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Reflection Article/Essay

Autism and occupational therapy: ethical and professional dilemmas in the current Brazilian context

Autismo e terapia ocupacional: dilemas éticos e profissionais no contexto brasileiro atual

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Abstract

This essay critically analyzes the implications of the growing popularization of autism in Brazil for occupational therapy, based on a collective trajectory initiated in 2022 by occupational therapists and researchers from public universities. Concerns arose from the significant increase in clinics specializing in autism and the early insertion of students into these services, frequently marked by precarious relationships and problematic care practices. The essay uses the conceptual framework of the Autism Industrial Complex as a reference, adapting it to the Brazilian context to understand the diagnostic expansion and the constitution of a highly lucrative service market, in which occupational therapy has occupied a central position. Three analytical axes are explored: I) Training; II) Expansion of the job market and interventions offered; and III) Working conditions of occupational therapists. It is hoped to contribute to the academic and political debate on the future of the profession in the face of contemporary ethical and structural challenges.

Keywords: Occupational Therapy, Autistic Disorder, Teaching, Public Policy.

Resumo

Este ensaio analisa criticamente as implicações da crescente popularização do autismo no Brasil para a terapia ocupacional, a partir de uma trajetória coletiva iniciada em

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2022 por terapeutas ocupacionais e pesquisadoras de universidades públicas. As inquietações surgiram diante do aumento expressivo de clínicas especializadas em autismo e da inserção precoce de estudantes nesses serviços, frequentemente marcados por vínculos precários e práticas de cuidado problemáticas. O ensaio utiliza como referencial o aparato conceitual do Complexo Industrial do Autismo, adaptando-o ao contexto brasileiro para compreender a expansão diagnóstica e a constituição de um mercado de serviços altamente lucrativo, no qual a terapia ocupacional tem ocupado posição central. São explorados três eixos analíticos: I) A Formação; II) Expansão do mercado de trabalho e intervenções ofertadas; e III) Condições de trabalho dos terapeutas ocupacionais: Espera-se contribuir para o debate acadêmico e político sobre os rumos da profissão frente aos desafios éticos e estruturais contemporâneos.

Palavras-chave: Terapia Ocupacional, Autismo, Formação Acadêmica, Políticas Públicas.

Presentation

This essay is the result of work initiated in 2022 by occupational therapists and researchers from public universities who encountered a series of issues related to autism, as well as ethical and professional dilemmas. Such tensions emerged within the political and care fields, particularly from experiences in teaching and academic management, when numerous reports began to arise from students placed in "specialized autism clinics"[1]. Whether due to the growing demand – on an increasingly large scale – for paid, non-mandatory internships in these institutions, or due to the early entry into the labor market, these experiences revealed precarious employment relationships, problematic care practices, and ethical and educational mismatches (Fernandes et al., 2025).

In response to these concerns, a working group was formed, and discussions were initiated in different settings, alongside the development of research on this topic (Fernandes et al., 2024a, 2024b, 2025; Ricci et al., 2025).

The occupational therapists, organized around the Research Group *"Arvorecer – Mental Health of Children, Adolescents, and Young People: Everyday Life, Autonomy, and Sociocultural Participation from the Perspective of Psychosocial Care and Occupational Therapy"*, during meetings held between 2022 and 2023, systematized the main issues related to Autism Spectrum Disorder (ASD), "specialized autism clinics", and professional technical practice.

These meetings resulted in analyses that articulated different dimensions of the problem, giving rise to thematic lines of work focused on the institutions and social practices that respond to the growing prominence of ASD in public debate and intervention approaches, shaped by political and ideological positions. Recognizing the urgency of broadening the debate, these reflections were shared with the National Research Network on the Mental Health of Children and Adolescents (Rede Pq-SMCA[2]), which resolved to establish a specific Working Group on the expansion of ASD diagnosis in the Brazilian context (Rede Nacional de Pesquisas em Saúde Mental de Crianças e Adolescentes, 2023; Fernandes et al., 2024a, 2024b; Collucci,

[1] This refers to public and private clinics that, while offering services for children and adolescents with other needs, claim to be "specialized" in the diagnosis and treatment of autism based on specific techniques and approaches.

[2] The National Network for Research in Child and Adolescent Mental Health is a national group composed of researchers from different universities and research centers dedicated to the topic of child and adolescent mental health from a psychosocial care perspective, through research, outreach, and support for public management.

2024; Diálogos Despatologizantes, 2024). Collaboration with the Instituto Cáue, the Despatologiza movement, and other networks broadened the reach of these discussions, reaffirming the need to reposition health education institutions and professional categories in relation to this phenomenon.

It is important to note that the intention is not to exhaust the reflections on the subject, but rather to initiate and sustain an academic debate on a complex issue that requires ethical, political, and epistemological analysis.

This essay, therefore, seeks to analyze the implications of the growing "popularization" of autism for occupational therapy, considering the ethical-professional dilemmas that permeate both professional education and the labor market. It is evident that there is an ongoing phenomenon related to the expansion of ASD diagnoses and the emergence of an "industry" that has strongly impacted the service sector (through the provision of specialized therapies and interventions) (Fernandes et al., 2025), within which occupational therapy has assumed a central role and, for the first time in its history, has become the target of a massive and systematic capitalist investment, as also noted by Pamela Block[3].

To initiate these reflections, we present the conceptual framework – the Autism Industrial Complex (AIC) – proposed by a researcher in Critical Disability Studies in the United States (Broderick, 2022), and discuss how it has contributed to the analysis of the Brazilian context, albeit with specific particularities. Based on this framework and on other authors who contribute to the discussion (Fombonne, 2018; Almeida & Neves, 2020), the object of this essay – autism and occupational therapy in contemporary society – is approached through three analytical axes: I) Education and Training; II) Expansion of the Labor Market and the Interventions Offered; and III) Working Conditions of Occupational Therapists.

The Autism Industrial Complex

It is important to begin this debate by presenting the concept of the Autism Industrial Complex (AIC), since, although much has been said about the constitution of an "autism industry", little is understood about how it is constituted, its components, and the references that sustain it. Furthermore, there is extensive literature on the pharmaceutical industry and the medicalization of childhood (Mazon, 2021; Caponi, 2016; Whitaker, 2016; Moysés & Collares, 2013); however, in the case of autism, there appear to be other dynamics and elements involved that must be analyzed as a social, political, economic, and cultural phenomenon.

The concept of the AIC, developed by Broderick (2022), offers a critical analysis grounded in theories of disability, capitalism, and neoliberalism to understand how autism has been transformed into a highly commodified phenomenon. Against the backdrop of neoliberal capitalism, autism ceases to be understood exclusively as a matter of health or rights and comes to be viewed as an economic opportunity. Thus, the AIC can be understood as a system that works to manufacture autism as a commodity, transforming everything considered "autistic" into raw material for profit extraction.

According to Mazon (2021, p. 34), "[…] the market is not constituted as a free play of abstract forces between supply and demand; rather, it is the result of a broad social arrangement involving agents and institutions, within complex political-cultural processes that are open to contestation". From this perspective, there is a machinery

[3] At a conference held during the VIII National Seminar on Occupational Therapy Research, in September 2025.

that operates the AIC, whose driving core is constituted by a culturally established rhetoric that presents autism as a "problematic" condition, often viewed as tragic or catastrophic. This rhetoric, in turn, mobilizes fear among families, fueling the demand for interventions sustained by the hope and promise of "normalizing" or "correcting" autistic individuals, driven by a discourse of "scientism" (Broderick, 2022), laden with positivist ideologies that adapt to dominant political and social changes and express an unconscious desire for totality (Caponi, 2021).

Thus, the AIC is configured as a structured system that increasingly exploits and produces the diagnostic category as a commodity, generating profit across multiple sectors, including education, healthcare, marketing, among others. Drawing on neoliberal logic, governments and private institutions invest in specialized clinics and programs that prioritize financial return over inclusive and high-quality approaches, often disconnected from existing public policies. Significant investments are also directed toward professional training, product commercialization, marketing strategies, and research aimed at "prevention" and "cure" (Broderick & Roscigno, 2021).

The Autism Industrial Complex in Brazil

Broderick's proposal offers theoretical tools for critically analyzing how autism has been approached in contemporary society across different contexts, fostering an ethical, inclusive debate centered on human rights and difference.

In Brazil, the AIC has become particularly prominent since 2019, especially within the service and intervention sector, with the significant expansion of specialized clinics for autistic individuals, both public and private, many of which are financed with public resources (Fernandes et al., 2024b, 2025).

In a report produced by researchers from different institutions, based on a set of data and information gathered within the scope of postdoctoral research, the authors discuss the possibilities and challenges involved in the care provided to autistic individuals in Brazil. As a result, they point to an ongoing phenomenon that requires more in-depth analysis: the expansion of autism diagnoses amid disputes over intervention models, accompanied by a substantial proliferation of legislative bills on the subject, as well as budgetary and political directives from the federal Executive Branch – with repercussions at the state and municipal levels. These developments have led, for example, to the creation of public services exclusively for autistic individuals, the expansion of private clinics, and competition among these companies for "qualified" professionals in response to existing demand. According to the technical report, many of these clinics are affiliated with both private health insurance plans and the Unified Health System (SUS) (Fernandes et al., 2025).

Other Brazilian authors have also raised this debate (Machado, 2022; Picollo, 2025). Machado (2022) argues that autism and its associated policies concern the place fabricated and reserved for the child within the social imaginary; that is, the different positions occupied by children today are shaped by transformations in ways of existing, becoming ill, and forming social bonds, such that the autism diagnosis reveals new marks inscribed upon children. Thus, similarly to the study by Fernandes et al. (2024a), although covering an earlier period, the author conducted a mapping of laws and policies approved or in force between 2012 and 2020 that had autism as their object. As a result, she identified that, at that time, there was already increasing visibility surrounding the

topic, which, on the one hand, reaffirmed the existence of autism and, on the other, presented it as a threat.

In light of this reality, it is essential to reflect on the implications of this scenario and on the impacts of the care practices that have been disseminated throughout the country for this population. Fernandes et al. (2024b, p. 33) argue that the perspectives and conceptions surrounding this topic are "[…] pragmatically negotiated and corrupted within the realms of care, research, and scientific knowledge production, as a means of sustaining who is considered to possess greater expertise and legitimacy of knowledge and, consequently, who dominates the market".

An ethical and political problem is thus constituted: on the one hand, there are consumers seeking treatments grounded in normativity and the possibility of "cure"; on the other, economic sectors linked to services and interventions increasingly produce specialists and care technologies based on biomedical and neurobiological perspectives. Within the service and intervention sector, which has gained prominence in Brazil, certain professional categories and their care and intervention technologies stand out, particularly those associated with health and education, such as occupational therapy.

This debate within occupational therapy is recent, but it has been addressed by collectives, regional councils (CREFITO, ABRATO), and research groups such as "Arvorecer" (CNPq/PPGTO-UFSCar), which have been producing reflections and empirical data on the transformations currently underway.

Contemporary Reflections/Debates on Occupational Therapy and Autism in the Face of the Established Industry

This preliminary analysis considers that occupational therapy professionals have been impacted in three main areas: I) Training: expansion of undergraduate and postgraduate specialization courses with curricular weaknesses, geared towards technical and commercial practice; hiring of interns; II) Expansion of the job market and interventions: wide availability of positions for occupational therapists in clinics; distortion of care and intervention practices; fraud; III) Working conditions of occupational therapists: precarious employment relationships.

Training

Between 1995 and 2015, occupational therapy was one of the degree programs that experienced the lowest growth in enrollment numbers (Vieira & Moysés, 2017). Currently, there are 118 on-campus occupational therapy programs registered with the Ministry of Education (MEC), offering approximately 20,000 places annually, and 46 distance-learning programs, which offer more than 70,000 places per year (Brasil, 2025).

This expansion (Lins et al., 2025), intensified after the COVID-19 pandemic, occurred primarily through distance education (DE). Many programs have reduced course loads and are not always recognized by the MEC, while offering thousands of places without considering the National Curriculum Guidelines or educational quality. These programs advertise on their websites and social media annual enrollment capacities ranging from 800 to 2,000 places (Brasil, 2025), revealing a quantitative increase that disregards national curriculum guidelines and educational quality. As an example, the authors analyzed the syllabus of a remote-learning occupational therapy program at a private university that offers 500 places annually and found, in addition to specific

courses focused on autism and behavioral and sensory techniques, subjects related to social media promotion, financial mathematics, administration, and laboratory test analysis.

Centered primarily on the "ASD clinic", as widely promoted, this phenomenon appears to be shaped by contemporary forms of labor management in a developing country operating under capitalist and neoliberal logics. Thus, undergraduate education must provide opportunities for forms of agency that enable future occupational therapy professionals to become self-entrepreneurs while simultaneously functioning as products within an increasingly individualizing market that recruits workers as enterprises of themselves. Within this logic, supposedly more dispersed, self-managed, and liberated from traditional forms of labor, what is observed is that the centralization of control over workers becomes increasingly restrictive, aggressive, and exclusionary.

Some educational institutions have sought partnerships and accelerated programs to meet the growing demand for therapists, generating controversy (Brasil, 2024). A recent example concerns Public Notice No. 001/2024 issued by the National Federation of APAEs (FENAPAES), which announced an occupational therapy training program lasting two years for professionals who already held a previous undergraduate degree. The notice generated significant concern among the Regional Councils of Physiotherapy and Occupational Therapy (CREFITO), as well as professional associations such as the Brazilian Association of Occupational Therapy (ABRATO) and the National Network for Occupational Therapy Education and Research (RENETO), intensifying the debate regarding the quality and objectives of such programs (Brasil, 2024). The initiative was subsequently suspended.

Another critical issue concerns the offering of specific courses on autism and evidence-based methods, resulting in an educational model shaped by market demands that reduces persons with disabilities to their medical diagnoses and empties the profession of its critical and generalist dimensions. This type of training has led occupational therapy to be recognized and validated solely through the techniques it is able to provide. In other words, the profession becomes reduced to a therapeutic resource, which is concerning because, as Benetton (2008) argues, a resource may be abandoned when it is no longer considered necessary. It is important to reflect on how limiting occupational therapists' practice to a specific technique for a particular population also leads that technique to acquire a therapeutic quality in itself, making the presence and expertise of the professional seemingly dispensable.

Curricular and extracurricular internships have also become spaces of precariousness. There is an incessant demand from "specialized autism clinics" for undergraduate students, regardless of their stage of training. Furthermore, there have been numerous reports concerning the professional practice of undergraduate students, as "interns" have been working without the presence of a supervisor and, in some cases, even acting as licensed occupational therapists before health insurance providers and family members (Ricci et al., 2025).

We have frequently witnessed occupational therapy students entering these forms of work, including internships not recognized by educational institutions due to the precarious conditions under which they operate. Countless times, whether in university hallways or through mobile messaging applications, we have been approached with distressing accounts from students experiencing situations that are deeply troubling from the standpoint of labor dignity and even the dignity of the children receiving care.

Some journalistic reports, albeit highly sensationalized, have pointed to these situations (CNN Brasil, 2024).

We believe that the fragility of student retention policies, which generally provide limited and insufficient resources to support students throughout their undergraduate studies, combined with the intensive time demands of health-related degree programs, which are generally full-time, contributes to the worsening of this exploitation of undergraduate labor. In response to situations such as these, groups of occupational therapy program coordinators have met systematically to discuss the issue, working in collaboration with RENETO and disseminating public letters and statements, such as the one issued by the Occupational Therapy Program at the Federal University of Espírito Santo (UFES) (Universidade Federal do Espírito Santo, 2025).

Within lato sensu postgraduate education, the situation has been equally concerning. There has been a proliferation of specialization and extension courses offered remotely and with varying durations, which do not always include qualified instructors or appropriate content.

Simultaneously, for the first time in the history of the profession, recognized residency, advanced training, and specialization programs accredited by the Ministry of Education (MEC) have been closing or experiencing a significant reduction in the number of applicants, frequently leaving vacancies unfilled due to the lack of interest among recent graduates.

Although this was not a primary focus of the authors' analysis, it can be inferred that the decline in occupational therapy residency positions reflects not only the difficulties inherent to multiprofessional residency programs, but also the choices made by students who have opted to enter the labor market directly, given the high demand for professionals to work in specialized clinics and the attractive salaries offered.

Expansion of the labor market and interventions offered

The labor market for occupational therapists in Brazil has experienced significant expansion, with a wide range of job opportunities predominantly focused on working with autistic individuals in "specialized autism clinics". Never before has there been such a high demand for occupational therapists. This expansion, however, has generated competition for professionals and intense workforce turnover.

These institutions, often financed with public resources, operate according to a neoliberal logic of productivity and efficiency, adopting rigid, standardized, and biomedically based protocols aimed at producing quantifiable and marketable outcomes (Broderick, 2022; Fernandes et al., 2024a, 2025). As a result, occupational therapists' practice becomes instrumentalized and oriented toward meeting a specific market demand, to the detriment of comprehensive, relational practices focused on everyday occupations as shaped by the social determinants of health.

Although opportunities exist in other practice settings through public service examinations and employment within Unified Health System (SUS) services, these positions have remained vacant due to unequal competition with the private sector. An example can be found in the Operational Audit Report on the Psychosocial Care Network of the State of Espírito Santo (2024): of the 17 accredited Psychosocial Care Centers (CAPS), only 10 have occupational therapists on staff. According to reports provided by local managers to the State Court of Accounts, hiring these professionals has become a challenge, as competition with positions offered by private clinics is unequal

given the substantial salary disparities (Tribunal de Contas do Estado do Espírito Santo, 2024).

The demand for therapists holding certifications in specific imported methods and approaches, such as Applied Behavior Analysis (ABA), reinforces the notion that there is a universal therapeutic "gold standard", disregarding Brazil's sociocultural, economic, and geographic specificities (Broderick, 2022; Fernandes et al., 2024a, 2025).

The model of care currently promoted, based on intensive and large-scale interventions delivered in clinical settings, restricts the existence, creativity, and lives of autistic individuals, reviving disciplinary, violent, and institutionalizing practices. This debate encompasses discussions regarding conceptions of autism, including its possible etiological factors, effective treatment methodologies, and implications for public policies. As autism becomes a priority issue within this market, it has increasingly been instrumentalized to serve political and economic interests, obscuring what should remain central: the guarantee of rights for this population. Fundamental rights, including citizenship, health, and education, have been systematically denied (Ortega, 2019; Grinker, 2019; Broderick, 2022).

According to Bezerra et al. (2023), the logic of profit structures the organization of healthcare, transforming it into a market niche. This phenomenon becomes even more pronounced in the context of autism, which has become a highly valued diagnosis. Consequently, healthcare practices also reflect a coloniality of knowledge, operating through a rationality that marginalizes alternative forms of knowledge.

It is essential to reflect on how the notion of scientific evidence has been disseminated and instrumentalized. It is necessary to question the discourse that only certain specialized techniques and approaches, grounded in research produced in the Global North, are capable of adequately addressing the needs of all autistic individuals. This perspective disregards individual singularity, limits recognition of people's potentialities, and ignores the diverse subjectivities produced within each geopolitical context. Moreover, it creates conditions for the control of bodies and the exercise of power, reinforcing asylum-based, colonialist, ageist, and ableist logics (Fernandes et al., 2024a).

Although some advances have occurred, the focus has remained restricted to the development of individual skills and competencies through structured therapeutic interventions, to the detriment of broader psychosocial approaches that consider the active participation of individuals, their communities, the social determinants of health, and intersectionalities within this debate (Fernandes et al., 2024a).

This institutionalizing and individualizing model of care frequently disregards the advances achieved through historical struggles in the field of mental health, neglects collective approaches, and may even result in violations of human rights. Such a model runs counter to the care framework that occupational therapy has developed in Brazil over the years.

Working conditions of occupational therapists

The precarization of occupational therapists' working conditions is another alarming aspect. Despite the expansion of the labor market and the attractive salaries offered, these often mask structural problems such as precarious employment arrangements, excessive workloads, inadequate working conditions, and high daily and weekly demands, including the simultaneous treatment of multiple children.

Reports of professional exhaustion are common, highlighting the impact of precarious working conditions on therapists' health and quality of life. Examples of this situation have been shared in collective spaces for discussion and exchange, as well as in recent research studies (Ricci et al., 2025).

The precarization of occupational therapists' working conditions represents one of the most striking expressions of the functioning of the AIC in its articulation with neoliberal logic and with the structural reforms that have been dismantling public care policies in Brazil (Broderick, 2022; Fernandes et al., 2024a, 2025). This reflects what Antunes (2025) defines as the "[…] regressive reconfiguration of labor relations in contemporary capitalism", characterized by the intensification of the exploitation of occupational therapists and the deterioration of working conditions.

It is common for occupational therapists to work under informal contracting arrangements, especially as individual microentrepreneurs (MEIs), without any labor or social security guarantees. This form of labor market insertion is justified through a rhetoric of autonomy and entrepreneurship that conceals precariousness under the promise of individual freedom and meritocracy (Bourdieu, 1998; Antunes, 2018). However, what is observed in practice is the imposition of exhausting work schedules, unattainable targets, lack of breaks, and the absence of minimum conditions necessary for the ethical and technical exercise of the profession (Dejours, 2004; Antunes, 2018, 2025).

Social media platforms have become important spaces for denouncing and making these processes visible. An anonymous social media profile, for example, has gathered hundreds of reports documenting the precarization of work processes and conditions, including inadequate infrastructure, excessive workloads, institutionalized moral and sexual harassment, fraudulent practices, and the systematic devaluation of professionals' technical and scientific knowledge (Ricci et al., 2025). Such reports reveal the subjective dimension of precarization, which extends beyond the material conditions of work and affects workers' mental health and ethical integrity (Dejours, 2004; Antunes, 2018, 2025).

This expropriation of workers' subjectivity is characteristic of neoliberal management, as argued by Dardot and Laval (2016), whereby workers are held individually responsible for the success or failure of clinical interventions, disregarding the structural factors that shape professional practice and imposing a logic of individualized blame. As a consequence, there has been an increase in burnout, mental health problems, and early abandonment of the profession, particularly among young occupational therapists.

Precarization is also expressed through the internal hierarchization of teams, in which professionals with limited theoretical training and brief certification courses assume strategic positions, while therapists with comprehensive and critical educational backgrounds are devalued. This managerial logic prioritizes operational efficiency and adherence to corporate protocols over a clinical practice committed to the complexity of individuals and to professional autonomy.

Final Considerations: Rethinking Actions, Planning the Future, and Articulating Knowledge

The commodification of healthcare work and the phenomenon of the AIC operate as mechanisms that capture the critical potential of occupational therapy, emptying its ethical, territorial, and collective foundations. When transformed into a service provider

for a market niche, the profession risks being instrumentalized by technicist logics that deny its political and emancipatory dimensions. Thus, it is necessary to question whether the apparent valorization of occupational therapists truly represents progress or whether it reinforces a market-driven logic that neglects the fundamental principles of the profession.

As a more constructive contribution to the reality elucidated in this text, we consider it important for occupational therapists, professional associations, networks, and collectives to articulate and promote reflective spaces regarding the current context. Active participation in decision-making arenas and in the formulation of public policies is indispensable, as is the defense of democratic, inclusive, and solidarity-based models of care.

Research, teaching, and extension activities have been directed toward fostering these debates on multiple fronts, including political advocacy through participation in the critical analysis and formulation of public policies at the federal, state, and municipal levels, to which the production of situated and geopolitically grounded knowledge should contribute. Furthermore, we have engaged in dialogue and advisory work with the Justice System (Public Prosecutor's Offices, Public Defender's Offices, and Juvenile Courts), providing training, support, supervision, and case studies that enable a more complex and context-sensitive perspective regarding requests for the establishment of clinics, access to rights and benefits, and their articulation with comprehensive biopsychosocial analyses.

Within the fields of knowledge production and care, it is necessary to reaffirm the ethical and political commitment of occupational therapy: to question whom our practices serve and which values sustain our research and interventions. Creating spaces for critical education – at the undergraduate, postgraduate, and continuing education levels – is an essential condition for resisting neoliberal logics and technologies that standardize bodies and ways of being. These spaces must revisit the epistemological and ethical-political foundations of the profession, reaffirming its commitment to diversity, inventiveness, and care as a transformative social practice.

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Data Availability
The data supporting the results of this study are available from the corresponding author upon request.

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