuity, and the definition of clear organizational guidelines. From this perspective, the absence of structured policies aimed at neurodivergent staff highlights institutional limitations in incorporating inclusion as a principle of university management.

Thus, the experiences reported by the participants demonstrate that a sense of belonging constitutes a fundamental dimension for the realization of inclusion. The absence of solid institutional ties, coupled with the fragility of support and recognition networks, contributes to the creation of isolation and to the weakening of opportunities for collective participation by neurodivergent staff members within the university setting.

The accounts also suggest that the development of institutional belonging depends on the existence of collective spaces for welcoming, listening, and recognition. Given this context, strategies inspired by Universal Design can foster the creation of more inclusive organizational environments through institutional support networks, accessible social spaces, collaborative practices, and initiatives aimed at strengthening bonds between neurodivergent staff members and the university community.

### 4.7 Invisibilization and identity management

The concealment of the diagnosis appears in participants' statements as a protective strategy in the face of an institutional environment perceived as unwelcoming and potentially ableist. The accounts indicate that the decision not to disclose one's autism does not necessarily stem from a free and spontaneous choice,

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but from the perception that revealing the diagnosis may lead to judgment, discrimination, or negative changes in how these individuals are treated in the professional context.

This perception is expressed significantly by Elo, who states: “I make myself invisible to avoid facing ableism”; “I ask that you not mention my diagnosis.” (Elo, interview conducted on April 25, 2026).

These statements reveal a deliberate effort to control the circulation of information about oneself, highlighting the constant need to manage one’s own identity within the institutional environment. By choosing to conceal the diagnosis, the participant seeks to reduce the likelihood of being exposed to situations of prejudice, disqualification, or stigmatization.

Similarly, Âmbar reports avoiding mentioning her condition so as not to be treated differently by colleagues and the institution. The recurrence of this type of strategy among the participants suggests that the concealment of the diagnosis constitutes an adaptive response to experiences of insecurity and the perception of a lack of effective institutional support.

The accounts analyzed align with the concept of stigma formulated by Erving Goffman (1988), particularly with regard to the management of personal information in contexts marked by rigid normative expectations. According to the author, individuals who possess socially devalued characteristics tend to develop strategies to control their own identity as a way to minimize processes of rejection, discrimination, or social discrediting.

For this reason, concealing the diagnosis cannot be understood merely as an individual decision, but as a practice produced in the relationship between the individual and the social context. The experiences reported by the participants indicate that the institutional environment, by failing to provide effective conditions of acceptance, recognition, and safety, contributes to the production of dynamics of silencing and invisibilization.

Furthermore, the constant need to monitor one’s own exposure produces significant subjective impacts, as it requires subjects to make a continuous effort to adapt and remain vigilant about themselves. This process tends to limit the possibility

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of authentic expression of identities and reinforces feelings of insecurity and a lack of belonging within the institutional space.

Thus, the participants' statements show that the invisibilization of the diagnosis functions as a survival mechanism in contexts perceived as exclusionary. At the same time, they reveal how the absence of institutional policies for inclusion and combating ableism contributes to the maintenance of silencing practices and to the difficulty in recognizing the experiences and needs of neurodivergent staff members.

Strategies for concealing the diagnosis highlight the need to build institutional environments perceived as safe and welcoming. From the perspective of Universal Design, this implies developing organizational policies that reduce the need for constant individual adaptations, promoting accessibility, predictability, and recognition of individual differences without the compulsory exposure of individuals. With this in mind, inclusion is conceived as an institutional responsibility rather than an individual obligation to adapt.

### 4.8 Institutional planning and crisis prevention

To ensure predictability and enable the management of unforeseen events, the planning of institutional actions is a fundamental element, especially when considering the specificities of neurodivergent individuals. From this perspective, active listening plays a central role, guiding the anticipation of potentially uncomfortable situations for staff members with Autism Spectrum Disorder (ASD), in order to promote more suitable conditions for participation and well-being.

The absence of this institutional sensitivity is evident in the account of the interviewee Vértice, as she describes her experience at an event organized by the institution: "I was standing next to an extremely loud speaker for a long time. For me, it was quite overwhelming, and this situation almost triggered a crisis." This situation highlights the neglect of fundamental aspects, such as sensory sensitivity, a recurring characteristic of ASD, and the need for advance planning of environments and activities.

Considering some of the specificities associated with ASD, such as hypersensitivity to sensory stimuli and the need for predictability, the absence of

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institutional planning tends to intensify situations of stress and overload (APA, 2014; Grandin, 2015). Under this logic, it is not merely an operational failure, but a gap that directly impacts the conditions for these individuals to remain and participate in the workplace.

Thus, institutional planning should be understood as a practice of care and promotion of inclusion, aligning with the assumptions of the social model of disability (Oliver, 1990), which shifts the focus from individual limitations to the need to transform institutional contexts and structures.

The experiences reported by the participants indicate that institutional planning can serve as an important preventive strategy against emotional and sensory overload. From this perspective, the principles of Universal Design enable the conception of institutional environments, events, and routines designed to accommodate different forms of perception and interaction. Among the possibilities for implementation, the following stand out: the prior organization of spaces, control of noise and lighting, anticipation of schedules, flexibility in participation in group activities, and the provision of sensorially regulated environments.

### 4.9 Weakness of health policies and lack of support

The interviews highlight the absence of institutional support spaces tailored to the needs of neurodivergent employees, especially in situations of emotional and sensory overload. This reality is particularly evident in Vértice's statement: "When I have a crisis, I need to be in an isolated place." "That space [...] is inside my car." (Vértice, interview conducted on April 9, 2026).

This account highlights not only the lack of institutional environments equipped to offer support during moments of dysregulation, but also the need to develop individual survival strategies in the face of the absence of institutional support. The fact that the car is mentioned as the only possible space for emotional regulation reveals the lack of policies and organizational structures sensitive to the specific needs of employees with Autism Spectrum Disorder (ASD).

In the field of autism studies, the terms "dysregulation" and "crisis" are related, though not synonymous. Dysregulation can be understood as the difficulty in

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modulating emotional, behavioral, and physiological responses to internal or external stimuli. In autistic individuals, this process is frequently associated with sensory, cognitive, or social overloads that exceed the individual's capacity to organize their responses in a functional manner.

What is conventionally called a "crisis," on the other hand, can be understood as an intense manifestation of this state of dysregulation. From this perspective, it is not a voluntary or intentional behavior, but rather the body's response to situations of extreme overload, as discussed by Lacerda (2017). Based on this understanding, episodes of crying, isolation, agitation, or emotional breakdown should not be interpreted as individual failures or isolated behavioral problems, but as expressions of suffering produced in the interaction between the individual and the environment. This reflection also touches on the field of occupational health, by recognizing that inadequate working conditions can directly impact workers' physical and emotional well-being. For Dejours (1992), suffering at work emerges when individuals do not find institutional conditions capable of offering recognition, security, and possibilities for mediation in the face of organizational demands.

This discussion also appears in the reflections of Temple Grandin, who highlights that intense sensory stimuli, unpredictable environments, and excessive demands can trigger severe states of overload in autistic individuals. The author emphasizes that elements such as excessive noise, intense light, lack of predictability, and social pressure can have significant impacts on the daily experience of these individuals.

Similarly, the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), published by the American Psychiatric Association, recognizes that individuals with ASD may exhibit hyperreactivity or hyporeactivity to sensory stimuli, an aspect that helps explain why certain institutional contexts can trigger states of emotional and sensory dysregulation.

The experiences reported by participants indicate that the absence of institutional planning and adequate reception spaces tends to intensify situations of distress and overload. Based on this understanding, it is concluded that the lack of

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sensorially regulated environments, reception protocols, and institutional care practices highlights significant gaps in the university's inclusion policies.

This understanding is directly aligned with the social model of disability, particularly in shifting the focus from individual responsibility to the need to transform environments and institutional practices. From this perspective, accessibility is not limited to the removal of physical barriers but also involves the creation of organizational, sensory, and relational conditions capable of ensuring the retention, well-being, and effective participation of neurodivergent individuals in the university setting.

The accounts analyzed highlight the need to strengthen institutional policies on occupational health and support services aimed at neurodivergent staff members. In this context, Universal Design and Assistive Technology can contribute to the creation of more accessible and sensorially appropriate environments, including spaces for emotional regulation, institutional protocols for support in situations of emotional dysregulation, and organizational flexibilities compatible with the specific needs of these individuals. Such measures shift the focus from individual adaptation to the transformation of institutional conditions for retention and participation.

## 5 Study limitations

This research has limitations that should be considered when interpreting the results. First, the small number of participants stands out, consisting of seven staff members with Autism Spectrum Disorder (ASD), a circumstance directly related to the institutional setting under investigation. Furthermore, the study focused on a single public institution of higher education, the Federal University of Southern and Southeastern Pará (Unifesspa), which limits the possibility of generalizing the findings to other organizational and institutional contexts.

Another relevant aspect concerns the risk of indirect identification of participants, given the limited number of staff members with ASD at the institution. Although anonymization strategies were adopted, such as the use of pseudonyms and the removal of information related to departments, specific positions, and career paths, it is recognized that research conducted in small institutional contexts requires

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continuous attention to ethical issues related to confidentiality and the protection of participants.

We also acknowledge the possibility of selection bias, since participation was voluntary. Thus, it is possible that the participants who agreed to take part in the study may have shown greater interest, engagement, or sensitivity regarding the themes of inclusion, neurodiversity, and institutional barriers, an aspect that may have influenced the perspectives shared during the interviews.

Furthermore, the research focused on analyzing the narratives of the interviewed staff members, without including triangulation procedures with institutional documents, internal regulations, managers, or other institutional actors. Thus, the results primarily express the experiences, perceptions, and meanings attributed by the participants themselves, emphasizing the subjective and experiential dimension of the phenomenon under investigation.

Finally, the inherent limitations of the qualitative and interpretive approach adopted are acknowledged. The analytical categories and interpretations produced stem from the articulation between the empirical data, the theoretical framework employed, and the researchers' analytical perspective, and do not claim absolute neutrality or statistical generalization. Under this logic, the findings should be understood based on their potential for analytical transferability to similar institutional contexts, contributing to the expansion of the debate on inclusion, accessibility, and neurodiversity in Brazilian public higher education.

## 6 Concluding remarks

Analysis of the interviews allows us to conclude that the inclusion of staff members with Autism Spectrum Disorder (ASD) at the Federal University of Southern and Southeastern Pará (Unifesspa) remains an incipient process, marked by tensions between legal norms and the institutional practices actually implemented. Although there is formal recognition of the importance of inclusion, the absence of structured and systematic policies for staff members is evident, which compromises their effectiveness and contributes to the reproduction of inequalities within the institution.

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The communication, attitudinal, and structural barriers identified indicate that exclusion is not an isolated or episodic phenomenon, but rather a systemic process, sustained by institutional practices, implicit norms, and power relations. Based on this analysis, inclusion must be understood as a structural and cultural transformation, rather than as a process of individual adaptation of subjects to previously established conditions.

The presence of ableism, linked to processes of normalization (Foucault, 1975) and symbolic violence (Bourdieu, 1998), demonstrates that exclusion is deeply rooted in institutional dynamics. At the same time, the invisibilization of individuals, analyzed in light of the concept of stigma (Goffman, 1988), reveals the adoption of strategies of silencing and adaptation by public servants as a means of survival in an environment perceived as unwelcoming and insufficiently accessible.

Also noteworthy is the centrality of belonging as a fundamental condition for social participation and collective mobilization. The fragility of institutional bonds, as discussed by Bauman (2001), hinders the formation of collectives capable of challenging, problematizing, and transforming existing structures, thereby perpetuating dynamics of exclusion and isolation.

On the other hand, the interviews also point to possible paths for promoting inclusion, with an emphasis on active listening, the participation of individuals, and the development of continuous and systematic institutional policies. These elements indicate that inclusion demands not only normative adjustments but also profound cultural transformations, based on the recognition of diversity, including neurodiversity as a constitutive value of the university.

In this context, the relevance of the articulation between structural and individual strategies for promoting accessibility becomes evident. Universal Design, by proposing the anticipation of human diversity in the planning of environments, services, and institutional practices, presents itself as a fundamental approach for overcoming structural barriers, shifting the focus from the adaptation of the individual to the transformation of organizational contexts. Complementarily, Assistive Technology addresses the specific needs of individuals, expanding their possibilities for participation, autonomy, and continued presence in the institutional environment.

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The integration of these perspectives reinforces the need for inclusion to be conceived in a systemic manner, coordinating preventive, structural, and individualized actions. Such an approach requires not only institutional investments but also a cultural shift that recognizes accessibility as a right rather than a concession, aligning with the principles of the social model of disability.

In this context, the importance of creating institutional support spaces tailored to neurodivergent staff members and designed with their specific needs in mind is particularly noteworthy. These spaces should include features such as environments with sensory regulation (with lighting and noise control), organizational predictability, access to qualified support, and continuous institutional backing, serving as concrete mechanisms for care, belonging, and the promotion of accessibility. Rather than isolated initiatives, such spaces can function as foundational strategies for consolidating inclusive practices within the institutional framework.

### 6.1 Institutional recommendations

**Table 3 – Institutional recommendations**

Based on the analyses conducted, possibilities for institutional action aimed at strengthening policies for the inclusion of neurodivergent staff within the institutional framework of Unifesspa have been identified. In light of this scenario, recommendations are presented, organized by levels of institutional implementation.

| Level of action | Institutional recommendations |
|---|---|
| Short term | Conducting training sessions on neurodiversity, attitudinal barriers, and ableism; creating institutional listening channels; making sensory environments more flexible at events and in administrative spaces. |
| Medium term | Implementation of institutional protocols for intake and continuous support; creation of sensory regulation spaces; ongoing training for managers and multidisciplinary teams. |
| Long term | Institutionalization of a permanent policy for the inclusion of neurodivergent employees; incorporation of Universal Design |

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| | |
|---|---|
| | principles into institutional practices; consolidation of occupational health and accessibility programs for employees. |

**Source:** prepared by the authors (2026)

This study has limitations related to the small number of participants and the fact that the research was conducted at a single public institution of higher education. Thus, the results do not claim statistical generalizability and should be understood within the specific context investigated. However, the findings address broader challenges related to inclusion, institutional accessibility, and the working conditions of neurodivergent staff in Brazilian higher education, enabling analytical comparisons with similar institutional contexts.

Given this context, the research does not seek to universalize the reported experiences, but rather to contribute to broadening the debate on inclusion, neurodiversity, and institutional management within public universities, highlighting the importance of developing permanent policies aimed at staff with disabilities and the multiple forms of diversity present in the workplace.

Thus, building a more inclusive university requires an ethical and political commitment to equity, accessibility, and social justice, coordinating institutional actions, organizational practices, and the active participation of individuals in overcoming the barriers that still limit the full inclusion of staff members with ASD.

Finally, it is hoped that the accounts presented here will contribute to fostering institutional practices that are more sensitive and committed to the inclusion of neurodivergent individuals, as well as encouraging new research that increases the visibility of these experiences. Giving a voice to these individuals constitutes a fundamental step toward building institutions and social relationships that are more inclusive and committed to human diversity.

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