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ASSESSMENT OF ACCESSIBILITY AND ASSISTIVE TECHNOLOGIES IN A PHYSIOTHERAPY PROGRAM IN LIGHT OF SDGS 4, 8 AND 16

AVALIAÇÃO DA ACESSIBILIDADE E DAS TECNOLOGIAS ASSISTIVAS EM UM CURSO DE FISIOTERAPIA À LUZ DOS ODS 4, 8 E 16

EVALUACIÓN DE LA ACCESIBILIDAD Y DE LAS TECNOLOGÍAS ASISTIVAS EN UN PROGRAMA DE FISIOTERAPIA A LA LUZ DE LOS ODS 4, 8 Y 16

Camila Dias Juscelino Alce[1], Josivaldo Godoy da Silva[2]

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ABSTRACT

This study assessed the availability and adequacy of assistive technologies (AT) and accessibility conditions in higher education environments within a Physiotherapy program at a partner university. Three laboratories and four classrooms were evaluated in relation to United Nations Sustainable Development Goals (SDGs) 4, 8, and 16. The study adopted a qualitative, exploratory, and descriptive approach based on a literature review and direct observation of the physical infrastructure of classrooms and laboratories. The Brazilian Inclusion Law (Law No. 13.146/2015) and ABNT NBR 9050:2020 were used as the main accessibility references. The analysis addressed architectural accessibility, the availability of assistive resources, and the adequacy of the environments to the needs of people with physical disabilities. The results showed that, despite legal and institutional advances toward inclusion, significant limitations and deficiencies persist in the provision of assistive technologies, potentially restricting mobility, autonomy, and participation in academic activities. Consequently, these deficiencies limit the program's alignment with the SDGs, particularly regarding inclusive education, equitable educational pathways, and effective institutions. The study concludes that improving physical accessibility and expanding the availability of assistive technologies in Physiotherapy programs are essential to promoting educational inclusion, equal opportunities, and the effective realization of the rights of people with disabilities in higher education.

KEYWORDS: *Assistive Technology. Accessibility. Physical Disability. Higher Education. Sustainable Development Goals.*

RESUMO

Este estudo analisou a disponibilidade e a adequação de tecnologias assistivas (TA) e as condições de acessibilidade em ambientes de ensino superior de um curso de Fisioterapia de uma universidade parceira. Foram avaliados três laboratórios e quatro salas de aula, considerando sua relação com os Objetivos de Desenvolvimento Sustentável (ODS) 4, 8 e 16 das Nações Unidas. A pesquisa caracterizou-se como qualitativa, exploratória e descritiva, baseada em revisão bibliográfica e observação direta da infraestrutura física das salas de aula e dos laboratórios, utilizando como principais referências de acessibilidade no Brasil a Lei Brasileira de Inclusão (Lei nº 13.146/2015) e a ABNT NBR 9050:2020. A análise abordou a acessibilidade arquitetônica, a disponibilidade de recursos assistivos e a adequação dos ambientes às necessidades das pessoas com deficiência física.

[1] UFMS, undergraduate student.
[2] UNESP, Master's degree and PhD in Automation.

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Os resultados demonstraram que, apesar dos avanços legais e institucionais voltados à inclusão, persistem limitações e deficiências significativas na disponibilização de tecnologias assistivas, configurando barreiras potenciais à mobilidade, autonomia e participação acadêmica de estudantes com deficiência física. Consequentemente, a ausência dessas tecnologias limita o alinhamento do curso aos ODS, especialmente quanto à educação inclusiva, às trajetórias formativas equitativas e às instituições eficazes. Conclui-se que ampliar a acessibilidade física e a disponibilidade de tecnologias assistivas em cursos de Fisioterapia é fundamental para promover inclusão educacional, igualdade de oportunidades e efetivação dos direitos das pessoas com deficiência no ensino superior.

PALAVRAS-CHAVE: Tecnologia Assistiva. Acessibilidade. Deficiência Física. Ensino Superior. Objetivos de Desenvolvimento Sustentável.

RESUMEN

Este estudio analizó la disponibilidad y adecuación de tecnologías asistivas (TA) y las condiciones de accesibilidad en entornos de educación superior de un programa de Fisioterapia de una universidad asociada. Se evaluaron tres laboratorios y cuatro aulas en relación con los Objetivos de Desarrollo Sostenible (ODS) 4, 8 y 16 de las Naciones Unidas. La investigación se caracterizó como cualitativa, exploratoria y descriptiva, basada en revisión bibliográfica y observación directa de la infraestructura física, utilizando como principales referencias de accesibilidad en Brasil la Ley Brasileña de Inclusión (Ley n.º 13.146/2015) y la ABNT NBR 9050:2020. El análisis abordó la accesibilidad arquitectónica, la disponibilidad de recursos asistivos y la adecuación de los entornos a las necesidades de las personas con discapacidad física. Los resultados mostraron que, pese a los avances legales e institucionales, persisten limitaciones significativas en la disponibilidad de tecnologías asistivas, que pueden restringir la movilidad, autonomía y participación académica. En consecuencia, estas deficiencias limitan la alineación del programa con los ODS. Se concluye que ampliar la accesibilidad física y la disponibilidad de tecnologías asistivas es fundamental para promover la inclusión educativa, la igualdad de oportunidades y los derechos de las personas con discapacidad en la educación superior.

***PALABRAS CLAVE**: Tecnología Asistiva. Accesibilidad. Discapacidad Física. Educación Superior. Objetivos de Desarrollo Sostenible.*

INTRODUCTION

The inclusion of people with disabilities in Brazil has advanced in recent decades but still faces significant structural challenges. According to the 2022 Brazilian Demographic Census, approximately 14.4 million people aged two years or older in Brazil had a disability, corresponding to 7.3% of this population (Instituto Brasileiro de Geografia e Estatística, 2025). Among this population, people with physical disabilities (PD) may require resources and accessible environments that support autonomy and social participation. In this context, assistive technologies (AT) play an important role in promoting inclusion and autonomy. Furthermore, accessibility and inclusion are directly related to the Sustainable Development Goals (SDGs) (United Nations, 2015), particularly SDGs 4, 8, and 16.

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In the educational context, inequalities remain evident. Data indicate that people with disabilities have lower levels of educational attainment and face barriers to participation and persistence in higher education, reflecting accessibility barriers and limitations in support services (Costas; Breitenbach; Castro, 2022). Although public policies such as the Brazilian Inclusion Law (Law No. 13.146/2015) (Brasil, 2015) and the Quota Law (Law No. 12.711/2012, as amended by Law No. 14.723/2023) (Brasil, 2023) have expanded access, structural barriers remain, particularly those related to physical accessibility and the availability of AT.

AT can be understood as a set of products, resources, strategies, practices, and services aimed at promoting functionality, autonomy, independence, and participation of people with disabilities (Brasil, 2015; Bastos *et al.*, 2023). In this study, emphasis is placed on AT and accessibility resources related to physical access, mobility, furniture, and the autonomous use of academic environments. Despite their relevance, access to AT in Brazil remains limited. Studies indicate difficulties related to the availability of resources, access to specialized services, and integration among public policies (Bastos *et al.*, 2023). Furthermore, limited access to appropriate technologies and difficulties in obtaining assistive products through the market or public programs represent additional barriers to inclusion (World Health Organization; United Nations Children's Fund, 2022).

Given this scenario, assessing AT and physical accessibility in university environments is important for understanding conditions that may affect autonomy, mobility, and participation of students with physical disabilities. In Physiotherapy education, accessible classrooms and laboratories are particularly relevant because these environments support both theoretical and practical learning activities. Identifying accessibility barriers and limitations in the availability of assistive resources may contribute to understanding the conditions encountered by students with physical disabilities in their academic activities. In addition, the findings may strengthen discussions on health promotion, inclusion, and well-being, highlighting the importance of more accessible educational environments. This study aimed to assess physical accessibility conditions and the availability of assistive technologies in classrooms and laboratories of a Physiotherapy program, relating the findings to SDGs 4, 8, and 16.

1. THEORETICAL FRAMEWORK

Accessibility is a fundamental element in promoting the social and educational inclusion of people with disabilities, particularly in higher education. The Brazilian Inclusion Law defines accessibility as the possibility of safely and autonomously using spaces, furniture, buildings,

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transportation, information, and communication systems and services by people with disabilities or reduced mobility (Brasil, 2015). Complementing this legal framework, ABNT NBR 9050 (ABNT, 2020) establishes technical parameters for accessibility in buildings, furniture, spaces, and equipment, providing a reference for identifying and eliminating architectural barriers.

Despite legislative and institutional advances, structural barriers may still restrict the autonomy and effective participation of students with physical disabilities in academic environments (Costas; Breitenbach; Castro, 2022). According to Sassaki (2010), inclusion involves not only access to educational spaces but also equal opportunities and full participation in the learning process. In this context, physical accessibility and AT represent complementary but distinct dimensions: accessible environments provide conditions for safe and autonomous use, whereas AT comprises resources and services intended to support functionality, autonomy, and participation of people with disabilities (Brasil, 2015).

The relationship between accessibility, AT, and the United Nations Sustainable Development Goals (SDGs) can be established through specific targets of the 2030 Agenda (United Nations, 2015). SDG 4 (Quality Education) is directly related to Target 4.a, which addresses inclusive, safe, and disability-sensitive educational facilities. This target supports the assessment of accessibility conditions in classrooms, laboratories, furniture, and circulation spaces because these elements influence access to and participation in educational activities.

SDG 8 (Decent Work and Economic Growth) is related to Target 8.5, which addresses productive employment, decent work, and equal opportunities, including for persons with disabilities. In the context of this study, this relationship is indirect because the evaluated environments are intended for professional education and training in Physiotherapy, while employment outcomes themselves were not assessed. Accessible academic environments and assistive resources may contribute to equitable conditions for professional training without being interpreted as direct measures of employment or labor-market outcomes.

SDG 16 (Peace, Justice and Strong Institutions) is considered through Targets 16.6 and 16.7, which address effective and accountable institutions and inclusive and participatory decision-making, respectively. In higher education, institutional inclusion requires conditions that allow people with disabilities to access and participate in academic environments and activities. Therefore, accessibility barriers and limitations in assistive resources may indicate institutional conditions that restrict equitable participation. However, the official indicators associated with these targets do not directly measure architectural accessibility or AT; thus, SDG 16 is used as an institutional reference rather than as a direct accessibility measure.

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Within this framework, Physiotherapy education is particularly relevant because classrooms and laboratories support theoretical and practical professional training. Assessing their physical accessibility and the availability of assistive resources allows the identified conditions to be discussed in relation to inclusive education, equitable professional training, and institutional inclusion, while maintaining the distinct scope of SDGs 4, 8, and 16.

2. METHODOLOGY

This study was characterized as qualitative, exploratory, and descriptive research aimed at assessing the presence and adequacy of AT and accessibility conditions in the Physiotherapy facilities of a partner university of the Federal University of Mato Grosso do Sul (UFMS). This approach was adopted to examine accessibility and inclusion considering structural, functional, and institutional aspects.

Initially, a supporting narrative literature review was conducted on the UN SDGs, Brazilian technical standards, particularly ABNT NBR 9050:2020, and scientific and technical literature related to accessibility, AT, sustainability, and inclusion in higher education. The sources consulted included the Scientific Electronic Library Online (SciELO), CAPES Journal Portal, Web of Science (WoS), PubMed, and reports from the Brazilian Institute of Geography and Statistics (IBGE). The search was conducted from September to October 2025 and included 25 scientific articles, in addition to normative documents and institutional reports, which provided theoretical support for the study.

Field data were collected in two stages. In November 2025, four classrooms, restrooms, and common areas were assessed. The four classrooms were selected because they presented similar structural characteristics, furniture arrangements, and spatial organization and were therefore considered representative of the conditions observed in the block. In March 2026, three laboratories were assessed: the Emergency Thematic Laboratory (LTU), Nursing Skills Laboratory (LHE), and Therapeutic Resources and Manual Therapy Laboratory. The assessment included direct observation of physical accessibility conditions, the availability of AT and accessible resources, and the adequacy of the environments for people with physical disabilities (PD). The elevator remained unavailable throughout the field assessment period.

Data collection and documentation were performed using a 5 m measuring tape, a 1 m measuring tape, a measuring ruler with a level, and a Samsung S23 smartphone for photographic records. Each dimensional item was measured twice to confirm the recorded value and reduce measurement errors.

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The assessment checklist was developed specifically for this study based on ABNT NBR 9050:2020 and the theoretical framework concerning AT, physical accessibility, functionality, autonomy, and inclusion. The assessment checklist included the accessibility dimension, item assessed, applicable normative criterion, observed or measured condition, and compliance classification.

Compliance was classified as YES when the observed or measured condition met the applicable criteria and NO when it did not meet the applicable criteria or when a required accessibility feature was absent.

The results were analyzed descriptively and comparatively to identify accessibility limitations and differences among the evaluated environments. The assessed items were subsequently related to SDGs 4, 8, and 16 according to their function and the scope of the study. Conditions related to educational access and participation were associated with Target 4.a; professional training and accessible learning environments with Target 8.5; and institutional accessibility and participation with Targets 16.6 and 16.7. These associations were analytical, and the official SDG indicators were used as references rather than directly measured outcomes.

3. RESULTS AND DISCUSSION

This section presents the results of the assessment of accessibility conditions and assistive technologies (AT) in the surveyed environments. The data were organized in tables and analyzed according to the applicable criteria of ABNT NBR 9050:2020 (ABNT, 2020) and their relationship with SDGs 4, 8, and 16.

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Table 1. Analyzed location: Physiotherapy Block, classrooms and public environments

SDG	ANALYSIS				
	Accessibility dimensions	**Item assessed**	**Normative criterion**	**Observed result**	**Compliance**
4	Architectural accessibility - vertical circulation	Elevator dimensions	ABNT NBR 9050:2020 6.10.2.1; ABNT NBR NM 313: accessible elevator dimensions	Cabin and door dimensions met the adopted dimensional criteria	YES
4	Architectural accessibility – vertical circulation	Elevator availability	ABNT NBR 9050:2020, 6.10.2: accessible vertical circulation must be provided	Elevator remained unavailable throughout the field assessment period	NO
4	Architectural accessibility – circulation	Floor covering	ABNT NBR 9050:2020, 6.3.2 and 6.3.4.1: regular, firm, stable, non-slip surface; level differences ≤ 5 mm require no special treatment	Floor covering met the assessed requirements	YES
4	Accessible furniture	Desks and tables	ABNT NBR 9050:2020, 9.3.1.3–9.3.1.4: tabletop width ≥ 0.90 m; height 0.75–0.85 m; clear width ≥ 0.80 m; clear height ≥ 0.73 m; clear depth ≥ 0.50 m	Conventional desks did not meet the accessibility requirements	NO
8	Architectural accessibility – access	Entrance to the building	ABNT NBR 9050:2020, Section 6: level differences along the accessible route must be overcome by accessible circulation elements	Accessible entrance provided	YES

Table 2. Analyzed location: Emergency Thematic Laboratory (LTU)

SDG	ANALYSIS				
	Accessibility dimensions	**Item assessed**	**Normative criterion**	**Observed result**	**Compliance**
8	Accessible furniture	Work table	ABNT NBR 9050:2020, 9.3.1.2–9.3.1.4: frontal wheelchair approach; tabletop height 0.75–0.85 m; clear width ≥ 0.80 m; clear height ≥ 0.73 m; clear depth ≥ 0.50 m	No accessible work table meeting the assessed requirements was identified	NO
8	Accessible furniture	Adapted seat	Accessibility and safe-use criteria adopted in the assessment instrument	No adapted seat meeting the assessed requirements was identified	NO

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Table 3. Analyzed location: Nursing Skills Laboratory (LHE)

SDG	ANALYSIS				
	Accessibility dimensions	**Item assessed**	**Normative criterion**	**Observed result**	**Compliance**
4	Accessible furniture	Laboratory workbench	ABNT NBR 9050:2020, 9.3.1.2–9.3.1.4: frontal wheelchair approach; tabletop height 0.75–0.85 m; clear width ≥ 0.80 m; clear height ≥ 0.73 m; clear depth ≥ 0.50 m	Workbench did not meet the assessed accessibility requirements	NO
4	Accessible fixtures and controls	Faucets and controls	ABNT NBR 9050:2020, 7.8.2: accessible faucets operated by lever, electronic sensor, or equivalent device	Faucets required rotational operation	NO

Table 4. Analyzed location: Therapeutic Resources and Manual Therapy Laboratory

SDG	ANALYSIS				
	Accessibility dimensions	**Item assessed**	**Normative criterion**	**Observed result**	**Compliance**
8	Accessible furniture	Work table	ABNT NBR 9050:2020, 9.3.1.2–9.3.1.4: frontal wheelchair approach; tabletop height 0.75–0.85 m; clear width ≥ 0.80 m; clear height ≥ 0.73 m; clear depth ≥ 0.50 m	No accessible work table meeting the assessed requirements was identified	NO
8	Accessible furniture	Adapted seat	Accessibility and safe-use criteria adopted in the assessment instrument	No adapted seat meeting the assessed requirements was identified	NO

Regarding the common areas of the Physiotherapy block, access to the building is provided by ramps, while the assessed corridors, water fountains, and floor coverings complied with the applicable accessibility criteria of ABNT NBR 9050:2020 (ABNT, 2020). However, the existing furniture did not meet the assessed accessibility requirements for users with physical disabilities (PD). Furthermore, although the block has two floors connected by stairs and an elevator, the elevator remained unavailable throughout the field assessment period, representing a potential barrier to autonomous access to the upper floor. Figures 1 and 2 illustrate these findings. These results indicate that compliance with isolated architectural requirements does not ensure complete accessibility when accessible circulation resources are unavailable, reinforcing the importance of safe and autonomous use of spaces (Brasil, 2015).

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Figure 1. Ground floor water fountain follows accessibility guidelines



Source: Authors (2026).

Figure 2. Block elevator out of service during the analysis period



Source: Authors (2026).

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The classroom assessment showed that the existing student desks were designed for general use, with no accessible furniture available for students with PD, as shown in Figure 3. The high density of desks also reduced the space available for circulation and wheelchair maneuvering, representing a potential barrier to autonomous participation in classroom activities. Tables meeting the assessed dimensional accessibility requirements were identified; however, they were intended exclusively for teachers. These findings demonstrate that accessibility depends not only on the presence of appropriate furniture but also on its availability to students, consistent with the principles of equitable participation in higher education (Sassaki, 2010; Costas; Breitenbach; Castro, 2022).

Figure 3. Standard desks used in the Physiotherapy block. Yellow numerical annotations indicate dimensional measurements obtained during the field assessment, expressed in centimeters.



Source: Authors (2026).

Regarding the restrooms, the block has facilities designated for use by people with disabilities, with appropriate dimensions, grab bars, and accessible mirrors, partially meeting the applicable requirements of ABNT NBR 9050:2020 (ABNT, 2020). However, the sink faucet

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required rotational operation, which did not meet the assessed accessibility criterion and may represent a barrier for users with upper-limb motor limitations. Figure 4 illustrates this condition. Therefore, the presence of accessible facilities does not necessarily ensure complete functional accessibility when individual components may limit independent use.

Figure 4. Accessible restroom with a twist-action sink



Source: Authors (2026).

The assessment of the three laboratories identified furniture designed for general use, insufficient space for wheelchair circulation and maneuvering, and workbenches that did not meet the assessed dimensional accessibility requirements of ABNT NBR 9050:2020 (ABNT, 2020). These conditions may restrict the autonomous use of laboratory spaces by people with PD. Figures 5 and 6 illustrate the furniture and spatial conditions observed in the Emergency Thematic Laboratory (LTU) and Nursing Skills Laboratory (LHE), respectively. These barriers are particularly relevant in Physiotherapy education because practical activities require the use of workstations, furniture, and laboratory spaces, and inadequate accessibility conditions may create barriers to autonomous participation in practical training (Costas; Breitenbach; Castro, 2022; Bastos *et al.*, 2023).

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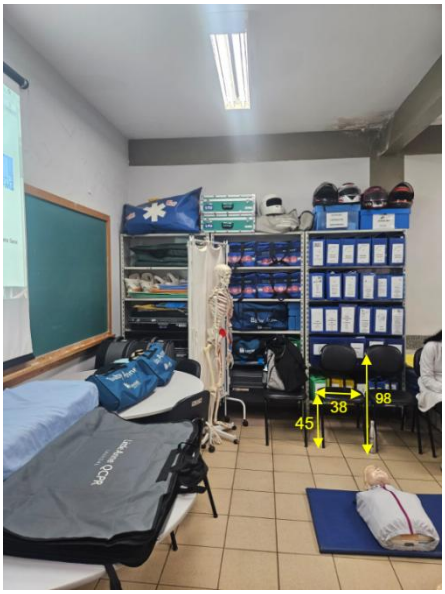
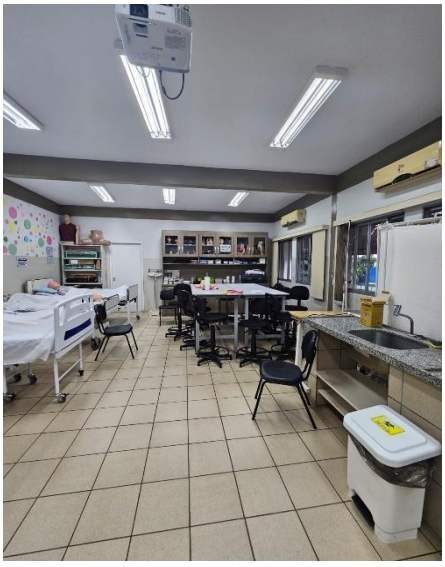
Figure 5. Laboratory furniture and circulation space assessed during the field evaluation. Yellow numerical annotations indicate dimensional measurements obtained during the field assessment, expressed in centimeters.



Source: Authors (2026).

Figure 6. Laboratory with furniture and benches not in compliance with the standard



Source: Authors (2026).

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Overall, the findings demonstrate that accessibility depends on the combined adequacy, availability, and functionality of architectural elements and accessible resources. Although some assessed elements complied with accessibility requirements, limitations in vertical access, classroom furniture, restrooms, and laboratory environments may create barriers to autonomous participation. These findings reinforce the need for institutional actions that address accessibility as an integrated condition for educational inclusion (Costas; Breitenbach; Castro, 2022; Bastos *et al.*, 2023).

4. CONCLUSION

The results demonstrated that the evaluated environment still presents significant limitations regarding accessibility and the availability of AT for people with physical disabilities (PD), particularly in relation to mobility. Although some structural accessibility requirements were met, limitations in furniture, circulation areas, laboratory equipment, and the functionality of accessible resources may restrict autonomy and participation in academic activities.

Regarding the SDGs, the identified barriers highlight challenges to inclusive and equitable education (SDG 4), academic and professional development (SDG 8), and inclusive and accessible institutions (SDG 16). Therefore, improving accessibility and AT provision in higher education may contribute to greater alignment with these goals.

These findings are particularly relevant to Physiotherapy education, a field directly related to functionality, mobility, independence, and rehabilitation. Providing accessible training environments is important for promoting inclusion and strengthening the coherence between professional training and accessibility principles.

This study was limited to selected environments within a single university block and focused primarily on accessibility conditions related to physical disabilities and mobility. Students with disabilities did not participate directly, and sensory, intellectual, and multiple disabilities were not assessed. Therefore, the findings do not allow inferences about effects on academic persistence or other student outcomes. In addition, some observed conditions, particularly the unavailability of the elevator, may have been temporary. Future studies should include other academic environments, different types of disabilities, and the perspectives of students and institutional sectors responsible for accessibility and inclusion.

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