Psicologia Escolar e Educacional

PAPER

DOI: http://dx.doi.org/10.1590/2175-3539-2025-273065-T

Elocation - e273065

THE SO-CALLED ADHD AND POST-VACCINATION CLASSES DURING THE COVID-19 PANDEMIC

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ABSTRACT

In this article, we attempt to provide some explanations about the alleged Attention Deficit Hyperactivity Disorder (ADHD), addressing the phenomenon of the Medicalization of Education. We seek to do so with a critical view of the diagnoses production in the school context, especially after vaccination during the COVID-19 pandemic. The Medicalization of Education is a broad process, in which human aspects come to be seen as issues requiring medical intervention. It is a polysemic concept and encompasses exclusionary and reductionist practices. At a time when Brazil is beginning to resume life as we knew it before the COVID-19 pandemic, with the return of in-person classes, we see the return of advertisements and other forms of publicity, both for medications and hypothetical disorders that supposedly arise during school age. It is Psychology's job to monitor historical and social changes, seeking to rethink and collectively build demedicalizing practices. In this article, we seek to clarify concepts necessary for understanding these processes. We expose how ADHD is understood through both medicalizing and de-medicalizing logics, and we pose questions: How will children return to school? How will teachers be prepared to welcome students? How will we deal with inattentive children, given the current context and the two years they have spent in social isolation? We use Historical-Cultural Psychology as a basis for explaining the processes of human development, an understanding of which is essential for addressing the Medicalization of Education and ADHD. We hope to build opportunities for action and inspire other professionals.

Keywords: attention deficit hyperactivity disorder; medicalization of education; historical-cultural psychology; COVID-19

El supuesto ADHD y las clases tras vacunación en la pandemia de COVID-19

RESUMEN

En este artículo intentamos traer algunas explicaciones sobre el supuesto trastorno de déficit de atención con hiperactividad (ADHD), tratando del fenómeno de la Medicalización de la Educación. Buscamos hacer eso con una visión crítica acerca de la producción de diagnósticos en el contexto escolar, especialmente tras la vacunación en la pandemia de COVID-19. La Medicalización de la Educación es un proceso amplio, en el cual aspectos humanos pasan a ser vistos como cuestiones que necesitan de la intervención de la medicina. Es un concepto polisémico y abarca prácticas excluyentes y reduccionistas. En un momento en que Brasil empieza a retomar la vida como la conocíamos antes de la pandemia de COVID-19, con el retorno de las clases presenciales, vemos el retorno de las propagandas y otras formas de divulgación, tanto de medicamentos, como de trastornos hipotéticos que supuestamente surgen durante la edad escolar. Es labor de la Psicología acompañar los cambios históricas y sociales, buscando repensar e construir colectivamente prácticas desmedicalizantes. En esta escrita, buscamos explicitar conceptos necesarios para la comprensión de esos procesos, exponer la forma como el ADHD es entendido por la lógica medicalizante y desmedicalizante, y proponer cuestionamientos: ¿cómo los niños retornaran para la escuela? ¿Cómo será la preparación de profesores para recibir los alumnos? ¿Cómo lidiar con niños desatentas, debido al contexto actual y los dos años en que pasaron en aislamiento social? Tenemos la Psicología Histórico-Cultural como base para explicar los procesos del desarrollo humano, cuya comprensión es indispensable para trabajar la Medicalización de la Educación y el ADHD. Esperamos construir posibilidades de actuación e inspirar otros profesionales.

Palabras clave: trastorno de déficit de atención e hiperactividad; medicalización de la educación; psicología histórico-cultural; COVID-19

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RESUMO

Neste artigo intentamos trazer algumas explicações sobre o suposto Attention Defict Hyperactiviy Disorder (ADHD), tratando do fenômeno da Medicalização da Educação. Buscamos fazer isso com uma visão crítica acerca da produção de diagnósticos no contexto escolar, especialmente após a vacinação na pandemia de COVID-19. A Medicalização da Educação é um processo amplo, no qual aspectos humanos passam a ser vistos como questões que precisam da intervenção da medicina. É um conceito polissêmico e abarca práticas excludentes e reducionistas. Em um momento em que o Brasil começa a retomar a vida como a conhecíamos antes da pandemia de COVID-19, com a volta das aulas presenciais, vemos o retorno das propagandas e outras formas de divulgação, tanto de medicamentos, quanto de transtornos hipotéticos que supostamente surgem durante a idade escolar. É trabalho da Psicologia acompanhar as mudanças históricas e sociais, buscando repensar e construir coletivamente práticas desmedicalizantes. Nesta escrita, buscamos explicitar conceitos necessários para a compreensão desses processos, expomos a forma como o ADHD é entendido pela lógica medicalizante e desmedicalizante, e propomos questionamentos: como as crianças retornarão para escola? Como será a preparação de professores para receberem os alunos? Como lidar com crianças desatentas, devido ao contexto atual e os dois anos em que passaram em isolamento social? Temos a Psicologia Histórico-Cultural como base para explicar os processos do desenvolvimento humano, cuja compreensão é indispensável para trabalhar a Medicalização da Educação e o ADHD. Esperamos construir possibilidades de atuação e inspirar outros profissionais.

Palavras-chave: transtorno de déficit de atenção e hiperatividade; medicalização da educação; psicologia histórico-cultural; COVID-19

INTRODUCTION

In view of the pandemic context, the phenomenon of medicalization of education became stronger, revealing problems and challenges that have been part of education for a long time, way before COVID-19. Thus, in this study, we made the decision to focus on one of the best-known alleged disorders that is present in most schools: the so-called Attention Deficit Hyperactivity Disorder - ADHD. Our objective was to bring some explanations on ADHD, including the Medicalization of Education. The present study brings a critical view on the production of diagnostics in the school context, especially after vaccination in the COVID-19 pandemic.

We have Cultural-Historical Psychology as the basis, anchored on the overcoming of reductionisms of the empirical and idealistic conceptions, proposing a method to study man in his totality, while understanding man as a union of body and mind, a biological and social being that participates, modifies and consolidates within the historical process (Vygotsky, 1926-1927/1989b). The present study is of great importance because it brings tension to current practices, in addition to questioning and proposing attentive looks and practices for the post-vaccination period of the COVID-19 pandemic.

However, throughout this article we will approach the COVID-19 pandemic context, the educational scenario, and human development with a focus on Higher Psychological Functions, especially attention and ADHD. At the end, we will discuss the alleged disorder and the way the medicalization logic strengthens the idea of neurobiological illness, even without approval.

THE PANDEMIC CONTEXT AND THE EDUCATIONAL SCENARIO

The current scenario of confrontation against the pandemic has presented unprecedented challenges in all walks of life. This context brought significant changes to routines, habits, and relations in the social, educational, and work realm. One of these alterations was social distancing, which was regarded as a major strategy to stop the advancement of the disease, leading to a deceleration of the contamination curve and deaths, and consequently, the relief for the health system, which was collapsing in 2020.

According to Agência Brasil (2021)[1], the pandemic that leads to COVID-19 started (when the first case was identified in the country) in February of 2020, with the posterior declaration of community transmission in March of the same year. Thus, in April 2020, social isolation was adopted as a strategy and it remains valid until the moment of the writing of this study (last trimester of 2021); but with diverse flexibilizations that change from one state to another.

Social isolation brought evident gains concerning public health. However, considering the educational and school realm, we still have a lot to question on the effects of this measure to fight COVID-19. According to data from the main report produced by the UNICEF (2021)[2] on mental health during the pandemic (until the present moment), the impact of COVID-19 on the mental health and social wellbeing of children and adolescents might last for years. All over the world, one in every seven children was strongly affected by social isolation and 1.6 billion children felt some loss regarding the learning process in the educational realm. This brusque rupture in the routine, in the education, and in recreational

[1] In order to read the whole material: Agência Brasil. First case of *COVID-19 in Brazil reaches its first aniversary.* Empresa Brasil de Comunicação. Published on February 26, 2021. Recovered from https://agenciabrasil.ebc.com.br/saude/noticia/2021-02/primeiro-caso-de-covid-19-no-brasil-completa-um-ano

[2] Available at: https://data.unicef.org/resources/sowc-2021-dashboard-and-tables/

activities, in addition to the preoccupation of families with income and health has made these young people susceptible to anxiety, fear, irritation, restlessness and insecurity regarding the future (UNICEF, 2021). In the report named Situação Mundial da Infância 2021, or Childhood's Situation Worldwide (with data related to children and adults in 21 countries), an average percentage of 20% of adolescents and young people aged between 15 and 24 years reported that very often they feel depressed and with little interest in developing their routine activities (UNICEF, 2021).

Considering this information and the scandalous anachronisms in public policies in Brazil[3], we understand that the pandemic did more harm than people expected due to negligence by the public administration (2019-2022). We also believe that there is damage that is caused and intensified by this pandemic context and that might foment an increase in the number of diagnoses of alleged mental disorders, especially in the school contexts. A perfect scenario for the public power to deny its responsibility and their mistaken investments in health and education, attributing to the pandemic and to the individuals the causes of educational problems. Thus, there is space for biologizing diagnoses, which lead to the maintenance of the Education Medicalization Phenomenon.

In addition to all problems presented until now, families with children and adolescents who have been diagnosed with ADHD are in vulnerable situations. With the emergency implementation of Remote Education for the observance of the school calendar and the social distancing measures, the conditions of mental health and wellbeing of these families became even more challenging. According to Alves (2021), social isolation has contributed to the aggravation of mental health problems such as the intensification of symptoms of hyperactivities because outdoor or group activities were prohibited for two years. In addition, we also emphasize the abusive of electronic devices and the time children spent on screens during the social isolation. We see it as a topic in the debate on educational processes.

Thus, thinking of the challenges related to the educational process in the pandemic context, leads us to a comprehension of the possibility that the number of diagnoses of the alleged ADHD will rise with the return to onsite classes. Based on this imminent scenario, it becomes necessary to go deeper in the comprehension of human development and higher psychological functions. People are not born with such functions, they are socio-historically developed.

[3] The setbacks faced by the Brazilian people can be observed by means of several newstories such as this one: https://g1.globo.com/jornal-nacional/noticia/2021/09/24/anistia-internacional-lista-32-violacoes-de-direitos-humanos-e-retrocessos-nos-mil-dias-do-governo-bolsonaro.ghtml

HIGHER PSYCHOLOGICAL FUNCTIONS AND ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)

According to the Cultural-Historical Psychology, humans do not develop their humanity spontaneously. Leontiev (1978) affirms that becoming human happens by means of humanization, a process that happens through contact, the relation between individuals and the world. Besides, within this process, appropriation happens. People learn from knowledge that has been historically accumulated. Thus, learning and development are distinct processes but they are connected and depend on the relations between individuals and their peers and the environment.

According to Vygotsky (2021), social interaction facilitates the development of new systems for psychic functioning, that is, higher psychological functions. In the author's opinion it is fundamental that human development configures itself as a living process of interaction with culture, a perennial contradiction between the organic and the social dimension, between the natural and the historical realm.

Such development theory delas with the elementary and higher psychological functions. The former are of biological origin and characterized by reflex, or involuntary actions, and they are present in human beings as in animals. Higher psychological functions (HSF) include reasoning memory, attention, language, perception, and so on. They are the result of the mediated activity and of the knowledge that has been accumulated throughout history. Thus, only in man are they present (Lucci, 2006).

It is understood that by means of contact with culture, the acquisition of language and the mediations that man establishes and the constructed social relations, that there is the possibility for development of higher psychological functions. To Vygotsky (1989a), all HPFs result from the relation that individuals establish by using instruments and signals and by living with other subjects. The instruments refer to objects that can be used for the work, whereas the signals are psychological instruments that are similar to professional instruments that act on the human psychism by modifying it. The signal promotes the mediation of thought, of production, and of the reproduction of human activity. Thus, perception, voluntary attention, logical memory, concept formation and language development are, for example, higher psychological functions that at first develop socially and, later, get internalized by individuals (Vigotski, 2021).

We emphasize that, in this article, we will be focusing on attention, one of the HPFs because it is the object of attention when we think of the alleged ADHD. First of all, attention is observed in babies as a reflection provoked by a stimulus that draws attention, which can be, for example, a noise, a color, or a voice. With immersion in

the world, and in culture by means of mediated relations, it is primordial that children develop other means to attend to the needs of life in society.

Every day we get bombarded with information and, therefore, in order to be able to accomplish tasks we need to select information, which requires attention, and attention contributes to the organization of thought. According to Vygotsky and Luria (1996, p. 195), attention "deals with the organization of thought with the creation of a certain context, which prepares man for perception or for activity". That is the way a child manages, for example, to realize a school activity.

So we can see that attention depends on the human capacity to, by means of the selection of stimuli, develop voluntary control of behavior. Such capacity for the selection of stimuli and control of actions leads man to develop activities with specific purposes (Luria, 1991).

The so-called Attention Deficit Hyperactivity Disorder – ADHD, has permeated research works and discussions at school, where students who present learning difficulties are, mostly, sent to psychological and neurologic assessments in order to obtain a diagnosis that justifies not-learning. This movement takes place by means of a historical construction that attempts to measure behaviors with the objective to control them.

As we have already described, attention is a higher psychological function that evolves by means of contact with culture and with other individuals, that is, by means of established mediations. Considering that the students spent almost two years out of the school environment, without in-person contact with classmates and teachers, we bring important questions: if we are living in a moment that is filled with uncertainty and disorganization in the political, economic, and social realm, how can we expect that children be organized and focused? How will school create reasons that generate needs for learning? These are questions that might foment reflections that go against the existence of biologizing diagnoses.

The comprehension that attention and the other HPF are developed in the social relations, by means of mediation, is of vital importance lest we mistakenly analyze the phenomenon exclusively by means of biological perspective, because it can be developed in a context that leads to the "transformation of primitive and natural forms of attention to cultural forms, therefore essentially human" (Asbahr & Bernardes, 2007, p. 330).

Thus, the teacher, as mediator of the scientific content in the educational process might, by means of systematized and organized pedagogical activities, lead to the development of HPFs in individuals. On the other hand, what we have witnessed, and will discuss now, is the disregard of some processes, leading to a increasing number of ADHD diagnoses.

ADHD – "DIAGNOSES OUTSHINING HYPOCRISY"[4]

The excessive number of ADHD diagnoses is directly related to the phenomenon of the Medicalization of Education, thus it becomes necessary to explain the phenomenon. The Medicalization of Education is a comprehensive process in which what is part of the process, of development and learning for individuals, gets to be regarded as a medical issue. Within the medicalizing logic, there are modes of being and living that are accepted and regarded as valuable and decent, behaviors that are seen as correct or unacceptable, bodies that are appreciated or not. It is a reductionist process, in which there is a deletion of the histories of individuals, their families, their socio-economic context, and so on (Forum on Medicalization, 2019).

In addition, Viégas, Gomes and Oliveira (2013, p. 40), complement: "in this sense, the matter does not reduce itself simply to the use of medication, involving likewise the reduction of the complexity of life to specific aspects of health, with pathologization as its grimmest face".

The medicalizing phenomenon has targeted schools since colonial times. In the beginning, under religious authority that segregated and silenced. This power has gone from the hands of the church to modern medicine and, therefore, as Education advanced, the first health professionals appeared at schools with the objective to prevent any diseases or behaviors that were seen as undesired by society. Thinking of Brazil as an industrialized country, the intention was to prepare individuals for the job market, and psychology served the purpose of an ally in this model. Everyone that acted in unexpected ways was regarded as troublesome, insane, or sick and, thus, it was necessary for medicine to intervene and, in many cases, with medications (Barbosa, 2012; Serrati, 2020).

As part of this medicalizing logic, several "disabilities" were and remain "undiscovered", and one of them is ADHD. According to the Manual Diagnóstico e Estatístico de Transtornos Mentais (DSM-IV), or Diagnostic and Statistic Manual of Mental Disorders, ADHD is a disability that "consists of a persistent pattern of lack of attention and/or hyperactivity-impulsiveness that is more frequent or intense than the one that is typically observed in individuals at an equivalent level of development" (APA, 2003, p. 112).

However, in order to think of problems related to

[4]"There are diagnoses outshining hypocrisy" is the title of a põem by Tito Carvalhal. It was part of "Poesias Desmedicalizantes", (Demedicalizing Poetry), a project by the Forum on The Medicalization of Education and of Society. It can be accessed at: https://www.youtube.com/watch?v=GVuqiuiT4mY&t=47s

attention, it is necessary to understand the development of such functions. Attention is a HPF, that is, humans are not born with it. It is necessary to learn and pay attention. Something that sets us apart from animals is that we can lean on a given activity, reflect on it and on the reasons why we do what we do, in addition to giving significance to activity. The exercise of leaning over work, for example, is learned along development, according to the necessities generate by the environment and the relations (Vygotsky, 2001).

As we have seen in the definition of DSM-IV, everything comes down to the biological because it is believed that the cause of the problem is within the individual's bodies, specifically in the transmission of the recapture of neurotransmitters (norepinephrine and dopamine), while the frontal lobes are the cortical regions involved in this problem (Barkley, 2008; Brown, 2007). This notion that ADHD has a biological cause has potentialized the idea that the so-called disorder can be transmitted hereditarily, but there is no concrete evidence.

According to this logic, if the so-called disability has organic causes, that is, individual causes, it is believed that the best way for treatment is medication. With ADHD regarded as a neurobiological disease, tricyclic antidepressants, anti-hypertensive and methylphenidate, which is the bestselling one in Brazil, under the name Ritalin or Concerta), are the prescribed medications (Leite & Tuleski, 2011; Moraes, Silva, & Andrade, 2007).

The methylphenidate is a stimulant that activates the level of activity, alertness, or excitement in the central nervous systems. Its effect in the brain is to block the recapture of the neurotransmitter named dopamine as synaptic transmissions happen, which mitigates the symptoms of hyperactivity and increases control. On the other hand, there is a fact that is quite often left out of the explanation, Ritalin is a drug that might cause addiction and medical assistance becomes necessary in order to break the habit. The package leaflet contains possible side effect, such as: sadness, irritability, nausea, lack of appetite, headache, insomnia, convulsion, hallucinations, nervous tics and growth problems. In addition, it is also registered that it is not a medication for children. However, research works show that children at the age of four years get prescriptions and use the medication after their ADHD diagnosis (Leite & Tuleski, 2011).

Studies are produced and published in the recommendation report, made by the SUS National Commission of Incorporation of Technologies (Conitec), in March of 2021, affirm that there was no proved efficacy of the prescribed medications for the treatment of ADHD (CONITEC, 2021). Still, ADHD diagnoses have been produced in a rapid and superficial way, submitting children to medicalization and precocious medication, which can harm their psychological development. A research that was realized in five municipalities of Paraná points out that medications such as Risperidone and Ritalin are the most prescribed to students.

> We have observed that there is a pattern: in Child Education, the most often prescribed is Risperidone, though in Basic Education, Ritalin. We emphasize that the most often prescribed medication for children in Child Education is an antipsychotic. However, what is observed is that Risperidone has been widely used in the treatment for ADHD, according to the research realized by this study. We reiterate that it is necessary to debate the effects and consequences of prescribing an antipsychotic for children, whose organism is under construction and that display hyperactive or inattentive behaviors and, although they are undesired behavior patterns, especially in the school environment, do not consist of psychotic behaviors (Niero, Campos, Moreira, Polaquine, & Colaço, 2021, p. 38).

The diagnosis is clinical and in order to get it individuals are analyzed by means of tests such as Snap IV and ISC IV[5]. There are many questions, regarding diagnosis and regarding treatment. In the words of Tuleski and Leite (2011, p. 112): "The manual brings a series of questions that, in general, raise subjective and quite generical questions as well as criteria that do not agree with the logic of affirming that the lack-of-attention problem is of biological origin.".

At the educational institutions, in most of the cases, all hyperactive or lack-of-attention behavior is treated as a biological problem, which leads to complaints at school, most often involving a professional from the health area. Thus, diagnoses are made along with referrals for treatment and assistance, with the possibility of medication (Buiatti & Serrati, 2017). It is important for us to lean on these matters; however, it is equally important for us to take care so that we won't act in reductionist ways.

So far, we have demonstrated that the medicalizing logic focuses on the organic and biological, blaming individuals. It is an idea of "care" that seems to take the responsibility away from people, but, in fact blames them for being as they are and having the difficulties they have in their daily lives. In this case, it is urgent to comprehend that it is not possible to diagnose and medicate without questioning the various contexts that are part of the lives of individuals. Also, it is not possible, or at least it should not be, to work with diagnoses that have not been proved, especially with questionable medication.

Thus, we reach an essential point: the comprehension of the Medicalization phenomenon cannot happen by

[5] Wechsler Intelligence Scale (Wisc IV). Test that aims at measuring children's intellectual capacity.

means of formal logic. Cultural-historical Psychology is based on Dialectical Historical Materialism, according to which in formal logic the phenomenon is captured only in appearance. Therefore, Medicalization needs to be understood dialectically. Ianni (2011, p. 397) warns us that "reality does not make itself known immediately", that is, in order to get to know the phenomenon, we need to overcome an empirical investigation and go for its essence, which is only possible when we explain the phenomena of reality as being alive in its movement in the past and in the present.

In this sense, neither sides, the medicalizing logic or the demedicalizing one, go deep in neurobiological matters, thus perpetuating debates that reduce humans to the biological. That makes the concept of Medicalization, which is polysemic, also reduced, leading to little advancement in the transformations and creations of libertarian practices – in health and in education. We have seen modifications, but it is still a theme that needs to be worked by all scholars in the area.

Thus, resuming the pandemic context that was approached in the beginning of this article and matters involving the so-called ADHD, we wonder what the future holds for schools – and life, as a whole – when everyone returns to onsite mode. What will attention to children and adults be like after the pandemic[6]? This question has been asked by many professionals and one way to observe this was in the series named "ADHD: Everything at the same time."[7], which was produced by a TV show named Fantástico, on the Rede Globo channel, with the participation and presentation by Doctor Dráuzio Varella. The series looks like a commercial ad but it presented the so-called disorder as a disease, chemical faults in the brain and, for that reason, treatable with medication.

The advertisement and the promotion of medication for the so-called ADHD have become more intense, and the mentioned TV show exposed people who believed they were happy with the "results" generated by the medication – but once again, we ask ourselves: what exactly are the results, since there is no prove of the efficacy of the continued use of the medication? There is something behind the scenes that we are unaware of. It is the relation between medicine and the pharmaceutic industry. There are plenty of complaints about the way this industry, in some cases, has offered salaries, trips, restaurant meals, and gifts to doctors who are willing to prescribe certain medications, distribute free samples, or even, realize research works on a given drug. This serious question has been exposed for quite a while by several researchers (Mayor, 2003; Moynihan, 2003; Wager, 2003).

As these debates take place, the Federal Senate approved, on November 9th, 2021, Law nº 14.254/2021 (Brasil, 2021), an initiative by Senator Gerson Camata (MDB/ES), which regulates the integral assistance provided to students with dyslexia or Attention Deficit Hyperactivity Disorder (ADHD), or any other learning disorder". The coming back to onsite mode, whether at school or at work, will demand from each individual a process of re-socialization – an issue that has drawn attention in medicalizing discussions. This resuming of life as we knew it before COVID-19 will go through a process of readaptation, especially for young children, the ones that were in a process of attention development, for example, when the pandemic started. That is the reason why there is great concern with the aforementioned Law, because we believe that the number of ADHD diagnoses tends to increase. The ones that did not manage to learn of keep up with the expected pace of the institution get referred, increasingly promoting the exclusion of several students and possibly the medication of children.

Here, we also question, how children will return to school? What will be the preparation of teacher be like so that they can provide support to the children that did not make progress in their learning process (for example, in the process of literacy acquisition), but are at an age that is considered advanced for a given grade? How to deal with inattentive children, due to current context and the last two years spent in social isolation, without school? We know that there are questions that remain unanswered and we do not have the intention to present a step-by-step guide for everything. We understand that questions have the power to create movement for change and ideas.

We are in the face of real suffering, a real incapacity to pay attention and learning difficulties. We cannot deny that with the return to onsite mode, it is likely that we will have restless, inattentive children in the classroom. We do not question the existence of suffering or difficulties, but the way everything has been handled, in a reductionist and biologizing way, blaming individuals and making plurality impossible.

Thus, we have learned the importance of having more research works, as well as networks in order to provide support to students and professionals, whether they are teachers, educators, or healthcare professionals. We talk about network because we know that medicalization is a phenomenon that has been socially constructed, throughout history and, therefore, it is part of the lives of everyone. So, the process of awareness of medicalization processes becomes possible, or easier.

[6] We emphasize that, during the writing of this article, in November of 2021, the pandemic that leads to COVID-19 has not come to an end yet. However, with the advancement of vaccination, several Brazilian states have started coming back to onsite activities at schools, and at work too.

[7] Information on the series can be obtained by clicking on the following link: https://g1.globo.com/fantastico/quadros/tudo-ao-mesmo-tempo/noticia/2021/09/19/tdah-serie-com-drauzio-varella-revela-caminhos-para-aprender-a-conviver-com-transtorno-de-atencao.ghtml. The series can be watched at Globo Play, access: https://globoplay.globo.com/v/9872766/

Many possibilities of construction of demadicalizating practices, which go against so many referrals, diagnostics, and medications, can be created, repeated, and reformulated. We bring here some of the possible routes: the creation of a space for teachers, educators and other actors of school to be able to talk about their experiences during the pandemic period, and tell about the challenges, pains and fears they experienced. Spaces like these lead to a direct or indirect way to rethink daily practices in addition to fomenting the strengthening of connections (Serrati, 2020).

CONCLUSION

> It is necessary to have hope. Real hope. Not just waiting. Waiting is not hoping. It is just uncertain expectation. Hoping gives the energy to get up and go for it. Hoping means building, and never giving up! Hoping means moving on. Hoping means union to find the way. (Paulo Freire, 1992, pp. 110-111).

> We have seen simplistic solutions for the discomfort felt by this neoliberal capitalist society. Such solutions are attractive because people are in a hurry, the work is urgent, education and health are urgent matters. Society faces the process or resuming onsite mode, and many people talk about going "back to normal". We understand what people mean by that, they mean we are trying to resume life as we knew it. On the other hand, we cannot ignore the real movement going on. Much of what changed during the pandemic, it generated more profit for large companies and industries. Today, such changes, which we used to consider as temporary, gave become permanent because they are profitable.

In this line of reasoning, thinking about ADHD, we can also reflect about productivity received more attention, since many people were at home and had more time to dedicate to work (there would be no traffic or other obstacles to better productivity and quickness to accomplish tasks). With this idea, it becomes more evident to think of how to keep a dialogue with the post-pandemic world which is still driven by profit rather than by people's wellbeing.

If school has observed all these social historical changes, what type of individual is it forming nowadays? Should not these be the factors (human level of productivity and high performance for example) that will part of the excess of ADHD diagnosis – in children and in adults as well?

Our objective with this article was to produce explanations on the so-called Attention Deficit Hyperactivity Disorder (ADHD), including the Medicalization of education, with a critical vision of the production of diagnoses in the school context, especially after vaccination due to the COVID-19 pandemic.

We believe that we have reached the proposed objective. We aimed at analyzing the ADHD matter and the Medicalization of Education from a comprehensive point of view, observing phenomena beyond appearances, according to Vygotsky (1989a, p. 289), that the "basis of scientific observation consists of going out of the limits of the visible and go for meaning, which cannot be observed". We believe that, by rereading the article at a different moment, or even by rereading collectively, it is possible that new matters appear, just like plenty of new ideas for demedicalization practices so that we can construct other models to overcome the Medicalization of Education. We do not want of wish for a model that is uniquely correct, but rather for several models, so that the plurality of human beings can fit the educational scenario as well as the health area.

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Submitted on: March 17, 2023

Approved on: July 17, 2024

Section editor: Maria Júlia Lemes

Data availability: the data set that provides support to the results of this study is not publicly available.

This paper was translated from Portuguese by Régis Lima.