Chapter 68

The management of people and subjects with ADHD in the labor market





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ABSTRACT

Currently, one of the most common mental disorders in the social environment is attention deficit hyperactivity disorder (ADHD). Thus, this paper presents as problematization the questioning about the role and importance of people management in relation to subjects with ADHD in the labor market. Faced with this problem, we awakened this study with the objective of showing the importance of good people management within the corporate environment and understanding the impact that employees with ADHD has on the organization. Thus, as a methodological path, we intensified the obtaining of the information presented, contemplating a database with a focus on bibliographic and electronic research, interposing the basis in books by renowned authors and articles on the respective theme, as well as a critical and analytical look at this perspective and contemporary society. Moreover, with the research esplanade in this article, we expanded to new studies and looks at this theme, interposing the categorization related to ADHD and the difficulties of insertion of this population from the labor market, as well as in understanding their differences and inserting them in the institution, transforming it into a more inclusive place, with opportunities and free of prejudices.

Keywords: ADHD, People management, Disorder, Human resources.

1 INTRODUCTION

Currently, one of the most common mental disorders in the social environment is attention deficit hyperactivity disorder (ADHD). According to data from the Brazilian Association of Attention Deficit (ABDA), published by veja magazine (2022), there are about 2 million individuals in Brazil in this situation. This disorder is identified by specific characteristics that the individual has been presenting, such as: lack of concentration, impulsivity, restlessness, forgetfulness, among others, being noticeable when the subject is required the excessive use of mental effort, or even when the activities that it is performing, includes greater rules and/or predetermined deadlines.

In view of this agenda, this paper presents as problematization the questioning about the role and importance of people management in relation to subjects with ADHD in the labor market. Faced with this problem, we awakened this study with the objective of showing the importance of good people management within the corporate environment and understanding the impact that employees with ADHD has on the organization.

Therefore, when we approach this perspective mentioned above, we search for information that understands these possible situations, interposing a theoretical reference based on reference authors on the theme and research of intellectual knowledge in the area of human resources, administration, mental and public health.

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2 DEFINITION OF ADHD CLINICAL PICTURE

First, we point out the categorization on the subject with ADHD, thus considering a person with ADHD who meets the criteria of the tenth revision of the International Classification of Diseases and Related Health Problems (ICD-10), or the one that succeeds him, or the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders, of the American Psychiatric Association, ADHD is classified among neurodevelopmental disorders, which are characterized by developmental difficulties that manifest early and influence the functioning/social, academic or personal development (DSM-5, 2014)

In view of this opinion, a contextualization about ADHD disorder is presented below. According to the Diagnostic and Statistical Manual of Mental Disorders (DSM-5, 2014). ADHD (Attention Deficit Hyperactivity Disorder), even known as AD (Attention Deficit Disorder). Moreover, in the English language it also has variations in its nomenclature, being called ADD, ADHD or AD/HD, consists of a chronic disease and a neurobiological disorder reflected in levels of inappropriate development of attention, such as hyperactive and impulsive behaviors.

Thus, ADHD presents a multifaceted condition, resulting from two factors: biological and the interaction of the individual with the environment in which he lives (FERREIRA, 2011). This disorder is recognized as a neurobiological disorder with greater ease in being diagnosed in childhood and in some cases follows symptoms in adulthood.

For DSM-5 (2014), there are three subtypes for ADHD. The first subtype consists of a combined subtype, being the best known and one of the most recurrent among them, which characterizes the hyperactive and impulsive behavior associated with inattention. The second subtype is marked by lack of attention characterized in committing a great repetition of errors due to lack of attention to detail or losing total attention easily, which ends up being a neglected behavior, considered as a picture of reverie and

disorganization. And, finally, the third subtype, comprises hyperactivity as predominant behavior, agitation and impulsivity, much like the first subtype, so the individuals of this subtype are identified by their restlessness, seek to perform various activities at the same time, present explosive behaviors and do not know how to deal with frustrations (FERREIRA, 2011)

Next, we have a brief look at children with ADHD, even understanding the awareness that it is not the objective of this study, but it is necessary a brief contextualization, considering that in childhood the main symptoms are diagnosed.

ADHD is characterized by three basic symptoms: inattention, impulsivity and physical and mental hyperactivity. It usually manifests itself in childhood and in about 70% of cases the disorder continues into adulthood. It affects both sexes, regardless of educational level, socioeconomic situation or cultural level, which can result in serious damage to the quality of life of people who have it, if they are not diagnosed and oriented early (SILVA, 2010, p. Eight).

Moreover, this disorder sand reveals more clearly in childhood, especially when starting school life, generally perceiving the difficulties in learning the expected development pattern of the student for his age (LOPES, 2011).

Children who contemplate this disorder, permeate difficulty in keeping the focus during activities that are too long, repetitive or uninteresting to them, are easily distracted by stimuli from the external environment, but can also be distracted by "internal" thoughts, but are able to remain calm when they are committed to doing something exciting or fun.

Studies by Lambert & Kinsley (2006) and Rhode & Halpern (2004) on neuroimaging and molecular neurobiology have shown that in addition to changes in the function of certain neurotransmitters, especially dopamine and norepinephrine, children with ADHD have brain volumes almost 3% lower than other asymmetries in the prefrontal cortex, cerebellum and striatum.

According to Lopes, Nascimento and Bandeira (2005), his research shows that an average of 67% of children with ADHD remain with symptoms until adulthood, often compromising their academic, professional, emotional and social life. Consequently, it is important to be evaluated as soon as possible for appropriate treatment to be made available and symptoms to be reduced.

However, it is believed that ADHD lasts only in adolescence, however, there is now scientific and proven research that shows that this disorder persists in high frequency in adults diagnosed with it during childhood (SCHMITZ et. al., 2007). The existence of this disorder in adults was for a long time unconsidered, believing only in the existence in children, it was only recognized by the American Psychiatric Association in 1980. And since then, the number of adults with ADHD has been growing, so to make the diagnosis of this disorder in adults it is necessary that the symptoms come from childhood, but many people do not remember and neither their guardians, so consequently this diagnosis is considered still a reason for clashes between specialists, resulting more and more in people inserted in the corporate environment that have not been diagnosed and feel displaced.

For this, after some time this subject is diagnosed by a doctor, we have deployed that in many times the diagnosis may not be requited seriously, before this look, and these failures can cause in other disorders besides ADHD, such as depression, anxiety and among other problems.

As previously mentioned, the diagnosis of ADHD in adults is still the reason for certain impasses, in some studies ADHD is mentioned as an exclusive disorder of childhood and adolescence, without persisting into adulthood, for which it has already been diagnosed and proven by more recent studies. However, even if in a less incisive way, it is recognized in the text of the DSM-5 (2014) that in some cases, ADHD can remain until adulthood. (MATTOS et. al., 2006)

The adult who contemplates this disorder, disseminate their symptoms in a not so evident way, unfolding in problems of affective and interpersonal relationship, organization, mood distortions and in some situations even substance abuse. Thus, the diagnosis becomes more complex, and in many cases, adults end up being undiagnosed and thus without LOPES; NASCIMENTO; BANDEIRA; 2005)

According to Mattos (2003) cited by Lopes, Nascimento e Bandeira (2005)

Adults with ADHD have a pronounced tendency to distract, forgetfulness, repetitions of errors, in addition to losing things, not remembering what they have just read, of having to ask often the same and systematically avoid any reading that is not in their specific interest. They usually engage in activities of little attention and concentration because they present such difficulties. This does not mean never paying attention, but on many occasions, or in most of them the person is scattered, "in the world of the moon". (MATTOS, 2003, *apud* LOPES; NASCIMENTO; BANDEIRA, 2005, p.68)

Although there is no cure for ADHD, its symptoms may decrease with age and with the use of medication. When the patient is treated from childhood to adolescence, corresponding in response to good training, in some cases the drug is suspended, and the patient continues with a good progression. However, there will always be those in which the treatment is for the rest of life, especially when the initiate is already adulthood.

The use of medications in people diagnosed with ADHD causes tranquility, increased attention period and sometimes lack of appetite, in some insomnia and in other drowsiness. These symptoms are not observed in all patients, and some of them become more excited and aggressive in the face of the doses used, because the drugs should be titrated individually and, after the ideal dose has been found, should be maintained and monitored by the responsible physician. Thus, pharmacological treatment of ADHD in adults is done with three groups of medications: psychostimulants, antidepressants and atomoxetine.

According to a study by Spencer *et al.* (1995) although the use of methylphenidate in the treatment of ADHD is more than half a century old, its use in adults is relatively recent. The first studies, in the 1970s and 1980s, had a lower efficacy than that obtained in the treatment of children, which reached about 70% to 80%. A review of these early studies by Spencer *et al.* (1995) observed that the dose used in adults ranged around 0.5 mg/kg/day, much lower than the dose used in children (1.0 mg/kg/day).

These authors subsequently conducted a comparative, double-blind placebo-controlled study in 23 adults diagnosed with ADHD using a dose of 1.0 mg/kg/day and observed a 78% therapeutic response rate in patients treated with methylphenidate, compared to 4% in patients treated with placebo. From there, further studies have demonstrated the efficacy of methylphenidate in the treatment of both inattention symptoms and hyperactivity/impulsivity in adults (SPENCER *et. al.*, 2004).

Recently, an extensive six-week double-blind comparative study of methylphenidate compared to placebo was conducted with 146 adult individuals with ADHD, diagnosed using standardized instruments and using a dose of 1.1 mg/kg/day divided into three doses. The results showed a response rate of 76% for the methylphenidate group compared to 19% for the placebo group. There was a progressive reduction in ADHD symptoms over the six weeks of treatment, with similar results for both symptoms of inattention and symptoms of hyperactivity and impulsivity. From the point of view of tolerability with doses higher than that employed in previous studies, the significantly more frequent side effects compared to the placebo group were: decreased appetite, dry mouth and irritability (*moody*). There was a slight increase in heart rate, without alteration of systolic and diastolic blood pressure (SPENCER *et. al.*, 2005)

Biederman *et al.* (2006) conducted a randomized double-blind study of long-release methylphenidate (OROS®) compared with placebo in 141 adults with ADHD. The initial dose was 36 mg/day and can be adjusted up to 1.3 mg/kg/day. There was a significant reduction in ADHD symptoms in the OROS group compared to the placebo group. The response rate to the OROS group (66%) was significantly higher than in the placebo group (39%). The mean dose of methylphenidate used was 80.9 mg/day \pm 31.8 mg/day.

The question of the choice of adult medicine. According to the British Association of Psychopharmacology, it recently presented evidence-based guidelines for the treatment of ADHD in adolescents and adults (Nutt *et al.*, 2007). Psychostimulants remain the first choice, especially methylphenidate, which presents the most robust evidence of efficacy of numerous randomized clinical trials, similar to what other authors proposed (BIEDERMAN *et al.*, 2004; FARAONE *et al.*, 2004).

In the existence of comorbidity with depression, treatment with methylphenidate and antidepressants can be initiated simultaneously, or, then, first address depression with antidepressants (preferably having some therapeutic action on ADHD, such as tricyclics). If the clinical response is not adequate, the psychostimulant is added in a second stage. In patients with ADHD and bipolar disorder, it is necessary to first introduce a mood stabilizer and, only later, methylphenidate that should never be used in intractable conditions. In patients with ADHD and anxiety disorders, an SSRI should be added to psychostimulant treatment.

Treatment of ADHD with substance abuse requires the use of psychostimulant associated with specific approaches to substance abuse (KALBAG AND LEVIN, 2005)

3 THE PARTICIPATION OF PEOPLE MANAGEMENT IN RELATION TO DISABILITY IN THE CORPORATE ENVIRONMENT

Currently the labor market has been a competitive and unfavorable branch in our society, especially for those who permeate some type of disability, being the physical and /or intellectual insufficiency, in view of the difficulties presented during a selection process or interview to enter the business scope with accuracy.

For Valente and Moura (2018, p.2):

By analyzing attention deficit hyperactivity disorder (ADHD), based on the configuration of society and culture and the social pressures inherent to the current situation, it is possible to relate human work, training and subjectivity and/or its loss, resizing the understanding of the subject considered inattentive and hyperactive in the school environment in addition to medical and psychological diagnoses, to the extent that it is assumed, in this essay, that the formation is configured as an expression and response to the demands of capital.

According to the analysis of Amiralian (2000), carried out by the Interunit Laboratory of Studies on Deficiencies of the Institute of Psychology of the University of São Paulo (2000, p.98), disability is defined by:

Loss or abnormality of psychological, physiological or anatomical structure or function, temporary or permanent. These include an anomaly, defect or loss of a limb, organ, tissue or any other structure of the body, including mental functions [...]

In view of this, some candidates who eventually have some kind of "disadvantage" compared to others, suffer pre-concepts because they are considered as "strange", "weird" people, without qualifications or skills to perform any type of function, be it professional or personal.

When looking at the current scenario, it becomes of paramount importance the need for reeducation and discernment of the individual – whether within an organization or not – who still treat *THE PCDs* (people with disabilities) as if they did not have the capacity to be inserted in the social environment, by which it is necessary to understand these people and put into practice actions that aim to do with that these subjects feel included in society.

In this is to look, it is indispensable the permanent formation of the internal public, I refer to all business public, from employees to senior management, because the role of programs integrated to corporate education, must go beyond training, interposing in an integrated way the development of attitudes, postures, competencies and skills (ANDRELO, 2016).

Adaptation to social transformations is essential, since the integration of employees is essential to keep them motivated, captivated, and complying with organizational culture. According to the 2010 Census, where the study was conducted by IBGE (Instituto Geography and Statistics):

Almost 46 million Brazilians, that is, about 24% of the population reported having **some degree of difficulty** in at least one of the skills investigated (seeing, hearing, walking or climbing steps), **or having mental /intellectual disabilities.** - (Author griffins)

In addition, Neri (2003) relates her studies according to the Law on Quotas for People with Disabilities, Brazil (1991), Law No. 8,213, Art. 93, "[...] the company that reaches from 100 employees must admit a percentage of 2 to 5% of its positions with *PCDs* or beneficiaries rehabilitated in its organizations." Let's look at the figure adapted by the authors as a way of better visualization and encounter with this study.

Figure 1. Proportion of people with disabilities in relation to the company.

EMPLOYEES	PEOPLE WITH DISABILITIES
Up to 200 employees	2%
From 201 to 500	3%
From 501 to 1000	4%
From 1001 onwards	5%

Source: Brazil (1991)

However, the law does not certify that people with disabilities are positively integrated into society and that they do not go through some discriminatory attitude within the organization, since employees may not be properly developed and prepared to receive them in a respectful and inclusive manner.

Thus, it is essential that people management integrate sits employees with others, sensitizing and treating them without differences, integrating a respectful organizational climate and corporate environment accessible to all, with the intention of transforming the institution into a place of opportunities and free of prejudices.

4 THE ROLE OF PEOPLE MANAGEMENT IN RELATION TO SUBJECTS WHO FALL INTO ADHD

Currently, for the corporate environment to remain healthy and stable, it is necessary to manage a good people, understanding efficient communication by the company with employees and vice versa. And the person responsible for this role is the human resources sector, HR. According to Chiavenato (2009, p. 37):

In neoclassical industrialization, human resources departments (HRd) emerge, which replace the former departments of industrial relations. In addition to operational and bureaucratic tasks, so-called HD develop operational and tactical functions, such as specialized service provider bodies. They take care of the recruitment, selection, training, evaluation, remuneration, hygiene and safety of work and labor and union relations, with varied doses of centralization and monopoly of these activities.

In this context, this sector is of paramount importance for employees and especially for those who fall under ADHD, since it aims to deal with people and set up strategies to have employees with high performance within the company, so goals and objectives are achieved and results can be overcome.

Employees who contemplate the disorder may be hindered in their tasks, since anxiety and lack of attention are common to these individuals. For a long time companies turned them off, but the current scenario has changed in this direction. Nowadays, the corporate environment has shaped itself to deal with these people and seeks ways to help them and make these subjects feel included in their team.

In the current labor market, it is up to companies to prepare their representatives by including them in the concept of neurodiversity, and this is a term that brings individuals knowledge about people with different characteristics and behaviors that require special care. In this sense, this care is understood to collaborators who contemplate some mental disorder.

Therefore, we consider the inclusion of this public in the market scenario is increasingly on the rise, so we consider that it is part of the company's obligation to attributes and aspects that value these professionals with these characteristics with a more inclusive and healthy work environment.

Currently in the market scenario it is notorious that the unemployment rate has been rising exponentially, for these individuals would not be different, because its characteristics affect the income of the same and consequently the company. The following is information pertaining to this theme according to veja magazine (2022):

Procrastination, income below intellectual capacity, lack of focus and attention, difficulty in following routines, inability to plan and execute the proposed tasks are among the reasons for the usual failures. "In addition, there are issues such as frequent forgetfulness, losses and carelessness with important dates and meetings," explains psychologist Iane Kestelman, volunteer president of the Brazilian Association of Attention Deficit.

To this end, in view of this view, it is necessary to obtain an understanding about the issue of the skills and competencies that professionals working in the area of people management should contain in front of subjects who contemplate ADHD. Thus, we present below some of these skills in relation to a necessary form of treatment with this audience.

However, the person responsible for this area should have as aptitude the patience that is a competence of extreme importance in the corporate environment, especially when dealing with these individuals, due to the fact that they have as particularities the procrastination in performing tasks and the lack of attention in their functions and / or activities that is under development.

Moreover, another skill that one must have is empathy, in consideration of putting one another in place, being of great importance in this case. For these people, one must have a differentiated care. Therefore, the responsible person has the responsibility to motivate these individuals and not to put them as a problem, because this act can lead to anxiety crises and often the individual can decline to a depressive condition.

Finally, we understand that this study appears in a brief dialogue on this theme, for which it still demands potential in greater questions and care in front of the public that contemplates ADHD and the scenario of the labor market.

5 FINAL CONSIDERATIONS

At the final dialogues of this work, we had the perception that the labor market has become an increasingly differentiated environment, but still requires a lot of attention, care and delicacy in the integration of people with some type of disability and/or transforming the business environment.

Thus, we articulate and meet in the present work the main objective, demonstrating the importance of good people management within the corporate environment and understanding the impact that employees with ADHD has on the organization, as well as providing a theoretical discussion about the categorization of this disorder and the principles of people management and the area of human resources.

However, it is necessary to bring to this movement new tactics for the insertion of these people in the corporate environment, through specific activities for each case, in addition to hiring leaders trained to perform a better way with these situations in order to remove the prejudice instituted in the social environment, by which many think that the people with some disorder do not have the ability to perform a certain function.

In this sphere, with the researches addressed in this article, we have expanded to new studies and looks at other subthemes, such as strategies that can be adopted so that individuals with ADHD feel integrated within the labor market and among other developments.

REFERENCES

AMIRALIAN, M. L., PINTO, E. B., GHIRARDI, M. I., LICHTIG, I., MASINI, E. F., & PASQUALIN, L. Conceituando deficiência. In: **Revista de Saúde Pública**, São Paulo, v. 34, p. 97 - 103, Fevereiro 2000. Disponível em: https://www.scielosp.org/pdf/rsp/v34n1/1388.pdf >. Acesso em: 30 ago. 2022

ANDRADE, E. C. R., ANDRADE, J. L., FERREIRA, V. G., MARTINS, V. A., SCARPINELLI, M., URA, G., & TAMAE, R. Y. (2008). O papel do líder na inclusão de pessoas com necessidades especiais da empresa. **Revista Científica Eletrônica de Administração**, *São Paulo, ano VIII*, (14), 2008. Disponível em: <

http://www.faef.revista.inf.br/imagens_arquivos/arquivos_destaque/DwRPnle4DUopTR1_2013-4-30-12-25-22.pdf>. Acesso em: 24 nov. 2022.

ANDRELO, R. **As relações públicas e a educação corporativa:** uma interface possível [online]. São Paulo: Editora UNESP, 2016, 97 p. ISBN 978-85-6833-477-5. Disponível em: https://books.scielo.org/id/hwgqy/pdf/andrelo-9788568334775.pdf Acesso em: 03 nov 2022.

BARKLEY RA, FISCHER M, SMALLISH L, FLETCHER K. Does the treatment of attention-deficit/hyperactivity disorder with stimulants contribute to drug use/abuse? A 13-year prospective study. **Pediatrics**, 111(1):97-109, 2003. Disponível em: < https://publications.aap.org/pediatrics/article-abstract/111/1/97/28549/Does-the-Treatment-of-Attention-Deficit>. Acesso em: 22 out. 2022.

BIEDERMAN J, SPENCER T, WILENS T. Evidence-based pharmacotherapy for attention-deficit hyperactivity disorder. **Int J Neuropsychopharmacol**, 7(1):77-97, 2004.Disponível em: https://academic.oup.com/ijnp/article/7/1/77/944237?login=false. Acesso em: 25 nov. 2022.

BIEDERMAN J, MICK E, SURMAN C, DOYLE R, HAMMERNESS P, HARPOLD T. A randomized, placebo-controlled trial of OROS methylphenidate in adults with attention-deficit/hyperactivity disorder. **Biol psychiatry**, 59(9):829-35, 2006. Disponível em: < https://www.sciencedirect.com/science/article/abs/pii/S0006322305012072>. Acesso em: 14 nov. 2022.

BRASIL. **Artigo 93 da Lei nº 8.213 de 24 de julho de 1991**. Disponível em: < https://presrepublica.jusbrasil.com.br/legislacao/104108/lei-de-beneficios-da-previdencia-social-lei-8213-91#art-93>. Acesso em 01 jul. 2022.

BRITO, S.; BLANES, S. **Os desafios dos adultos diagnosticados com TDAH**. veja, 2022. Disponivel em: https://veja.abril.com.br/saude/os-desafios-dos-adultos-diagnosticados-comtdah/. Acesso em: 31 de ago. 2022.

CHIAVENATO, I. **Recursos humanos:** o capital humano das organizações. Rio de Janeiro: Elsiever/Campus, 2009. Acesso em: 31 de ago. 2022

COUTINHO, T.; FRANÇA, G. A pessoa com tdah no mercado de trabalho e o papel do psicopedagogo institucional, 2020. Disponível em: https://cadernosuninter.com/index.php/intersaberes/article/view/1366>. Acesso em: 26 Out 2022.

COUTINHO, T.; FRANÇA, G. A pessoa com TDAH no mercado de trabalho e o papel do psicopedagogo institucional, 2020. Disponível em:

https://cadernosuninter.com/index.php/intersaberes/article/view/1366. Acesso em: 26 out 2022.

DE ABREU, Juliana Andrade; MARQUES, Valéria. Gestão de pessoas com deficiência: um olhar da psicologia. **Simpósio de excelência em gestão e tecnologia**, v. 4, 2007. Disponível em: < https://www.aedb.br/seget/arquivos/artigos07/1308_Artigo%20gestao%20de%20pessoas%20com%20de ficiencia%20um%20olhar%20da%20psicologia%20SEGET07(2).pdf>. Acesso em: 24 Agosto 2022.

DSM-5. **Manual diagnóstico e estatístico de transtornos mentais** [recurso eletrônico] [American Psychiatric Association; tradução: Maria Inês Corrêa Nascimento ... et al.]; revisão técnica: Aristides Volpato Cordioli [et al.]. – 5. ed. – Dados eletrônicos. – Porto Alegre: Artmed, 2014. Disponível em: http://www.tdahmente.com/wpcontent/uploads/2018/08/Manual-Diagn%C3%B3stico-e-Estat%C3%ADstico-de-Transtornos-Mentais-DSM-5.pdf>. Acesso em: 03 nov. 2022.

FARAONE SV, SPENCER T, ALEARDI M, PAGANO C, BIEDERMAN J. Meta-analysis of the efficacy of methylphenidate for treating adult attention-deficit/hyperactivity disorder. **J Clin Psychopharmacol,** Feb24(1):24-9, 2004.>. Disponível em: https://journals.lww.com/psychopharmacology/Abstract/2004/02000/Meta_Analysis_of_the_Efficacy_of_Methylphenidate.5.aspx >. Acesso em: 21 out.2022

FERREIRA, P. V. C. Uma revisão teórica sobre o transtorno de déficit de atenção e hiperatividade (TDAH) e estratégias educacionais de atendimento ao aluno com TDAH. 2011. Acesso em: https://repositorio.ufc.br/handle/riufc/17551. Acesso: 14 nov. 2022.

KALBAG AS, LEVIN FR. Adult ADHD and substance abuse: diagnostic and treatment issues. **Subst Use Misuse**, 40(13-14):1955-81, 2005. Disponível em: https://www.tandfonline.com/doi/abs/10.1080/10826080500294858>. Acesso em: 07 set. 2022.

LAMBERT, K. & KINSLEY, C. H. **Neurociência clínica:** As bases neurobiológicas da saúde mental. Porto Alegre: Artmed. 2006. Disponível em: <

https://d1wqtxts1xzle7.cloudfront.net/53372755/Neurociencia_Clinica-

libre.pdf?1496447891=&response-content-

 $disposition=inline \% 3B+file name \% 3D Neuro ciencia_Clinica.pdf \& Expires=1670369294 \& Signature=aLcNkFLpGJ9NZHvsb6Awe0306sTeOc\sim npATxEtV-$

kuotDFOccc9jP~F5T2zxYnyPcirHDjk5qEs8gTlC~9LbC6ZSIR~P8swvK-

PljrekrWt4wJJX3AEkVOzlNn4wT30hCrzHl9Isak6RbsaPDInKNRuZKoCji-

dXwofdE9phFS9qcT~bH7UGNSEcCiHGhrRNNqa8rTG5J3Z9GYAqbjLge3dzl1VmlN8EgLetrOwVI7ax g__&Key-Pair-Id=APKAJLOHF5GGSLRBV4ZA>. Acesso em: 01 nov. 2022.

LOPES, R. M. F.; NASCIMENTO, R. F. L.; BANDEIRA, D. R.. Avaliação do transtorno de déficit de atenção/ hiperatividade em adultos (TDAH): uma revisão de literatura. **Avaliação Psicológica**, n. 4 v. 1, 2005, p. 6574. Disponível em: https://dialnet.unirioja.es/descarga/articulo/6674820.pdf>. Acesso: 23 out. 2022.

LOUZÃ, M. R.; MATTOS, P. Questões atuais no tratamento farmacológico do TDAH em adultos com metilfenidato. **Jornal Brasileiro de Psiquiatria**, *56*, 53-56, 2007. Disponível em: https://www.scielo.br/j/jbpsiq/a/Nsb8pxDB6TjyCbW4pLqy5ht/?lang=pt. Acesso em: 21 nov. 2022.

MATTOS, Paulo et al. Painel brasileiro de especialistas sobre diagnóstico do transtorno de déficit de atenção/hiperatividade (TDAH) em adultos. Rev Psiquiatr RS jan/abr 2006; n. 28,

NUTT DJ, FONE K, ASHERSON P, BRAMBLE D, HILL P, MATTHEWS K. British Association for Psychopharmacology. Evidence-based guidelines for management of attention-deficit/hyperactivity disorder in adolescents in transition to adult services and in adults: recommendations from the British Association for Psychopharmacology. **J Psychopharmacol**, 21(1):10-41, 2007. Disponível em: https://www.scielo.br/j/jbpsiq/a/Nsb8pxDB6TjyCbW4pLqy5ht/?lang=pt. Acesso em: 11 nov. 2022.

OMS - Organização Mundial da Saúde. Classificação de transtornos mentais e de comportamento da CID-10: descrições clínicas e diretrizes diagnósticas. Porto Alegre: Editora Artes Médicas;1993. Disponível: em https://www.revistapsicopedagogia.com.br/detalhes/188/transtorno-do-deficit-de-atencao-e-hiperatividade--tdah---o-que-os-educadores-sabem-">28>. Acesso em: 28 set 2022.

PASTURA, G.; MATTOS, P. Efeitos colaterais do metilfenidato. **Archives of Clinical Psychiatry** (São Paulo), 31, 100-104, 2004. Disponível em: <

https://www.scielo.br/j/rpc/a/sQDT8qkTXHYKngY5qM87z4F/abstract/?lang=pt>. Acesso em: 14 set. 2022.

RHODE, L. A. & HALPERN, R. Transtorno de déficit de atenção/hiperatividade: atualização. **Jornal de Pediatria**, 80, 2, 61-70, 2004. Disponível em: <

https://www.scielo.br/j/jped/a/vsv6yydfR59j8Tty9S8J8cq/abstract/?lang=pt>. Acesso em: 02 nov. 2022.

RODRIGUES, P. S.; PEREIRA, É. L. A percepção das pessoas com deficiência sobre o trabalho e a Lei de Cotas: uma revisão. In: **Physis: Revista de Saúde Coletiva**, Rio de Janeiro, v. 31 (1), n. e310114, 2021. Acesso em: 31 ago. 2022.

v. 1, p. 50-60. Disponível em:

<ttps://www.scielo.br/scielo.php?pid=S010181082006000100007&script=sci_arttext&tlng=pt.>. Acesso: 23 out. 2022.

SCHMITZ, M., POLANCZYK, G., & ROHDE, L. A. P. (2007). TDAH: remissão na adolescência e preditores de persistência em adultos. In: **Jornal brasileiro de psiquiatria**, *56*, 25-29, 2007. Disponível em: https://www.scielo.br/j/jbpsiq/a/rn6hZNktGwCM9nGXbn43sSy/abstract/?lang=pt. Acesso em: 01 set. 2022.

SPENCER T, WILENS T, BIEDERMAN J, FARAONE SV, ABLON JS, LAPEY K. A double-blind, crossover comparison of methylphenidate and placebo in adults with childhood-onset attention-deficit hyperactivity disorder. **Arch Gen Psychiatry**, 52(6):434-43, 1995. Disponível em: < https://jamanetwork.com/journals/jamapsychiatry/article-abstract/497097>. Acesso em: 02 nov. 2022.

SPENCER T, BIEDERMAN J, WILENS T. Stimulant treatment of adult attention-deficit/hyperactivity disorder. **Psychiatr Clin North Am**, 27(2):361-72, 2004. Disponível em:

https://www.psych.theclinics.com/article/S0193-953X(03)00118-7/fulltext. Acesso em: 07 nov. 2022.

SPENCER T, BIEDERMAN J, WILENS T, DOYLE R, SURMAN C, PRINCE J. A large, double-blind, randomized clinical trial of methylphenidate in the treatment of adults with attention-deficit/hyperactivity disorder. **Biol Psychiatry**, 57(5):456-63, 2005. Disponível em: <

https://www.sciencedirect.com/science/article/abs/pii/S0006322304012867>. Acesso em: 06 nov. 2022.

VALENTE, Andrea Lunardelli; DE MOURA, Simone Moreira. Trabalho, formação e TDAH: uma análise fundamentada na Teoria Crítica da Sociedade. **Imagens da Educação**, v. 8, n. 2, p. e43133-e43133, 2018.

VEJA. **Os desafios dos adultos diagnosticados com TDAH.** Publicado em 20 jan 2022, 19h00. Revista Veja. 2022. Disponível em: https://veja.abril.com.br/saude/os-desafios-dos-adultos-diagnosticados-comtdah/>. Acesso em: 22 set. 2022.