



doi.org/10.51891/rease.v9i1.8168

# ATTENTION DEFICIT DISORDER AND HYPERACTIVITY: UNDERSTANDING THE DIFFERENCE THAT CHALLENGES THE SCHOOL

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RESUMO: O objetivo deste trabalho é levar o leitor a refletir e desenvolver um olhar humanizador àqueles que são portadores do transtorno de déficit de atenção e hiperatividade (TDAH). Sujeitos portadores deste transtorno, principalmente crianças, em geral, são pessoas que possuem muita dificuldade de relacionamento social, devido aos caracteres apresentados, com padrões comportamentais negativistas, hostis. Compreender, aceitar e facilitar essas pessoas é torná-las inseridas, participantes, libertas. Autoras e coautoras de sua própria estória.

Palavras-chave: Transtorno. Co-mobilidade. Integração. Compreensão.

ABSTRACT: This paper has as its main purpose lead the readers think about and develops a humanized view to the people who have the Attention deficit hyperactivity disorder (ADHD). Folks who have disturb, mainly children in general have social relationship difficult due to the presented characters with negative patterns behavior, hostile. Understand, accept and facilitate this people is to make thandm insert, participant, free. Author and co-author of own story his.

Keywords: Disorder. Co-mobility. Integration. Comprehension.

### INTRODUCTION

In the mid-19th century, the first references related to hyperkinetic disorder appear. The nomenclature has undergone continuous changes. It has already been called "minimal brain injury", and was, in 1962, modified to "minimal brain dysfunction", understanding that the characteristic alterations of the syndrome are more related to nerve pathway dysfunctions than to lesions in them. Currently, the modern classification systems used in psychiatry, ICD-10 and DSM-IV, present similarities in diagnostic guidelines for the disorder, but use different nomenclatures (attention deficit/hyperactivity disorder in DSM-IV and hyperkinetic disorders in ICD-10).

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According to some scholars, the deficit disorder of attention and hyperactivity (ADHD) is one of the best known neuropsychiatric disorders in childhood, characterized by difficulty in modulating attention, controlling impulses and the child's ability to control his or her own level of motor activity, planning his/her objectives and strategies of share, due to low dopamine and/or norepinephrine concentration in the sinaptic regions of the frontal lobe.

As it defines (Shimizu: Miranda, 2021 apud Costa et al., 2020), " ADHD is a neurobiological disorder of genetic origin that appears in childhood and usually accompanies the individual until adulthood. It is observed when it presents discrepant behaviors with age and intelligence, which generates impairment in the aspect of social integration."

National and international studies place the prevalence of attention deficit/hyperactivity disorder (ADHD) between 3% and 6%, and are conducted with school-age children. The impact of this disorder on society is enormous, considering its high financial cost, stress on families, impairment in academic and vocational activities, as well as negative effects on the self-esteem of children and adolescents. Studies have shown that children with this syndrome have an increased risk of developing other psychiatric diseases in childhood, adolescence and adulthood (MUSZKAT, 2011).

The classic symptomatological triad of the syndrome is characterized by inattention, hyperactivity and impulsivity.

Inattention can be represented by behaviors that demonstrate difficulty maintaining focus, disorganization, easy distraction, rambling and lack of persistence, while hyperactivity/impulsivity can be represented by a high level of motor activity, extreme restlessness, hasty actions or social meddling." (Carneiro, Luiz Renato-2020.)

Inattention can be identified by the difficulty of paying attention to details or making mistakes due to carelessness in school and work activities; difficulty in maintaining attention in playful tasks or activities; not to listen when they speak to you; do not follow instructions and do not complete school, domestic or professional duties; difficulty in organizing tasks and activities; avoid, or are in a fight, of engaging in tasks that require constant mental effort; lose things necessary for tasks or activities; and be easily distracted by stimuli unrelated to the task and present forgetfulness in daily activities.

Attention is understood by the ability to focus on certain aspects of the current experience and exclude others (Gomes, Molhon, Cristodoulou & Ritter, 2000).





It is understood neuropsychologically as one of the components of executive functions (set of mental operations that allows us to start and develop an activity with to be achieved, through our own determination). Attention requires that the subject focus on the activity he is performing, so that his ability to do so that he/she can result in a satisfactory performance of what is being performed. Therefore, the importance of giving meaning to what is intended to be acquired as learning.

In the classroom the teacher will facilitate the understanding of the student, because language establishes a relationship between the learning that one wishes to introject and their experiential experiences, experiences of practicality of their daily life, and can give a closer meaning, which will facilitate assimilation of this content through the Proximal Development Zone (ZDP), which is the distance between the level of real development that is usually determined through the independent solution of problems and the level of potential development, determined through problems under the guidance of an adult or in collaboration with effective companions.

As stated (Oliveira, 2017 apud Costa et al., 2020), they may also present low tolerance to frustrations, emotional fragility, problems with self-esteem, among others. It is important to emphasize that in the school environment it is not only important to be attentive to the development of this individual with regard to learning, but also to the socio/emotional aspects that will favor their balance and social relations.

Hyperactivity is characterized by the frequent presence of the following characteristics: shaking hands or feet or rummaging in the chair; abandon your classroom chair or other situations in which you are expected to remain seated; too many running or climbing in situations where this is inappropriate; difficulty in playing or quietly engaging in leisure activities; often being on the move and speaking symptoms of impulsivity are: often giving hasty answers before the questions have been completed; have difficulty waiting your turn; and often interrupts or gets into other people's business.em demasia.

In many cases, the subject presents more than one disorder, which makes it difficult to rescue with the world that lives. Comorbidade is the term used to designate the occurrence of two or more disorders in the same individual.

Research shows a high comorbidity rate between ADHD and disruptive behavior disorders (challenging and conductopposed disorder), around 30% to 50%. The comorbidity rate is also significant with the following diseases: depression (15% to 20%); anxiety





disorders (around 25%); and learning disorders (10% to 25%). Several studies have also shown a high rate of comorbidity between ADHD and drug abuse or dependence in adolescence and, mainly, in adulthood (9% to 40%). It is also discussed whether ADHD alone is a risk factor for drug abuse or dependence in adolescence. It is known that it is very frequent to comorbidity of ADHD and conduct disorder, and that in turn it is associated with drug abuse/dependence.

In the school environment, the greatest challenge that permeates this context is related to lack of knowledge, information and understanding.

When talking about ADHD, most educators first associate with a restless, agitated, messy, hyperactive student, who does not for one minute, it is important to know that the picture can lead the student to have a problem of executive function, working memory and nonverbal operational; Selective attention, sustained attention, among others. Knowing what he is capable of and what he can develop is much more effective than having at hand a diagnosis with which the educator does not know how to proceed, so that the learning process of this learner is satisfactory.

Establish strategies that will enhance the learning of this student, using a didactics that meets their specific needs; Differentiated evaluation and organizational support may be the first step to understand the student's poor performance in their school development.

## LITERATURE REVIEW

The evolutionary history regarding the study on Attention Deficit Hyperactivit Disorder is long, arose in North America around 1917/1918, when there was an epidemic of encephalitis and it was found that children surviving this brain infection were sequelae in behavioral and cognitive terms.

Attention Deficit Disorder and Hyperactivity (ADHD) is a behavior disorder of neurobiological origin, characterized by symptoms such as difficulty in adapting to the school environment, distraction, impatience, agitation, difficulty obeying orders. This brain dysfunction occurs in the frontal orbital region, located in the front of the brain, behind the forehead, responsible for regulating attention Sustained self-control, inhibition of the behavior planned for the future. In some scientific research and studies, observed that there are changes in the functioning of some substances called Neurotransmitters who are





responsible for transmitting or passing information between the neurbetween one area and another. Basically these substances that find deficits dopamine and norepinephrine.

Etiologically, today it can be affirmed that ADHD is influenced by neurological and genetic factors, which are the main contributors to the onset of the disorder.

Neurologically, research points to a convergence regarding blood flow in the brain, through studies of brain electrical activities (computational techniques), studies with neuropsychological tests sensitive to frontal lobe dysfunctions, and study of neuroimaging (proton emission tomography (TEP), magnetic resonance imaging (MRI), and Functional Magnetic Resonance Imaging (IMRF).

Genetically, research begins to converge and studies are observed in the effect of certain genes on some brain structures and their functioning. However, non-genetic factors have already been identified, which involve biological risks, which cause neurological lesions, can lead to ADHD such as: alcohol, tobacco during pregnancy, premature delivery, lead poisoning, beatings and brain trauma.

The school is another social environment of the child who needs to be part of this rehabilitation. With educators, work consists beyond informative knowledge, guidance on valuing self-esteem, promoting greater integration with the social group, helping to develop positive behaviors and strengthen them, teaching to have a difficult self-controlof daily life (MUSZKAT, 2011).

When it comes to school performance, it is pertinent to remember that this is not only a space that learns a certain school content, but an environment that builds experiences, relationships of the subject with others and with the world around him.

Vigotski (1933/2017) reformulates the understanding of the aprendizagem solely focused on learning school content. For the author, learning has a prehistory, never starts from scratch and begins long before school learning. Even before the insertion into the school world the child already presents certain learning, for example, before starting the studies related to the programmatic contents, the child already has a certain knowledge of language, aritmetic, empiricals; however, the school experience drastically modifies the course of learning.

Training in cognitive skills, whose objective is to train the child in his/her ability to use self-control strategies, which implies teaching him compensatory skills to improve adaptation at home and at school, responding effectively to conflicting situations. In this





way, the child will learn to be less impulsive and will look for a solution whose behavior will be more appropriate. She will relearn how to make a new reading about the world around her, accepting with more tolerance the various interpretations given to the facts, bringing her actions closer to an expected pattern of behavior. That is, to provide the inclusion of all and the development of autonomy and self-direction of the student aiming to participate in the builders of their socio/emotional life.

In general, therapists use cognitive skills training procedures that include instruction, demonstration, pap isis representations, behavior assay, feedback of performance and positive reinforcement..

Teaching you the steps to a more concise and appropriate choice is the primary point to establish a new bond, where acceptance and affection are key factors for the motivation to accept rules and interact with more control of problem situations, as well associal relations.

## Legal advances, their insertion in the Educational system.

The inclusive educational process, Law No. 3,394/96 (Law of Guidelines and Basis, Brazil,1996), ensures the right of education to students with Learning Disabilities, in which the educational space needs to reorganize and revise the principles that I have included, because including is first and foremost favoring the child and the young a development in its broadest sense, valuing him as a citizen and opportunistic in his abilities.

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In this perspective, the objective is to make educators aware of the need to know and reflect the educational proposals conferred in the school space, because they do not always adequately meet the cognitive diversities existing in this environment.

The current model of Brazilian Public Policy in education demonstrates a growing development in this area, although we know the numerous challenges, whose success depends on strong articulations between various levels of government in the country, especially when political interests are linked to a social consciousness that tries increasingly to engage in this egalitarian struggle, making it consolidate what since 1996 has been agreed,





ensuring and assevering an educational project with more quality, within reach of various segments of society.

Tracing a timeline in relation to Laws, Decrees, Resolutions, Ordinances and International Documentation, which contributed to clarify society's need for the right of these individuals to education, among some, it can be highlighted:

- ≠ 1760; The educational process of inclusion emerges in France.
- 4 1824; In Brazil, Louis Braile creates the reading and writing system for the blind.
- ≠ 1854; In Brazil, the Institute for the deaf was created.
- ♣ 1957; The Brazilian Federal Government has taken over the education of the Disabled.
- ≠ 1961; The 1st Law of Guidelines and Bases of The Education of Exceptional Individuals appears.
- ♣ 1984; Law No. 7,853/89.
- 💶 1990; Jomtien Declaration (Thailand)- Education for all.
- ≠ 1994; Declaration of Salamanca.
- 4 2001 RESOLUTION MEC CNE /CEB2, Establishes the National Guidelines for Special Education in Basic Education.
- 4 2002; Law No. 10.436 , It offers about the Brazilian Sign Language.
- 4 2004; University For All Program(PROUNI).
- 4 2014. Implementation of the National Education Plan (PNE).
- 4 2015; Law No. 13,146, Brazilian Inclusion Law.
- 4 2021; Federal Law No. 14,254, which provides for full follow-up for students with dyslexia and ADHD, or other learning disorder.

Federal Law No. 14,254 (Brazil, 2021), establishes criteria as a way to guarantee rights to students with dyslexia and attention deficit hyperactivity disorder or other learning disabilities, the right acquired by students with disabilities and thus be able to enjoy conditions that will favor the construction of their learning process.

Increasing awareness and commitment to these students in the educational context is the first step that evidences the rethinking of an efficient educational process in which methodological active alters are sought that meets the specific needs of these students with strategies and actions that enable the construction of knowledge of these students.



# EDUCATIONAL PRACTICES, ANOTHER FACTOR EXCLUENT TO THE LEARNING PRCESSO OF THESE STUDENTS?

The educational process appears as the great challenge of schools, in a generalized way, for these students to build their knowledge. In general, teachers use traditional practices and need to review them.

It is important to always be reflecting that it is still felt in many schools the lack of a specific methodological work that favors students the process of acquiring knowledge of students with Attention Deficit Hyperactivity Disorder, when they are not satisfactorily developing their learning, making fragile this acquisition motivated by the lack of a public policy that will enable this practice and make new academic proposals more flexible that can promote and provide opportunities for the educational performance of these students in the school environment.

When one thinksthat this is the place that teaches and the student the subject who learns and realizes that in this space there is a specific group of students with a learning disorder called ADHD, who is not responding satisfactorily to educational goals, consequently there is an urgency to reevaluate this process.

Educational work needs to contemplate all students so that each one, through his/her specificity, can develop his/her skills and build knowledge. Through the explanation, one can reflect on the following educational actions that will resignify this process, such as:

- To build knowledge through pedagogical resources closer to your experiential reality, which facilitates assimilation and understanding of content with more meaning, with technological resources, which values your cognitive abilities.
- Use a clear, objective language, with contexts of your daily life practice.
- A curriculum appropriate to their reality, which includes educational content specific to these students. As a participant and builder of his knowledge, it is pertinent that the student participates in this adequacy, opting for content in which they have more skills.

The educational system does not simply correlate of process of teaching and learning as being a sequenced, repetitive process, organized in a way and reproduced of speeches, ideas and actions that does not allow the subject to exercise his citizenship, assuming his place in a broad conscious way interacting with the world, with himself and with the other.



#### CONCLUSION

Clarifying the educational activity is above all being aware of the need to seek alternatives that favor not only professional performance, but also the target audience contained in this educational process, which requires the educator, a continuous and systematic update, ensuring effectiveness in their decisions for improvement and quality of their actions.

Having a humanizing look at families, educators and the patient himself will certainly minimize the distance that interferes with the process of accepting the differences.

To make the individual aware of his need to BE and not only in EXISTING, is to help him tohis own destiny, as a thinker, author and co-author of his own story.

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