

LEISURE AND DISABILITY: A DIALOGUE WITH DISABILITY STUDIES**Received on:** February 18, 2025**Passed on:** June 04, 2025License: *André Luís Normanton Beltrame¹*

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ABSTRACT: This essay seeks to reflect on the meaning given to leisure for people with disabilities. To this end, it addresses the approximation between leisure studies and the London movement of Disability Studies. After discussing a brief history of this activist and academic movement and the mark of its studies, recognized as the construction of a counterpoint to the biological interpretation of disability, it intersects its trajectory with the field of critical development of leisure and the expectations that configure its access. The study, while pointing out the situation of anomie and passivity of people with disabilities in the face of decisions that concern them, defends the need for a collective scenario that faces the aesthetic and social barriers created, providing opportunities for the active participation of voice and recognized and respected interests.

KEYWORDS: Leisure. Disability. Disability studies.

LAZER E DEFICIÊNCIA: UM DIÁLOGO COM OS DISABILITY STUDIES

RESUMO: O presente ensaio procura refletir acerca do sentido dado ao lazer às pessoas com deficiência. Aborda, para tanto, a aproximação entre os estudos do lazer e o movimento londrino dos *Disability Studies*. Após discorrer acerca de um breve histórico acerca deste movimento ativista e acadêmico e a marca de seus estudos, reconhecida como a construção de um contraponto à interpretação biológica da deficiência, entrecruza sua trajetória ao campo do desenvolvimento crítico do lazer e as expectativas que configuram seu acesso. O estudo, ao mesmo tempo em que aponta situação de anomia e passividade das pessoas com deficiência frente as decisões que lhes dizem respeito, defende a necessidade de um cenário coletivo que enfrente as barreiras estéticas e sociais criadas, oportunizando a participação ativa de voz e interesses reconhecidos e respeitados

PALAVRAS-CHAVE: Lazer. Deficiência. *Disability studies*.

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Introduction

The attempt to understand the phenomenon of leisure from the perspective of specific social groups leads us to search for elements that help identify the limits and possibilities of this human need. This exercise, undertaken in this direction, aims to foster potential dialogues and their economic, social, political, and historical implications, allowing us to understand how this field of social life manifests itself to a particular segment of the population.

Considering disability² from this perspective, we are faced with a complex concept that, beyond the organic impairment, involves a disadvantage resulting from material and symbolic production, compromising the full existence of the disabled person in society (DINIZ 2007; OLIVER, 1998; BRASIL, 2009). It is recognized, stemming from this perspective, that there is a structural apparatus where the experience of a disabled person is lived under a process of division and social marginalization when compared to a person without a disability³.

On the phenomenal and empirical level, the starting point for understanding the structure and dynamics of the object being researched, certain conditions define the recognition of leisure as a space for cultural experience and production for this audience. Both a cultural industry historically marked by stereotypes (BARNES, 1992; SHAKESPEARE, 1994; FARIA, CASOTTI, 2014), and an inaccessible conception of cities (GLEESON, 1999; KAPSALIS, JAGER, HALE, 2024), in addition to the low

²This paper is in accordance with Article 1 of the Convention on the Rights of Persons with Disabilities, which highlights the individual in relation to their disability. Similarly, its definition states: "Persons with disabilities are those who have physical, mental, intellectual or sensory impairments which, in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others".

³ According to WHO, it is estimated that 16% of the world's population lives with some type of disability, having less access to health, education, employment, transportation and information, when compared to people without disabilities (WHO, 2022). In Brazil, the Continuous National Household Sample Survey – PNAD (BRASIL, 2022) points out, among other issues, the following comparative data between people with disabilities and people without disabilities: high illiteracy rate, 19.5% to 4.1%; low employment level, 26.6% to 60.7%; and low participation in the workforce, with 29.2% to 66.4%.

insertion in the labor market (ROSA, 2009; GARCIA, 2010), lead us to reflect on why this happens.

To that end, this study seeks to critically re-examine the configurations of both leisure and the interpretation of disability. Both were formed from an industrial society that carries with it a strong functionalist bias. For leisure, characterizing the occupation of free time controlled by the owners of the means of production (MARCASSA, 2010; MUNNÉ, CODINA, 1996; PADILHA, 1992; 2010; MASCARENHAS, 2005; AITCHISON, 2009). And, regarding disability, understanding it as an object of discursive formation, parallel to a structural modification of social relations based on work, which underlies the idea of spaces of confinement. Something that, in turn, builds and reinforces an identity geared towards an inability to belong to society (OLIVER, 1998).

The initial debate, when taking this approach, revolves around the following questions: if, from a functionalist point of view, leisure has the “function of restoring order and unity and maintaining social peace when work, by chance, fails to fulfill its role” (PADILHA, 1992, p.3); what about those who historically have difficulty belonging to the productive system? Similarly, what demands and struggles appear in the trajectory of citizenship and access to leisure for this population?

According to some theorists in Disability Studies, society's shift towards a moral status of work forms the basis for discriminatory and exploitative attitudes that exclude people with disabilities from community life. This stems from a hegemonic way of interpreting disability, the so-called “medical model” or “individual model”. It inaugurates not only the idea of the abnormal, but also an enunciative system, based on science, that determines the cure or correction in solution to something that needs to be corrected. In the shadow of this point of view, a trajectory is established in which the

experience of the disabled body comes to occupy the margins of hierarchical power relations (FINKELSTEIN, 1980; OLIVER, 1998; 2013).

The problematic nature of this understanding leads to guidelines for the use of free time that are besieged by a utilitarian perspective and that only recognize the body as belonging to the productive sector. Free time, considered an accessory to work, symbolically and morally carries the idea of a right to leisure for the few. In this case, the disability presents an enormous risk to its enjoyment, which is geared towards pleasure and guided by play, since it is a construct based on biological, not social, interpretative principles. Therefore, there is a need to highlight and seek answers to the submissive position of this social group in power relations, since its productive and participatory capacity in this process is being questioned.

Therefore, the importance of bringing this group into the discussion lies in understanding and recognizing the capacity of the person with a disability to have a voice and a leading role in matters that concern them. The representativeness of the London group is related to its prominence and activism, especially political, since the 1970s, in studies developed at the Centre of Disability at Leeds University, England. What these intellectuals bring is linked to what they have perceived in their lives and studies, translated into the field of the sociology of disability. Basically, it refers to the fact that the disability itself overshadowed the person, so that they were not heard in what they had to say, only receiving what other people did for them.

The core thesis of their proposal opposes a hegemonic discursive field that has been treating people with disabilities solely through the lens of impairment. This field, supported by clinical and biophysical scientific arguments, ended up making the subject a victim of an oppressive social system based on the normalization of the body. Therefore, regarding the framework of this debate, the objective of this text is to reflect

on the meaning given to leisure by people with disabilities, bringing to this end the connection between leisure studies and the London-based Disability Studies movement.

In order to accomplish this task, the work will be presented along three axes. The first, by historicizing the socio-historical construction of disability. This section introduces some mechanisms of this complex universe of understanding, through the materialist basis of the theory of social oppression. In the second part, highlighting the phenomenon of leisure and its historical roots linked to work, elements of the configuration of leisure for people with disabilities are presented from a functionalist perspective. Finally, from a critical perspective, some contradictions in the interpretations that still remain in actions within the field will be addressed, along with perspectives that enable participation and the exercise of citizenship through leisure activities.

Disability Studies: From the Emergence to the Construction of the Social Model for Interpreting Disability

According to Abberley (1987), the first scholars of what would become Disability Studies were institutionalized disabled individuals with some type of physical disability. One of these theorists was Paul Hunt, who began his activism by leading a group of residents at an institution for the physically disabled in England called Le Home Court Cheshire. Hunt says that the demand was aimed at having more freedom and representation in decision-making processes within their residential environment; “to choose our bedtime, to drink alcohol, freedom to socialize and have sex without interference, freedom to leave the building without having to notify the authorities” (HUNT, 1981, p.38, our translation).

What seemed like a sustainable demand, from the point of view of the

individual's autonomy, without having to depend on others and their excessive surveillance, took on contours contrary to what was being advocated (which was to give greater freedom to the person with a disability). When professionals Eric Miller and Geraldine Gwynne were assigned to assist with this claim, a study was conducted and its findings were subsequently published. The study, titled "A Life Apart", which sought to discuss issues related to people living in institutionalized environments, advocated that change should occur in the organizational process and in the improvement of those who care for them. In this sense, people with physical disabilities should recognize their limitations, which ended up reinforcing the prerogatives of segregation and dependence questioned earlier (HUNT, 1981).

By ignoring the context in which disability is a product of society and not the fault of the individual experiencing the impairment, forcing the person to "accept" it, responses to the document emerge. Therefore, in contrast to *A Life Apart*, Paul Hunt published a collection in 1966 entitled *Stigma: The Experience of Disability*, denouncing the process of stigma experienced in the daily lives of people with disabilities. In 1972, she also published a letter to the English newspaper "The Guardian," urging people to mobilize around the causes of people with disabilities.

Based on these interpretative guidelines, and amidst the effervescence of what had already emerged in the 1960s in the United Kingdom and the United States⁴, from the first debates on what would come to be known as the Social Model, groups and literature on the subject were organized. From this repercussion, in 1976, the Union of the Physically Impaired Against Segregation (UPIAS) emerged in the United Kingdom, with the objectives of restoring opportunities for people with disabilities, as well as: "full participation in society, to live independently, to take ownership of productive

⁴ In the United States, this claim is made by the movement called The Movement of Independent Living – ILM, which was established at the University of Berkeley, California.

work and to have full control of their own lives" (SHAKESPEARE, 2014, p.211, our translation). One of the first organizations formed exclusively by people with disabilities, UPIAS included sociologists Victor Finkelstein, who had a physical disability and a Marxist background, and had been exiled in England for being an activist against Apartheid; Paul Abberley, who had polio and realized how, as a sociologist, he had little to say about experiences related to disability; Colin Barnes, who had low vision and was professor emeritus of disability studies; and Mike Oliver, a quadriplegic who campaigned for social changes in its different spheres (economic, political, social and cultural) as conditions for improving the lives of people with disabilities (OLIVER, 1998).

This latter work, in the first scientific publication of UPIAS (Fundamental Principles of Disability), explores, in one of the first forays into the subject, the interpretation of disability consolidated in the publications of the World Health Organization (WHO). Something fundamental to the constitution of the movement, relating to the International Classification of Impairments, Disabilities and Handicaps (ICIDH), in the 1980s (WHO, 1980). The so-called Individual Model, considering its different names (Medical Model, Rehabilitation Model, Deficit Model, Medical-Psychological Model), has become the object of criticism. According to the author, the publication brings to the discussion the treatment of disability as a disease, since it interprets the association or result as a consequence.

This way of interpreting disability can be better explained by the document compiled in the 1970s and published in the following decade by WHO, which remained in effect until 2001. Its internal structuring logic follows a linear pattern, exemplified in the following sequence (in Portuguese): Disorder or Disease; Disability; Incapacity and Disadvantage, respectively):

Figure 1: Linear structure of CIDID.



Source: World Health Organization (WHO, 1980, p.11).

According to the ICIDH, Disability is defined as any abnormality or loss relating to body structure or organ or system function, resulting from any cause; Impairment, reflecting the consequences of disability, represents a functional restriction beyond what is considered normal for a human being; and Handicap is the result of perceived impairment, reflecting parameters that limit or prevent the performance of a function that would be normal in relation to the individual's adaptation to their surroundings (WHO, 1980).

The counter-argument focuses on the blame-laden nature of the Individual Model, as in a “personal tragedy theory,” which can only be evaluated within the domain of medical knowledge, invariably leading towards treatment and medicalization. In this way of interpreting disability, which is hegemonic in society, there is a cause-and-effect relationship in its constitution. The deficiency that justifies the individual's inability to fully belong to society.

The interpretation developed from the Social Model argued that limitations caused by disabilities should not be considered the fault of those who had them. But, on the contrary, it is the fault of society that has not kept up with the need for changes in its ways of proceeding, meaning everything from architectural, productive and accessibility issues to attitudinal procedures for conceiving them together with other people (OLIVER, 1996).

It is therefore a critical theory that discusses the problems faced by people with

disabilities as a result of social inequality, suggesting that solutions must be addressed through changes at the social level. It is also worth noting the interpretation of the term stigma when used by some of its authors, most notably Abberley (1987), Oliver (1996) and Finkelstein (1996). In this field, there is a disagreement with what Erving Goffman postulated in his work "Stigma." Notes on the Manipulation of Spoiled Identity" (1988). The denial lies in what Goffman proposes to consider the equation, in terms of social acceptance, between moral status and the marked, stigmatized individual. The evidence that, from the moment the derogatory attributes of the stigmatized person are already evident in social interaction, the individual "ends up becoming a discredited person in the face of an unreceptive world" (1988, p. 28), is contested by the authors. This occurs to the extent that there is an inability to appreciate the materiality of social practices. The answer to this lies in a situation of oppression to which the person with a disability would initially be subjected. Thus, the material relations of existence within the capitalist mode of production corroborate this thesis, which portrays deficiency as a shadow of efficiency in the production relationship and extends to access to and enjoyment of social goods. Relational issues do exist, however, and would be a consequence of this exploration.

Thus, given the new conception, based on challenging society itself, which imposed a condition of normality to be followed, this model is directed towards the socio-political field, with proposals and solutions to combat discrimination. According to Oliver (1998), there is a radical aspect to this model, which is also characterized as a theory of social oppression, since it believes that society has failed to adapt to diversity, transferring this responsibility to the bodily limitations of individuals.

Abberley (1987), in this context, when discussing the concept of oppression along with the social origins of this model, highlights some arguments relevant to its

understanding. Initially, it refers to the oppression suffered by people with disabilities, and that the body and its physical and biological nature in themselves do not explain socio-historical issues. It argues that the injury in this case should not be confused with a disability, but rather a historical error of such an association that has built social barriers preventing people with disabilities from expressing their abilities, a situation in which they find themselves in an inferior position to other members of society.

Subsequently, the disadvantages they end up facing are dialectically related to a set of ideologies that underpin this situation. It groups both statements together, pointing out that neither disadvantage nor ideology are natural or inevitable; they are a sociological phenomenon, which justifies its work from this point of view – not only focused on rehabilitative medicine and the therapeutic universe. Finally, he concludes that embracing disability from this perspective, removing its origins from nature and recognizing the effects of poor social distribution, leads to transformation. In the sense of a political conception that involves the material and ideological defense of the State “as an essential condition for transforming the lives of a vast majority of people with disabilities” (ABBERLEY, 1987, p.17, our translation).

From what has been presented, it can be observed that UPIAS, in addition to its contradictory stance towards the treatment and analysis of disability by its predecessors, develops significant theoretical proposals for a new discursive field. By systematizing sociological theories about disability within the academic sphere, and by linking them to other movements such as the ILM⁵, a new field of study known as Disability Studies is being consolidated.

⁵ There are differences between the North-American and English movements (ILM and UPIAS) that are not addressed in the text. The first (ILM) focuses its actions on political campaigns for civil rights, seeking to be a protagonist in activities that concern it; however, from a functionalist perspective, they seek to be part of consumer society. The second (UPIAS) adopts critical and emancipatory theory in its guidelines, criticizing the way in which capitalist society has treated them, seeking to generate changes in social policy and human rights legislation (PALACIOS, BARIFFI, 2007).

Disability Studies, therefore, emerged with this direction: to explore, from a political and cultural perspective, issues related to a sociology of disability. This new field of knowledge had its term coined back in the 1970s, due to the first postgraduate course in the conception of the social model of disability, carried out by the University of Kent (DINIZ, 2007). They moved from isolated debates to the international academic universe throughout the 1980s and 1990s through various initiatives, such as: the distance learning undergraduate course entitled "The Disabled Person in the Community," offered by the Open University of the United Kingdom (BARNES; OLIVER; BARTON, 2002); the journal, created in 1986, Disability Handicap and Society, currently Disability and Society, which houses studies and debates developed in this area (DINIZ, 2007; BARNES, 2010); and also, through their leading role in the revision that moved from the individual model to the biopsychosocial model of understanding disability, in 2001.

Upon reaching this point, where discussing disability takes on a political connotation, brought about by the emancipatory nature of Disability Studies, this text embraces the idea of bringing leisure into the analysis in order to engage with these studies. Next, using the functionalist framework as a point of convergence, initial elements of a leisure configuration for this audience will be presented, as well as limitations in their experience.

Leisure as a Counterpoint to Work: The Space Occupied by Disability

To say that disability is a category produced by capitalist society in a particular way implies a worldview where it is understood that the production of the category of disability is not at all different from the production of automobiles or hamburgers. Moreover, each has an industry, be it cars, fast food or the human services sector, and each industry has a workforce that has an interest in the production of its products and in controlling the production process (OLIVER, 1999, p.2, our translation).

By stating that “disability is a category produced by capitalist society,” Mike Oliver brings a materialist analytical perspective to the field of Disability Studies. Based on the explanation of phenomena as a result of material interactions, the parallel drawn relates to the idea that with the advancement of capitalism, a greater individualization of man has begun. Essentially, economic and social forces transform the nature of work and its necessity for the life of society. In such a way that the system of exploitation of the workforce creates a normalization of the body, a labor requirement; causing those who do not belong to the circle of production to live in a situation of oppression and injustice (OLIVER, 1999, 2013).

From this perspective, medical interpretation aligns with industry and the interests of capital, as individuals with disabilities (associated with illness and incapacity) come to be seen as incapable in the context of productive work, becoming targets of social exclusion (in institutions or other means of social control). According to some authors in Disability Studies, in a sociological approach to functionalist thinking, the idea of social determinants is observed in the association of “illness and disability” through hygienist medicine, economics, and politics.

In other words, something translated into a consensus where illness would be a social state and medical authority the system that would control that social state (BARNES, MERCER, SHAKESPEARE, 1999; OLIVER, 1996, 1998; ABBERLEY, 1987). According to Barnes, Mercer, and Shakespeare (1999), analyzing points of structural functionalism in Talcott Parsons, the emphasis is on his acceptance of medical authority as legitimate and its function of social control for the efficient development of society. As a result, “medicalization” becomes established as the dominant argument. A common and balanced understanding is then built for social development, cementing particular forms of occupational control. According to the authors, this issue is

associated with state sponsorship, with orthodox medicine occupying a prominent position; in which doctors are placed at the center of the administrative-legal system, within the social assistance system, managing processes for sickness and disability benefits.

Oliver (1996) highlights the functionalist view as hegemonic throughout the 20th century, serving to maintain the *status quo*. An established order where difference, as seen in people with disabilities, becomes a territory for state control and expenditure. According to Oliver:

“The functionalist influence emphasizes the role of medicine in healing and maintaining the 'normal' functioning of individuals and society. In this model, the 'patient role' involves being in agreement with the desire to get well. This can make people with incurable conditions, including people with disabilities who are classified as ill, appear deviant. The link between disability and social deviance, as influenced by functionalism, points to healthcare and research and supports the continued development of professionally managed health and well-being services for people with disabilities. Thus, under the current social security agreements, more than 70% of the expenses are allocated to the salaries of professionals who work with people with disabilities” (OLIVER 1998, p.1448, our translation).

According to the author, from a functionalist point of view, medicine controls the deficiency. The classification of what is considered “normal” or not brings defining traits of what is marked as deviant for a person with a disability. Furthermore, the medical field manages health and welfare services, as well as government aid spending. However, somehow, the author adds (from the English observatory to the end of the 1990s) that recently the issue of social security has been reduced through collective financing undertaken by people with disabilities⁶. From what remains, it is pointed out that the pursuit of an independent life has, in the normalization process, an underlying discourse of functionalism, when doctors, for example, try to use their knowledge and skills to treat the disability instead of the disease.

⁶Pension spending on people with disabilities has been a questioned issue for some time now. In Brazil, the current government intends to tighten the rules for the Continuous Benefit Payment (BPC), granted to more than 4 million Brazilians. Among them, largely, are people with disabilities who are unable to support themselves independently. Available at:<https://www.camara.leg.br/noticias/1125220-lei-que-endurece-regras-do-bpc-e-spcionada-com-veto/>. Accessed on: February 6, 2025.

Under the sign of this productive rationality and of what is constructed or reinforced, in terms of control over those who do not belong to labor production, leisure comes to represent an institution within the social system, serving a set of common values. In other words, from a functionalist perspective, it serves the functions of both the individual and the social system as a whole. It can be said that leisure ends up acting in accordance with established rules and thus materialized: a release valve for stress, a compensator for some of life's issues, and an organizer of teamwork, for example. According to Padilha, upon closer examination, this perspective linked to leisure has the following conception (2010, p.69):

According to the functionalist framework, leisure is conceived as a solution, a remedy for social ills, a redemption for the worker. The social causes for the problems to be compensated for by leisure are not questioned, since what matters to the bureaucracy is maintaining order and social balance. Therefore, work is the problem and leisure is the solution, violence is the problem, the police are the solution, and so on (PADILHA, 2010, p. 69).

Based on what has been presented, in which leisure occupies a space in opposition to work, and ends up achieving central importance in social dynamics, society and individuals are urged to share the same values within the scope of the parts that make up the system. A whole interpretation and performance model is assumed, in order to transmit impressions to others and constitute socially accepted attributes. In the realm of appearances, expectations regarding the body and its expressiveness are inevitably established and materialized.

The problem then arises both in the interaction of entertainment practices as a compensatory and accessory element of work, and in the meanings socially constructed for those who, for some reason, did not belong to the production process. Upon entering this area, we begin to discuss not only the clash between moral and ethical ideals related to work and consumption, but also the space allocated to those who do not belong to the sphere of work.

While the process of societal normalization⁷ is underway, between the conditioning of those who produced and the control of those who did not fit into the production process, two distinct paths of recognition of free time are being explored. The first relates to a mass of workers who establish a direct relationship with the process of expanding consumption, including consumption related to leisure. And the second, related not in absolute terms (that only disabled people were part of them), but to those who constituted the proletarian masses, a product of the contradictions of capitalism and its market.

For the workers, subject matter to this **first** approach, theaters, taverns, and coffee houses alternate with the long working hours for the working class and the bourgeois class, in addition to presenting themselves as new spaces of sociability for different social classes. In this context, when workers organized themselves, they faced religious and legal opposition regarding the use of their free time. Based on the prevailing norms, customs, and production model, their freedom was feared in the face of the constraints imposed by factory work.

According to Melo (2010, p. 35) “Popular amusements were seen as potentially dangerous because they were considered disruptive to order, as they opposed the logic of exhausting work” and also “old lifestyles that needed to be combated.” What was at stake, beyond the drop in production, was the fear that the working classes would spiral out of control, since they worked up to 16 hours a day without any labor protection measures, and were fundamental to the production process. However, from labor exploitation to the struggle for regulation of the daily work schedule, vacations, and weekends, free time ends up becoming one of the fundamental points in the discussions

⁷Although work has been the focus of this analysis, it can be inferred that normalization is not established solely by work itself, but by a set of values attributed by modernity that establish a relationship of subordination between groups. Here are some examples: Evolutionary theory of Charles Darwin (1809-1882); Theory of heredity of Gregor Mendel (1822-1884) and Theories on Eugenics with Francis Galton (1822-1911).

of the working class in the 19th century. With the establishment of the eight-hour workday, eight-hour rest period, and eight-hour leisure time, ratified in 1919 by the International Labour Organization, new changes are emerging regarding free time and its relationship to leisure.

Understanding that the acquisition of free time linked to work organizes people's social time, the culture industry presents itself as one of the first institutions, followed by the leisure industry, which reiterates the dynamics of the needs and skills of capital. In terms of efficiency, cost reduction, and increased productivity, Taylorism/Fordism, conceived by engineer Frederick W. Taylor (1856-1915) and developed by Henry Ford (1863-1947), aligns with the idea of leisure, initially promoted as a means of replenishing the workforce, within a conformist ideology for its experience. This model, which causes profound changes in the restructuring process of capitalism, since it prioritizes volume (quantity) to obtain profit (that is, it reduces the cost of production to produce more at lower prices, becoming dependent on consumption), associates leisure with recreation. Something like ready-made activities to be consumed, spatially defined and geared towards controlling the time of the working class.

Regarding the **second** approach, and especially concerning people with disabilities, their inability to belong to the productive system was already recognized. But while the work is important for the maintenance and development of the system, what about the people who, in some way, did not belong, or cease to belong, to the "functioning of the system"?

In his 1843 work, *The Condition of the Working Class in England*, Friedrich Engels provides the first signs of what would result from long working hours, noting the large number of people who suffered injuries resulting from the exploitation of their labor. Noting elements for understanding disability as a class issue, Russell and

Malhotra add definitions regarding the topic. By understanding that physical characteristics such as strength and performance become fundamental to the operation of machines, industrial capitalism creates not only a mass of proletarians, but also a “new class of disabled people” (2009, p. 213), excluded from wage labor. Thus, asylums, schools, prisons, colonies, and special schools began to develop a set of practices aimed at disciplining individuals through regulations that ended up having a strong impact on the lives and bodies of those with some type of disability.

Leisure, therefore, since there were no accessible cinemas, theaters, museums, restaurants, and hotels, becomes significant as a preventative measure. This implies that this interpretation ends up manifesting itself in an individual and passive sphere, based on medical and adaptive principles (ARAÚJO, 1997; WINNICK, 2004; AITCHISON, 2009).

In a broader attempt to understand the phenomenon, considering the North American and British context, Aitchison (2009) corroborates some considerations. It highlights, for example, that for more than three decades leisure studies have focused on groups considered marginal or excluded from leisure consumption and participation. However, and paradoxically, it addresses the fact that people with disabilities have been rendered invisible in this environment, which has focused on debating issues from the perspective of sex, race, and class, highlighting the social exclusion. According to the author, there are three reasons why this hasn't been happening. Firstly, because the disciplinary origins and theoretical foundations of leisure studies fail to address disability; secondly, because the discourses produced do not provide meaningful definitions of leisure for people with disabilities; and thirdly, the predominance of the so-called Medical Model in leisure studies and related areas, such as sports science, has hindered the development of a critical social theory about leisure and disability. As the

author progresses through her work, she lists other elements that point in the same direction:

Viewing leisure as functional or individual for society is often associated with the Victorian movement of rational recreation and notions of 'muscular Christianity' through which leisure is active and directed and is seen as offering opportunities for capitalists to control the time, activity, and spatial patterns of the working classes (Clarke & Critcher, 1985). Where leisure is viewed as functional for people with disabilities, it is usually associated with a medical rather than a social function. Emphasis on physical activity and physiotherapy, therefore, seems to dominate over less physically active leisure or social interaction as leisure (Leach & Bailey, 1995). Defining leisure as freedom can be equally problematic, since many 'leisure' activities may not be freely chosen by people with disabilities, but may be part of prescribed physiotherapy or recreation regimens that require facilitation by others (AITCHISON, 2009, p.382, our translation).

According to the author's discussion, leisure becomes an experience associated with the body and its healing through medical means, "wrapped" in religious issues. It has the characteristics of an activity that recognizes a dependent body, one that cannot produce, is incapable and invalid. Its focus is clear, constituting something done "for" the person with a disability and not "by" the person with a disability. In the functionalist logic in question, a social fact possesses an external reality, rationalized in behaviors, that is independent of our individual perceptions; thus, we do not condition it, but are conditioned by it. Therefore, the medical, rather than the social, perspective ultimately reveals a structure that determines the reality of leisure.

Thus, social constructs, understood from different material and symbolic meanings, in addition to shaping social actions related to disability, end up decreeing the nullity of the subject. In Oliver (1998), a critique is established of this understanding of disability treatment as if it were something unique, without divisions and peculiarities within it. In the author's words, it's as if the policies and arguments in this regard speak to a single, homogeneous audience.

The crucial problem is that people with disabilities, regardless of the type or severity of their disability, are not a homogeneous group. This can be easily accommodated within a society that pays little attention to individual or collective needs. Just like the rest of the population, people with disabilities differ widely in terms of ethnic background, sexual orientation, age, abilities,

religious beliefs, wealth, access to work, and so on. Clearly, their situation cannot be understood or, indeed, transformed by any policy based on narrow and conventional theories of normality or uniformity (OLIVER, 1998, p. 1448, our translation).

Within this interpretation, we can infer that leisure, recreational, and rehabilitation practices, while intended to contribute to the social system and the maintenance of social order, ultimately impose certain limitations on disability. It can be inferred, for example, that the interests of individuals and groups are the same as those of society as a whole, ignoring historical differences between groups, in which some may benefit more than others. Similarly, there is a growing tendency to fail to recognize that leisure and recreational activities are social constructs and clearly serve to promote the interests of groups seeking to experience them.

Reaching this point, these peculiarities, it becomes necessary to consider leisure as a mechanism for critiquing and overcoming this logic. Initially, exposing its contradictions and, subsequently, reflecting on the importance of leisure activities geared towards citizenship, based on the presence/claim of a collective organization for participation in social spaces.

The Search from a Critical Perspective

From a critical point of view, leisure is debated based on models of government, citizenship, and the market. In contrast to the functionalist thesis, which is concerned with identifying the needs for the functioning of the system, the critical ideology of leisure seeks to observe the changes that occur in the economic and socio-spatial structures that end up producing or maintaining social inequalities. Differences in interests are the crux of conflict, as they involve power struggles and inequality. According to Padilha (2010, p.69) under this reference:

Society is understood through its contradictions, and its equilibrium is unreal, illusory, false. Therefore, it is essential to understand the causes that lead people to seek restorative leisure activities that provide palliative relief from tiredness, fatigue, and boredom. If work alienates, the logic of capitalism alienates leisure time. Therefore, it is not possible to accept the idea of magical leisure when one knows that it is also governed by the private interests of capital (...). Society is neither harmonious nor homogeneous, and its differences and contradictions are also manifested in people's free time (PADILHA, 2010, p.69).

In this field, the possibility of discussing leisure is seen from the understanding of the material relations through which people are producing and reproducing their existence. It is critical of two well-known ideas of leisure: the first, objective, mainly highlighted by the functionalist conception, surrounded by the controlled observation of the use of free time and illustrated by a set of categories that override dialogue with practice. And the second, of a more subjectivist nature, in which free time is no longer related to work time, but rather to the time of obligations (MASCARENHAS, 2005).

Historically, and by way of example, leisure, from a critical point of view, begins to emerge in the wake of the structural and organizational transformations of the working class in the face of capitalism. Works by Paul Lafargue, such as "The Right to Be Lazy" in 1880, and Thorstein Veblen, such as "The Theory of the Leisure Class" in 1899, are some of these pioneering works that give shape to the subject. These publications, in France and the United States respectively, subsequently offer interesting and significant perspectives on leisure and industrial society of the time, following the publication of Karl Marx's Capital (1867). These interpretations of work and leisure criticized the bourgeoisie, addressing both the importance of leisure time and the demands of capitalism, as in Lafargue, and the practice of emulation in which possessions conferred prestige on individuals, as in Veblen.

These understandings regarding free time and competition anticipate the transformations that have occurred with globalization, market relations, and

technological development, shaping a structural and discursive combination of leisure in function of the market. According to Munné and Codina (1996), changes can be observed in the evolution of industrial society, from mass production to consumer society, and in the meaning given to free time and leisure. From surplus and residual time after work, without intrinsic value but, on the contrary, always related to work (as shown by workers' struggles to reduce working hours) to the consumption of goods and services, there is a new form of leisure driven by technological advances and the culture industry. However, for the author, previous forms of understanding are not lost, but rather adapt and accumulate into an emerging form.

It is recognized in this context that cities underwent profound changes in their social, political, and institutional way of life with industrialization. Although modern urban culture has created alternatives that seemingly mitigate barriers to cultural access for people with disabilities, the city and its fragmentation reveal a reality of inconsistencies. On the one hand, a post-Fordist process of globalization and flexibilization that, in order to achieve successful results, deterritorializes economic, cultural, and symbolic flows. At the same time, on the other hand, it coexists with a process of localization that reflects the incapacity and subjection to the condition of marginality, in view of the oppressive strategies of cities and society.

Thinking about leisure in these terms proves to be complex and challenging, because although these experiences inspire participation, they do so by marginalizing the partially employed and the physically less able. This implies not only that, assuming the guiding principle of the capitalist economy, people with disabilities have been excluded (and are still questioned) from the labor market, but also that the stereotype constructed in the cultural industry and inaccessible urban spaces reinforces this exclusion. A summary of these points can be presented as follows:

- Regarding work, the concerns of the International Labour Organization (ILO) and Brazilian legislation on quotas still reinforce the lack of professional training for participation in the labor market. Training is hampered not only by access to public transport, public roads, ramps and prejudice; but also by the perspective that technological advancement has not benefited the worker in terms of adaptation and ergonomics, but rather the capacity for production (ROSA, 2009; GARCIA, 2010).

- In the cultural industry⁸ (TV, internet, and soap operas), some media stereotypes are recurrent regarding people with disabilities: (1) people who deserve pity; (2) victims of violence; (3) individuals with cruel and criminal nature; (4) enhancer of an atmosphere of misery or degradation in the scenarios through which the other characters move; (5) severely disabled; (6) object of ridicule; (7) people with disabilities as their only and own enemy; (8) burdens to their family; (9) sexual aberrations; and (10) individuals incapable of participating in community life (BARNES, 1992; SHAKESPEARE, 1994; FARIA, CASOTTI, 2014)

- Regarding the urban context, it is observed that, from a socio-historical point of view, the formation of the identity of people with disabilities has been left to enclosed spaces. The underlying theme of this problem is that once the market causes a contraction of state spheres, collapsing public institutions and gradually replacing assistance from the welfare state with civil society, we are faced with the disintegration of such spaces. At the same time, there is a weakening of the social ties of this public with the urban center (GLEESON, 1999; KAPSALIS, JAGER, HALE, 2024).

These issues reflect the imbalance in the distribution of power and perpetuate inequality by failing to recognize historical, structural, and functional differences in

⁸ The history of the Freak Show, or "Show of horrors" in Portuguese (Author's translation), is emblematic and, one might say, pioneering in its portrayal of disability in the cultural market from the 19th century onwards. Available at: <https://www.sheffield.ac.uk/nfca/researchandarticles/freakshows>. Accessed on: November 2, 2024.

their patterns of prejudice and discrimination. Even the attempt at dialogue between the State and the market, which reached its peak in the idea of the Welfare State⁹ (after World War II), presents numerous gaps in the pursuit of citizenship. Welfare policies should understand disability not as a personal tragedy requiring treatment, but as a collective oppression requiring political action (OLIVER, 1996, 1998; BARNES, 2010; SHAKESPEARE et al., 2016).

Some authors argue that while the State assumes social welfare expenses for workers (health, education, social security, and housing, constituting social citizenship rights), it cannot, in absolute terms, provide for the full rights of all its beneficiaries (in this case, people with disabilities). Furthermore, it exposes the group to another contradictory situation. In it, on the one hand, there is the very access to what would theoretically be the “benefits” of social services, involving its beneficiary in the spectrum of disability; and, on the other hand, the process of specialization of these services ends up reinforcing segregation, since it starts from the definition of disability as a medical problem (OLIVER, 1996; RUSSELL, MALHOTRA, 2009; BARNES, 2010; SHAKESPEARE et al., 2016).

Oliver (1998) highlights that the ideology that has historically linked disability to medical issues has perpetuated barriers, leading to understandings of disability oscillating between individual issues and triumphs over society. He cites, for example, that the non-use of public transport is not linked to the inability of a person with a physical disability to walk; on the contrary, it is due to the fact that most means of transport are not designed to accommodate wheelchairs. In this case, the “cure”—in

⁹In Brazil, although the existence of a structured foundation for the Welfare State is not being asserted, as is the case in Western Europe, we consider an approximation to this perspective, of public spending on the provision of social services, based on the 1988 Constitution. According to Garcia (2010, p. 5) This idea is corroborated, “although its effectiveness was hampered by the neoliberal ideology that prevailed in the country during the 1990s, a period of regulation of the Constitution”.

contrast to the medical consensus for disability—lies not in caring for the person with a disability, but in public investment in such services.

The same terms are used for leisure, so that a person with a disability is not incapable or insensitive to seeking experiences in the playful universe of practices for enjoying free time. One should only take into account the real possibilities of organizing the urban environment as a whole (beyond a conceptual framework for understanding, but also operational) of circulation and preparation of environments to receive them in their spaces. However, attention is drawn to what may constitute a dialectical trap for participation in leisure. This means that the observed deficiencies cannot be resolved simply by seeking the integration of “marginalized groups” into society. This is because marginalization is a product of the same dialectical relationship that generates and maintains this situation. Acting in this way only legitimizes the modification of the individual and not of society, which in turn ends up reproducing social inequality.

In this sense, something that radically opposes this common, individualistic, focalized sense, structured on values and ideals of easy solutions to exclusion, lies in the ideological assumptions oriented towards collective action. Even considering a governance model based on an unfavorable redistributive conflict, as explored so far, it is through the mechanism of participation, via social movements, that the political expressions that legitimize exclusion are confronted. Something dear to Disability Studies, striking in the relationship between the personal and the political, and which underpins its history of seeking citizenship.

It is reiterated that it is in the attempt to have their demands heard, and in the face of their powerlessness and inability to act, that the collective empowerment arises, giving the London movement its name. Oliver (1996, 2013), regarding the right to citizenship (in the civil, social and legal spheres), emphasizes that individual feelings

and their empowerment are key to collective empowerment. In this way, empowerment becomes a collective process in which the loss of power becomes part of the struggle to resist the oppression of others.

Historically in Brazil, the relationship between social movements of/for people with disabilities and leisure activities began within a context marked by the absence of collective guidelines and specific agendas for debate. Izabel Maria Loureiro Maior, a national leader in the disability rights movement, highlights the difficulty of this moment. According to her: “we gave birth to a movement, a struggle that we didn’t really know where it was going. (...). The flags, initially, were from a ramp, a leisure activity, etc.” (FERREIRA, 2010, p. 33).

From what this historical leadership says to the present day, it is necessary to observe progress in the attempt to break free from the historically imposed state of segregation, engaging in dialogue with actions that question the current situation. The Brazilian Inclusion Law - LBI (BRASIL, 2015), in this understanding, represents an achievement, a partial progress in relation to the assistance-based and therapeutic vision of the past. However, taking the democratic and emancipatory paradigm as a guide, some issues should be considered regarding the educational nature of the movements and their role in the public sphere. If, for example, the identity-based nature of the struggle of people with disabilities is taking on particularistic forms of defending the interests of specific groups.

This means that struggles are important, but simply having access, individually speaking, does not necessarily mean having the freedom to engage in leisure activities. The explanation for this lies in the fact that leisure is co-opted by a functionalist logic, and the pursuit of access to it ends up reinforcing hegemonic leisure. In this case, one might think there is freedom to exercise choice, but in reality, one may be consuming

what the leisure industry has prepared us to choose. However, when considering it from a collective action perspective, both the social character of time and the individual character of pleasure mean that leisure, within the cultural activities that constitute it, involves diverse human interests and the different languages that compose it. Thus, leisure at some point becomes reactive to what structurally produces inequality; and, finally, it comes to bear our individual mark, that is, to be the object of our own creation.

To embrace this possibility, even while acknowledging that it may involve subordination and a power dynamic, is a situation in which there is a conscious and politicized positioning of groups or social movements when faced with perceived marginalization within society. Thus, in some way, this condition of marginality, expressed in the struggle for rights and recognition of identities, can be translated into spaces that construct new meanings.

Conclusion

Given the need for a contemporary understanding of the process of social exclusion, which, perpetrated over time, has been observed to have little questioning regarding the recognition of possibilities for access to citizenship, this text is presented. With the goal of reflecting on the meaning given to leisure by people with disabilities, this work undertakes the task of bridging the gap between leisure studies and Disability Studies.

In contrast to the control of bodies, the standardization of tastes and references, and indifference to the realities of the people who experience it, the main results call for a rethinking of leisure and its social role. The medical perspective, as observed in the first two discussion points, has produced, alongside a capitalist order of markets and

governance models, a sophisticated apparatus for the exclusion and marginalization of this population. From this perspective, leisure takes on a framework of balance and social integration, which for the participants in this study materialized in philanthropic, medical, and therapeutic aspects of their lives. From a critical perspective, highlighted in the third axis, the need for policies and rights positioned towards the autonomy, inclusion, and independence of the individual is pointed out. Citizenship, however, is a collective achievement resulting from the movements and organization of identity groups around the struggle for rights. It is necessary to evaluate, in projection for future studies, within the empirical needs of leisure and the epistemological meaning of the field, the very meaning of the actions presented and whether particularistic aspects are overriding emancipatory paradigms.

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