

Chapter 42

ADHD and the new guidelines



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ABSTRACT

Attention Deficit Hyperactivity Disorder (ADHD) is considered a common preschool disorder, affecting 5 to 8% of the world's child population. The theme is relevant in the educational area, which is closely related to it, contributing to the clarification of concepts, symptomatology, and description of the disorder. Regarding the legislation, the current one did not specify the theme, which is theoretically understood in special educational needs. However, in November 2021, new Law No. 14,254 was published, which objectively deals with the subject, bringing new guidelines. From this perspective, the study aims to analyze concepts and interpretations about ADHD, ADHD, and Education, the previous legislation on the subject, and the new guidelines. To this end, a qualitative methodology was used in this study, concerning the objectives, exploratory and descriptive as it seeks to explore concepts, meanings, and classifications of ADHD in different authors and perspectives and, for the procedures, bibliographic. The research was carried out in a virtual environment, in reliable databases such as Scielo, with scientific articles and books in pdf format, publications, and current legislation, with the descriptors ADHD, new guidelines, legislation, and education. This resulted in a discussion organized into four topics, of which: ADHD, ADHD and education, ADHD and legislation, and New guidelines for ADHD. The author's conclusions and impressions can be found in the final considerations.

Keywords: Education, Legislation, Guidelines, ADHD, Teaching.

1 INTRODUCTION

Attention Deficit Hyperactivity Disorder (ADHD) is considered the most common preschool disorder, affecting a considerable portion of the child and adolescent population.

A relevant topic in debates and discussions in the educational area, the disorder is complex in terms of conceptual, symptomatic, diagnostic, and descriptive aspects. Therefore, it is necessary to resort to the concepts attributed to him for a better understanding of the disorder.

In the normative aspect, despite understanding special needs, in the educational area, there was no specific legislation for ADHD. Therefore, the guidelines regarding ADHD were not fully clarified regarding the procedures, rights, and duties of all authors in the educational process of these students.

In this context, in November 2021, a new Law was published objectively dealing with people with ADHD, constituting new guidelines.

Faced with the need to address this related topic, the present study aims to analyze concepts and interpretations about ADHD, ADHD, and Education, the previous legislation on the subject, and the new guidelines.

To this end, a qualitative methodology was used in this study because such an approach offers and enables a vision for [...] the universe of meanings, motives, aspirations, beliefs, values, and attitudes." (Mynaio et al., 2009, p. 21).

Regarding the objectives, it is exploratory and descriptive research (Gil, 2008) as it seeks to explore concepts, meanings, and classifications of ADHD from different authors and perspectives.

Regarding research procedures, the study was characterized as bibliographical which, according to Gil (2008), is developed based on material already elaborated and published as scientific articles and books. The research was carried out in a virtual environment, in reliable databases such as Scielo, with scientific articles and books in pdf format, publications, and current legislation, with the descriptors ADHD, new guidelines, legislation, and education.

The results obtained and the discussion was presented on four topics, namely and that follow: and ADHD, ADHD and education, ADHD and legislation, and New guidelines for ADHD.

2 ADHD

Attention Deficit Hyperactivity Disorder is a complex disorder that promotes many debates about its concept, meanings, and description according to the area of knowledge to which it is subjected.

Marco A. Arruda, in his book "Levados da Breca", summarizes in a single sentence what ADHD is. He explains:

ADHD is a chronic mental disorder, multifactorial, neurobiological, of high frequency and has a great impact on the bearer, his family, and society and characterized by difficulty in attention, hyperactivity, and impulsivity that combine in varying degrees and begin in early childhood, may persist into adulthood. (Arruda, 2006. p. 9).

The World Health Organization (WHO) characterizes mental health as a general state of well-being in which the individual manages to maintain mental organization by exercising two skills normally, bypassing stressful moments, and being productive for his community and in his life. Thus, a mental disorder is a disorder, imbalance, or condition outside of normality (Arruda, 2006).

According to the author, ADHD is a mental disorder and is chronic because it manifests itself throughout life and may last into adulthood; it is multifactorial because there are several factors involved in its development, the predominant and also determining factor being genetic, but others are added, such as: problems during pregnancy, use of cigarettes, alcohol or drugs by the pregnant woman, complications during birth, or others aggressive factors of the brain such as trauma, for example; it is neurobiological because it is a disorder that involves brain biology and neurons, neurotransmitters, substances that act in the transmission of nerve impulses between one neuron and another, such as dopamine, noradrenaline and serotonin; it has a high frequency because studies reveal that, on average, 5 to 8% of the world's child population has ADHD and 5 to 6% of the Brazilian adolescent population has ADHD; it is a disorder of great impact because its negative consequences on the individual, family and social life of the bearer go farther than what could be measured a few years ago, including suicide attempts, divorces, drug use and social maladjustment and it presents three main symptoms that, according to the combination or predominance of one or more and their clinical manifestations, define the subtypes of ADHD that the individual has and which are: attention deficit or inattention, which is the central symptom of the disorder (more common in girls); hyperactivity that is the most easily identified and impulsivity is the symptom that parents usually do not recognize because it can go unnoticed as a small anxiety. ADHD subtypes are the predominance of inattention – which affects 20 to 30% of cases; the predominance of Hyperactivity – which reaches 15% of cases; combined symptoms – 50 to 75% of cases (Arruda, 2006).

According to Sena and Neto (2007, p. 21 apud Azevedo, 2015, p. 10), ADHD is defined as:

Difficulty paying attention to details or making careless mistakes in school and work activities; difficulty sustaining attention in tasks or play activities; seeming not to listen when spoken to; not following through on instructions and not finishing schoolwork, housework, or professional duties; difficulty organizing tasks and activities; avoid or be reluctant to engage in tasks that require constant mental effort; losing things needed for tasks or activities; and being easily distracted by stimuli unrelated to the task and forgetting activities.

The disorder can be observed in three different ways: the first in which attention difficulties predominate; the second, in which impulsivity and hyperactivity prevail, and the third, which unites the two previous ones (Sena; Neto, 2007 apud Azevedo, 2015).

Regarding the three main recognized symptoms of the disorder, Barkley (2008), when stating about hyperactivity, declares that excessive or inappropriate activities for age development are observed, whether motor or vocal (the child does not stop moving and does not stop talking), restlessness, agitation and brutality in moving; about impulsivity, which involves lack of behavioral control, prolonged weak inhibition, inability to take a long time to respond, or incapable of retaining responses, that is, not speaking

(it is observed that this symptom directly implies attention deficit); and on attention deficit, this subtype of ADHD has a slow cognitive time, that is, because of this, children are characterized as slow, passive, lazy, dreamy, amazed, confused.

Caliman (2010) states that the three prevalent symptoms that characterize the disorder unfold into others, aggravating the general conditions of children and adolescents with it. This is considered a developmental mental disorder that involves the aspect of self-control. Thus, patients have difficulties in staying accommodated and maintaining focused attention and concentration, they have forgetfulness and mental, physical, and spatial disorganization, difficulties in demarcating the time of actions, which causes delays and postponements, have difficulties in following guidelines like this such as short-term memory problems, restlessness, seek to do too many things at once, tend to compulsion, are often intolerant, impatient, unstable, have difficulty expressing themselves correctly, explosive, hypersensitive, sexually unstable and defiant to both parents and children the teachers.

3 ADHD AND EDUCATION

The processes and diagnosis of ADHD are intertwined with Education, as this represents an institution that has actors closely linked to its construction (Pereira, 2009).

Rafalovich (2002) states that the description of the disorder made in the DSM-IV is made in the school environment and for the analysis of this, known for problematic behaviors that imply the lack of success and adaptation in this environment and believes that the educational discourse uses the psychiatric study to validate the understanding of the disorder (Rafalovich, 2002 apud Pereira, 2009).

Regarding the symptoms in this environment, the APA (1994, p. 84 apud Pereira, 2009, p. 17) makes some examples described as: “often leaves the chair in the classroom or in other situations in which sitting is expected”, “often answers questions before listening to them fully” or “often does not follow through with instructions or does not finish work, tasks, or duties in the workspace”. The Association adds that “In general, the disorder is initially diagnosed during the first years at school, when school adaptation is compromised” (APA, 1994, p. 82 apud Pereira, 2009, p. 18).

There is a lot of discussion about ADHD and school. Students with the disorder, although not understood by the legislation as having special needs, need special attention from educators. In this context, there are some problems in the literature, such as, firstly, poor school performance. according to Mercugliano (1999), poor school performance should be considered during the diagnosis of HAT as it is a complaint of almost all carriers. (Mercugliano, 1999 apud Azevedo, 2015). Klein and Mannuzza (1991) point out the consequences of poor school performance for students with ADHD and the urgent need for special support classes, driving the need for an early diagnosis. (Klein, Mannuzza, 1991 apud Azevedo, 2015).

From this perspective, ADHD and education are closely linked, which encourages changes in the legal apparatus so that the Right to Education is guaranteed with equity and equal opportunities for people with the disorder.

4 ADHD and the law

In the legislative aspect, the Resolution of the National Council of Education on Special Education in Basic Education fosters the discussion about the legal guidelines for the education of students with ADHD and understanding students as students with special needs, which does not happen in schools. The article is presented as follows:

Article 5 Students with special educational needs are those who, during the educational process, present:

- I - accentuated learning difficulties or limitations in the development process that make it difficult to follow up on curricular activities, comprised of two groups:
 - a) those not linked to a specific organic cause;
 - b) those related to conditions, dysfunctions, limitations, or deficiencies;
- II - difficulties in communication and signaling differently from other students, requiring the use of applicable languages and codes;
- III - high skills/giftedness, great ease of learning that leads them to quickly master concepts, procedures, and attitudes. (CNE/CEB, Resolution. 2011 apud Rezende, 2021).

The relationship between ADHD and legislation, in this context, does not establish clear guidelines because, despite the wording understanding the disorder as a disability, in practice, these students are enrolled in regular school. Brazilian legislation describes and recognizes people with disabilities who have long-term, sensory, intellectual, physical, and mental impairments that may impede their effective and total participation in society on equal terms with other people.

Although not presenting specific legislation for people with ADHD, people with the disorder are supported by other legislation such as the Law of Guidelines and Bases of Education (LDB n° 9394 of 1996), which states that education is a right for all, regardless of specific issues. In this, the specialties of each student must be respected and met according to their specific needs (Brasil, 1996 Costa et al., 2020).

The LDB highlights the importance of Specialized Educational Assistance (AEE), determining that the student must attend the regular school inclusively, but must be attended in a specialized way, considering their needs. Article 59, paragraph 1, which deals with education systems and their obligations to students with special needs, highlights: "curricula, methods, techniques, educational resources and specific organization, to meet their needs" (Brasil, 1996 apud Costa et al., 2020).

Decree No. 7611/2011 deals with specialized educational assistance and in its 2nd article says that: "Special education must guarantee specialized support services aimed at eliminating barriers that may obstruct the schooling process of students with disabilities, mental disorders global development and high abilities or giftedness" (Brasil, 2011 apud Costa et al., 2020).

New Guidelines for ADHD

On November 30, 2021, Law No. 14,254 was published, which states:

Art. 1st The government must develop and maintain a comprehensive monitoring program for students with dyslexia, Attention Deficit Hyperactivity Disorder (ADHD), or another learning disorder.

Single paragraph. The comprehensive follow-up provided for in the caput of this article comprises the early identification of the disorder, referral of the student for diagnosis, educational support in the education network, as well as specialized therapeutic support in the health network.

Art. 2nd Basic education schools in the public and private networks, with the support of the family and existing health services, must guarantee the care and protection of students with dyslexia, ADHD, or another learning disorder, with a view to their full physical development, mental, moral, spiritual and social, with the help of social protection networks existing in the territory, whether governmental or non-governmental.

Art. 3 Students with dyslexia, ADHD, or another learning disorder who present alterations in the development of reading and writing, or instability in attention, which have an impact on learning, must be ensured specific monitoring aimed at their difficulty, as early as possible, by their educators within the scope of the school in which they are enrolled and can count on support and guidance from the area of health, social assistance and other public policies existing in the territory.

Art. 4th Specific needs in the development of the student will be met by professionals from the education network in partnership with professionals from the health network.

Single paragraph. If the need for therapeutic intervention is verified, this should be carried out in a health service where diagnostic evaluation is possible, with follow-up goals by a multidisciplinary team composed of professionals necessary for the performance of this approach.

Art. 5 Within the scope of the program established in art. 1 of this Law, education systems must guarantee basic education teachers wide access to information, including possible referrals for multisectoral care, and continuing education to enable them to early identify signs related to learning disorders or ADHD, as well as for the educational attendance of the students.

Art. 6 This Law enters into force on the date of its publication (Brazil, 2021).

According to Nunes (2021), the law states that the Government must not only develop but maintain a comprehensive monitoring program, including identification, diagnosis, and educational and therapeutic support in schools. The law guarantees specific monitoring by educators and by the school where the student is enrolled, together with the health system, which becomes an obligation of Basic Education schools, both private and public.

Nunes (2021) adds that education systems will be responsible for multiplying information as well as training educators about the disorder.

According to her,

The Law is a milestone in the set of rules on inclusion in education. There was some legal divergence about the applicability of the Statute of Persons with Disabilities (Federal Law No. 13,146/2015) to people with learning disorders, given that it would not properly be included in the definition of disability to which the Statute refers. Thus, Federal Law No. 14,254 guarantees specific rights of inclusion for students who face issues related to learning disorders... Undoubtedly, the Federal Law is a step forward, but it needs regulation by the federal government to have its practical application better defined, avoiding disparity in treatments, especially between public and private networks. (Nunes, 2021, s.p.)

In this perspective and view of the new guidelines, it is necessary to promote concrete and practical attitudes for the observance and fulfillment of what was determined by law.

5 FINAL CONSIDERATIONS

ADHD is a complex disorder at descriptive, symptomatological, and diagnostic levels, which affects a considerable number of students. Considered a chronic mental disorder, it has three prevalent symptoms which are: hyperactivity, inattention, and impulsivity.

In this context, many authors affirm its intimate relationship with education, since the school is the environment where the disorder is evident in its carriers. However, the current legislation did not objectively cover the guidelines and procedures regarding the disorder, as well as the rights of this population.

Therefore, to guarantee the rights of this population, in November 2021 Law No. 14,254 was published, which clarifies the educational inclusion of this population.

At this moment, it is up to educators to wait for the practical measures and adaptations to be carried out so that the right to education in an equal and equitable manner is observed in the face of the current national panorama.

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