Inclusion of autistic student in regular education schools



Inclusão do aluno autista em escolas de ensino regular

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ABSTRACT

Everyone knows that inclusion can often be understood as a concept that aims to ensure the right to education. With this, this study had as main objective to analyze the way in which a student with Autism Spectrum Disorder (TEA) is included in Regular Education in the Lucas do Rio Verde Region - MT. The methodology was developed through a questionnaire conducted with teachers belonging to the Municipal Education Network. The results were analyzed and discussed based on the Political Pedagogical Project (PPP), which includes the educational assistance of students with autism, highlighting that teachers are in a constant process of preparation and adaptation to adequately serve this student. The same knowledge about the insertion of the autistic student in the education network, answered that they do not have a universal protocol, only a referral report provided by the health unit. With regard to the need to implement improvements, especially with regard to playful and educational materials, when structural. In terms of bonding, they stated that it happens naturally, but with a more individualized service, since they suffer from the difficulty of communication and social interaction.

Keywords: JTeaching, Autism Spectrum Disorder, Education. Inclusion.

RESUMO

Todos sabemos que a inclusão por muitas das vezes pode ser entendida como uma concepção que tem o objetivo de garantir direito à educação. Com isso, este estudo teve como principal objetivo analisar a forma como ocorre a inclusão de um aluno com o Transtorno do Espectro Autista (TEA) no Ensino Regular na Região de Lucas do Rio Verde – MT. A metodologia foi elaborada através de um questionário realizado com professores pertencentes à Rede Municipal de Educação. Os resultados foram analisados e discutidos

Revista Extensão em Foco

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tendo como base o Projeto Político Pedagógico (PPP) que contempla o atendimento educacional de estudantes com autismo, destacando que os professores estão em constante processo de preparação e adaptação para atender adequadamente esse aluno. O conhecimento do mesmo sobre a inserção do aluno autista na rede de ensino, responderam não possuir um protocolo universal, somente um laudo de encaminhamento fornecido pela unidade de saúde. No que se refere à necessidade de implantação de melhorias, especialmente com relação aos materiais lúdicos e pedagógicos, quando estruturais. Já na construção de vínculo, afirmaram que acontece de forma natural, mas com certo atendimento mais individualizado, já que os mesmos sofrem com a dificuldade de comunicação e interação social.

Palavras-chave: Ensino. Transtorno do Espectro Autista. Educação. Inclusão.

INTRODUÇÃO

Autism Spectrum Disorder (ASD), also known as Autistic Spectrum Condition (ASC) is a variety of neurodevelopmental mental disorders. It is characterized by generalized abnormalities of social interaction and communication (WORLD HEALTH ORGANIZATION, 2006) and restricted behavioral interests that affect development, especially in early childhood.

It is a Neurodevelopmental Disorder that includes different behavioral conditions, but all related to difficulties in social relationships, such as communication and language difficulties (impairment and use of imagination to deal with symbolic games), reciprocal social interaction (difficulty socializing and restrictive and repetitive behavior patterns) and restricted interests with repetitive and stereotyped behaviors, in addition to disorders of neuropsychological development, such as reduced eye contact and low facial expressiveness, according to Mattos (2019), this diagnosis is consistent with the International Classification of Diseases, Tenth Edition (ICD-10) and the Diagnostic and Statistical Manual of Mental Disorder: DSM-5 (BRASIL, 2016) (AMERICAN PSYCHIATRY ASSOCIATION. 2013; WEISSMAN & BRIDGEMOHAN, 2015; VOLKMAR & WIESNER, 2017).

Over the long term, this may include hyper- or hyporeactivity to sensory stimuli or unusual interest in sensory aspects of the environment, sensory sensitivity, difficulty processing verbal instructions in noisy environments, changes in activity, lack of understanding of verbal instructions, behavioral problems, and learning difficulties (MATTOS, 2019). Other studies also show destructive behavior, self-harm, and strong resistance to change. However, in some cases, intelligence levels are preserved, and it is

possible to observe musical, mathematical, memorization, drawing and painting skills, among others (SPITZER et al., 2002; PEDREIRA & COSTA, 2017).

However, its cause is still uncertain, but factors such as parental age and genetic conditions may be its main cause (AUTISM SPECTRUM DISORDER, 2021).

According to United Nations (UN, 2017), around 70 million people worldwide are affected by the disorder, 2 million of them in Brazil. This is aggravated by the fact that approximately 1% of the world's population (1 in 68 children) has an autism spectrum disorder, with a prevalence five times higher in boys.

Children with this disorder face several difficulties, which is why National Plan for the Rights of People with Disabilities was launched as part of the Decree n° 7,612 of November 17, 2011. The Health Care Network for People with Disabilities within the Unified Health System (Sistema Único de Saúde - SUS) was established by Law n° 12,764 of December 27, 2012, and Ordinance n° 793/GM/MS of April 24, 2012, established the National Policy for the Protection of People with Autism Spectrum Disorders, which establishes and guarantees comprehensive case for people with ASD. According to the Psychosocial Care Network and the Ministry of Health, this includes the Guidelines for Rehabilitation Care for People with Autism Spectrum Disorders and the Line of Care for Comprehensive Care for People with Autism Spectrum Disorders and their Families in the Unified Health System (BRASIL, 2013; BRASIL, 2014).

However, it was the Inclusive Education Program: Right to Diversity that inclusive education became widespread in the country, with the aim of developing a process of training managers and educators for quality special education, based on a standard of teachers, management, infrastructure and adequate teaching resources, since people with these disorders have the right to ordinary schooling, at all levels, stages and modalities of education, as well as to receive the necessary support to meet specific individual needs throughout their school career, according to the Accessible School Program, based on Resolution/FNDE no. 27 of July 27, 2012 and the National Policy for Special Education from the Perspective of Inclusive Education through Specialized Educational Assistance (AEE).

This type of specialized assistance offered by teachers contributes to improving the quality of education in public school systems, especially when it is offered through the Continuing Education Program for Special Education Teachers (RENAFOR), established by Decree No. 6,755 of 2009, which provides these professionals with courses at the

extension, improvement, and specialization levels, both in face-to-face and distance learning modalities.

Considering the importance of the subject and the limitations and difficulties still faced by teachers and schools in dealing with situations involving the inclusion of children with autism in regular classrooms, this study aims to analyze how this inclusion occurs in regular education in the region of Lucas do Rio Verde - MT in schools belonging to the Municipal Education Network.

Identify the forms of specialized care and reveal the main structural adaptations required, through a methodology characterized as qualitative and exploratory, since we sought greater knowledge about a subject in order to later carry out more in-depth research on the subject.

METHODOLOGY

To answer the problem of this study, the research is classified as qualitative, according to Minayo (1995), it responds to specific questions and cannot be quantified, corresponding to a deeper space of relationships of processes and phenomena that cannot be reduced to the operationalization of variables. For data collection, a printed questionnaire was prepared, using closed questions, which, according to Alves (2015), is defined as a data collection instrument consisting of an ordered series of questions that must be answered in writing and without the presence of the interviewer.

The questioning was complemented by a justification, where each respondent had the opportunity to explain why he or she had chosen the alternative. In this sense, this study aims to promote a more active communication between the school and the community, to find ways to help solve these problems and enable the inclusion of these people in society, as well as the possibility of developing future policies aimed at the educational context, contributing to the empowerment of autistic people, building a culture of respect for differences and an increasingly inclusive society.

To identify the proposed objectives of the research, the form is composed of seventeen questions aimed at describing how the process of educational integration of autistic students takes place, recognizing the main characteristics, evaluating, and identifying the forms of specialized care and describing the possible structural adaptations needed in the school for this to happen found.

It was then sent to each educational institution belonging to the Regular Municipal Education Network in the region of Lucas do Rio Verde-MT, to collect data from teachers and then analyze the results.

RESULT AND DISCUSSION

Of the teachers evaluated, 87% were female and 13% male, with a range of ages, with 12.5% under 30, 37.5% between 31 and 40, and 50% between 41 and 50. Of this group, 100% have a degree in education and 12% have a specialization. Regarding the length of time they have been teaching, 50% say they have been teaching for less than 5 years, 12.5% between 6 and 10 years and 37% for more than 11 years.

From the above data, we can see that the professionals in the community network are an experienced teaching staff, but with little training since most of them don't have a specialization. Regarding the level of education in which the teachers work, we can see that 37.5% work in kindergartens, 25% in preschools and 25% in primary schools.

Therefore, knowing the characteristics of the teachers to be assessed, their knowledge about the inclusion of autistic students in the school system was evaluated. They were asked about the inclusion of autistic students in urban schools, especially about the existence of a protocol for the referral of autistic students. In response to this question, 100% replied that there is no general protocol to be followed, but only a referral report from the health unit, where the doctor issues a document that is sent directly to the coordinator or director of the school unit, which gives the autistic student the right to education.

However, according to Technical Note N 4/2014/MEC/SECADI/DPEE, Specialized Educational Assistance (SEA) can be provided without the need for a medical report or any other justification other than the student's sole request, given their specificities. According to Neves (2018), medical reports often indicate only some of the characteristics presented by the child during the consultation, which are inconclusive and imprecise for such a diagnosis, which requires a more in-depth investigation and examination.

(...) the attribution of a diagnosis can facilitates the knowledge and prognosis of a given condition and the consequent communication between professionals. (...) Particularly in the case of autism, many cases do not fit neatly into a single category. The very terms 'autistic spectrum' or 'autistic syndromes' reflect this panorama of ambiguity (...) the diagnosis ceases to be

a guideline for the implementation of proposals and takes the form of a mere 'label', losing its function. There is a risk of adopting a stereotyped profile of the individual, to the detriment of recognizing his or her individuality. One of the alternatives for dealing with this risk could perhaps be, once again, interdisciplinarity - different sources of information and attitudes towards the phenomenon to be recognized, which would represent more than the sum of the isolated experiences of each professional. (...) the application of these criteria is still strictly dependent on the experience and sensitivity of neuropsychiatrists and clinical psychologists. (...) There are no standardized tests for diagnosing autism as there are for mental retardation (MARTINS, PREUSSLER & ZAVASCHI, 2002).

As stated in Law No. 12.764 of December 27, 2012, in Art. 7, the school director or competent authority who refuses to enroll a student with autism spectrum disorder or any other type of disability shall be punished with a fine of 3 (three) to 20 (twenty) minimum wages (BRASIL, 1988; BRASIL, 2012).

The teachers said that according to the school where they work, there is a limit of only one autistic student per class because they need a lot of attention. According to Law 7.853/89, all schools are obliged to accept the enrollment of students with disabilities - and it makes it a crime to refuse this right. Article 8 states that it is a crime, punishable by 2 to 5 years imprisonment and a fine, to refuse, charge additional fees, suspend, postpone, cancel or cause to be cancelled the enrollment of a student in an educational institution of any course or degree, public or private, because of his or her disability.

Similarly: Based on Technical Note N 4/2014/MEC/SECADI/DPEE, Specialized Educational Assistance (SEA) may be provided without the need for a report or other justification that is not the sole request of the student, given his or her particularities.

As a result, when the student is placed in the class, information about the autistic student is exchanged between the coordinator and the teacher, in particular so that the latter has an overall knowledge of the student's main needs in advance and whether there will be monitors to help meet their needs. Law no. 12.764 of December 27, 2012, also establishes in its only paragraph that, in cases of proven need, the person with autism spectrum disorder included in ordinary regular education classes, pursuant to the provisions of item IV of art. 2, has the right to a specialized companion (BRASIL, 2012).

Regarding the need to implement some kind of improvement in the care and development of autistic students, we can see that 75% responded that there is still a need to improve the care and development of autistic students, especially about the materials provided, such as playful and pedagogical materials, especially to facilitate the care of

autistic students. In this way, the school provides good care, through monitors, where learning specialties are met using different methodologies, facilitating learning and intellectual development.

In order to identify the forms of specialized care, they were asked about the Pedagogical Policy Project (PPP) provided by the school, especially if it considers the educational needs of the teaching and learning process of autistic students. 100% answered yes, since the Law No. 13.146 of July 6, 2015, which establishes the Brazilian Law for the Inclusion of People with Disabilities (Statute of People with Disabilities) (Law No. 13.146) supports these individuals, according to Brasil (2015) in its

Art. 1: The Brazilian Law for the Inclusion of Persons with Disabilities (Statute of Persons with Disabilities) is hereby established, with the aim of guaranteeing and promoting, on equal terms, the exercise of fundamental rights and freedoms by persons with disabilities, with a view to their social inclusion and citizenship (BRASIL, 2015).

According to Lemos (2018), it also defines a disabled person as: "a person who has a long-term physical, mental, intellectual, or sensory impairment.

Article 2 states that It is the duty of the State, society and the family to ensure, as a matter of priority, the realization of the rights of persons with disabilities to life, health, sexuality, paternity and maternity, food, housing, education, vocational training, work, social security, habilitation and rehabilitation, transport, accessibility, culture, sport, tourism, leisure, information, communication, scientific and technological progress, dignity, respect, freedom, family and community life, among others, deriving from the Federal Constitution, the Convention on the Rights of Persons with Disabilities and its Optional Protocol, and the laws and other regulations that guarantee their personal, social and economic well-being (LEMOS, 2018).

In this way, inclusion provides for school integration in a complete and systematic way, where all students, without exception, must be included in the school environment, with ESA rooms, with multifunctional resources and adapted to children with disabilities.

When evaluating the affective aspect between teachers and students, they were asked about the main difficulties in the care and development of the learning process of autistic students, and 100% said that there are many obstacles, especially in term.

Above all, inclusion in general is advancing more and more every day, especially in mainstream schools, where parents of so-called "normal" children often don't understand the benefits their children can get from having an autistic person in the classroom, learning their differences from an early age, making it an enriching process.

For the autistic child, it allows them to develop and increase their potential, as well as being the only place where they can live socially (CAMPOS, 2016).

According to Lemos (2018), one of the fundamental objectives of the Federal Constitution of 1988 is "to promote the good of all, without prejudice to origin, race, sex, color, age or any other form of discrimination," according to Article 3, item IV. Brazil (1988) establishes.

Article 205 establishes education as a right for all, guaranteeing the full development of the person, the exercise of citizenship and qualification for work. Article 206, item I, establishes "equal conditions of access and continuity in school" as one of the principles of education, and guarantees, as a duty of the State, the provision of specialized educational care for persons with special needs, preferably in the regular school system (art. 208) (BRASIL, 1988)

According to the Salamanca Declaration, created in 1994, it describes in more detail special education within the regular (and mainstream) education system.

(...) the development of inclusive schools serving a wide range of pupils in both rural and urban areas requires the articulation of a clear and strong policy of inclusion together with adequate financial provision, an effective public information effort to combat prejudice and create informed and positive attitudes, a comprehensive program of professional guidance and training, and the provision of necessary support services. (...) Changes in all of the following aspects of schooling, as well as in many others, are necessary for the contribution of successful inclusive schools: curriculum, buildings, school organization, pedagogy, assessment, personnel, school philosophy, and extracurricular activities (SALAMANCA, 1994).

The Actions describe the right of everyone to education and combat discriminatory attitudes. This document also describes the duties of governments, which must "adopt the principle of inclusive education in the form of laws or policies, enrolling all children in regular schools unless there are strong reasons to do otherwise" (SALAMANCA, 1994). In this sense, legislation has been organized and enacted over the years to meet the special needs of all subjects, with or without disabilities (UNESCO, 1994, MELO, 2016).

However, in cases where ASD is diagnosed, it is mandatory that the child be included in regular education networks, and it is a right that they have a specialized companion to meet their needs. In this sense, Law No. 13.146 of 2015 was created, which, through Chapter IV in Art. 27 and Art. 28 (BRASIL, 2015) that

Art. 27 states that education is the right of persons with disabilities, ensuring an inclusive education system at all levels and lifelong learning, in order to achieve the maximum development of their physical, sensory, intellectual and social talents and abilities, according to their characteristics, interests and learning needs. Sole paragraph. It is the duty of the State, the family, the school community and society to ensure quality education for persons with disabilities and to protect them from all forms of violence, neglect and discrimination. Art. 28 states that it is the responsibility of the public authorities to ensure, create, develop, implement, promote, monitor and evaluate: I - an inclusive educational system at all levels and modalities, as well as lifelong learning; II - the improvement of educational systems in order to guarantee conditions of access, continuity, participation and learning, through the provision of services and accessible resources that eliminate barriers and promote full inclusion; III - a pedagogical project that institutionalizes specialized pedagogical care, as well as other services and reasonable adaptations, to meet the characteristics of students with disabilities and guarantee their full access to the curriculum on equal terms, promoting the achievement and exercise of their autonomy; IV - the provision of bilingual education, in Libras as the first language and in the written modality of the Portuguese language.

This underscores the importance of parents and family members knowing about this law. This is because it will be very important for their children to be in the school environment knowing their rights. This argument is in line with Law No. 4.024, the National Education Guidelines and Basic Law (LDB) of 1961, which guarantees the right to education in regular schools for students with disabilities or giftedness. However, in 1996, Law No. 9,394 was enacted to guarantee "equality and conditions of access and permanence in school," and adopted a new type of education for "students with special needs," as well as Law No. 5,692 of August 11, 1971, which establishes guidelines and bases for education in the first and second grades (BRASIL, 1961; BRASIL, 1971; BRASIL, 1996). According to Lemos (2018), the Statute of the Child and Adolescent (ECA) through Law No. 8.069 of 1990 (BRASIL, 1990; BRASIL, 2017) establishes.

(...) No child or adolescent shall be subjected to any form of neglect, discrimination, exploitation, violence, cruelty or oppression, and any act or omission contrary to their fundamental rights shall be punishable by law, and article 55 reinforces this by stating that "parents or guardians have the obligation to enroll their children or wards in the regular school system" (LEMOS, 2018).

The same author describes through the National Policy for Special Education from the Perspective of Inclusive Education according to Brasil (2008)

(...) to ensure the inclusion of students with disabilities, global development disorders and high abilities, guiding education systems to guarantee: access to regular education, with participation, learning and continuity at the highest levels of education; transversality of the special education modality, from early childhood education to higher The Actions describe the right of everyone to

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However, the students have behaviors that end up making it a challenging process where the teacher has to find new ways of interacting with the autistic student every day, looking for new ways to teach and socialize, always designing interesting and challenging activities to get the student's attention. However, when it comes to building a bond between the teacher and the autistic student, 100% said that this process is natural. Table 1 shows the process of each affectivity.

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Table 1 – Affectivity process.

Individual	Process
1	Little by little I've created a bond with the child, and I try to deal with her
	every day.
2	It was slower, but with calm and patience.
3	They're very affectionate, so you must show them affection because they
	just want to be loved. And as a teacher, I learn more from them every day.
4	They have his moments, but we have a relationship of great affection,
	respect and understanding.
5	I'm grateful that I always have students with difficulties in my class. With
	this year's, we have a very good relationship where I understand they, and
	they understand me.
6	It took a long time to bond, he just wanted to be left alone. But with a lot
	of patience, we now have a loving and affectionate relationship.
7	We're very affectionate, even when I draw attention to certain things, he
	can understand why I'm drawing attention to him. I have tremendous
	affection for my student.
8	Our process happened naturally, even with the monitor at her side all the
	time, she always showed me affection.
	·

Source: Research data, 2019.

With the above table in mind, according to the article Affectivity and the teaching-learning process, the contributions of Mahoney & Almeida (2005) stand out.

(...) It refers to the capacity, the disposition of the human being to be affected by the external/internal world through sensations linked to pleasant or unpleasant tones; to be affected is to react with internal/external activities that the situation arouses; The theory points to three distinct, successive moments in the evolution of affectivity: Emotion, feeling and passion; the three result from organic and social factors and correspond to different configurations; in emotion, there is a predominance of physiological activation; in feeling, of representational activation; in passion, of self-control activation (MAHONEY & ALMEIDA, 2005).

However, teachers need to know the importance of a good emotional bond with these students, providing responses that lead to the development of both body and mind. Depending on the degree of the autistic student's disorder, special care is needed, especially in the socialization process, so we asked whether there is good communication between teacher and student, or whether special care is needed and how the socialization process takes place. In both approaches, 100% said yes, but the behavior can vary from case to case.

However, autistic students adapt to classroom routines, where 87.5% said they found it easy and 12.5% said they found it difficult, so the lack of access to diagnostic information hinders a better understanding of students with ASD. Araujo & Araujo (2019) point out that student-teacher interactions are carried out individually, where curricular adaptations are carried out in a way that they motivate the student with autism to a certain exclusive attention, that is, activities must be adapted so that inclusion occurs (MELO, 2016, LEMOS, 2018). Table 2 shows the arguments given by teachers on this issue.

Table 2 – Autistic students' adaptation to classroom routines.

Individ ual	Process
1	It depends on the level of autism.
2	My student does. Sometimes they want to break out of the routine, but they
	understand when I say no at that moment.
3	Follow the whole routine with the class.
4	Treatment with medication allows the student to adapt.
5	They have an after-hours service.
6	Autistic children adapt easily to the routines proposed.
7	It depends, because when there's a different activity they gets quite agitated.

Fonte: Dados da Pesquisa, 2019.

Looking at the table, it is possible to see and understand that autistic students can easily adapt over time, but the degree of autism the student has can be a determining factor.

In this way, the Ministry of Health (MoH) establishes the importance of the ICD-10 diagnostic classification and emphasizes the clinical relevance based on observations of the child's signs and symptoms (COIMBRA, 2020). It can have a classification from mild to severe.

Level 1 - Inflexibility of behavior causes significant interference with functioning in one or more contexts. Difficulty changing activities. Problems with organization and planning are barriers to independence; Level 2 - Inflexibility of behavior, difficulty coping with change, or other restrictive/repetitive behaviors occur frequently enough to be obvious to the casual observer and interfere with functioning in a variety of contexts. Distress and/or difficulty shifting focus or actions; Level 3 - Inflexibility of behavior, extreme difficulty coping with change, or other restricted/repetitive behaviors significantly interfere with functioning in all areas. Great distress/difficulty changing focus or actions (DSM-V, 2014).

Rosa (2018) points out that there are still difficulties in fully integrating these students with ASD into the school environment. Thus, for Glat & Pletsch (2010), it is the responsibility of the school to guarantee the permanence, attendance, participation and especially the development of all students as a "socio-cultural" education, with access to the common teaching class, with participation, development, interaction and specialized support when necessary.

Neves (2018) states that the educational care offered to children with ASD is based on a mask of ignorance and lack of training provided by professionals, sometimes labeling, classifying and stigmatizing the child, with a series of political-administrative barriers and obstacles (supervisory municipal secretariats, completed reports, projects at school, limited time, among others) that can create difficulties for the educational care of these children.

In support of this idea, Orrù (2016) points out that autistic people are learners and make a difference in the teaching process and in the quality of the dialogic social relationships favored in the different learning spaces. For Silva (2015), the school should not only focus on behavioral or psychological personality changes that may exist differently in students with autism (CASTRO, A. C. & GIFFONI, 2017).

For Pedreira & Costa (2017), teacher qualification is necessary because it refers to the quality of teaching, teacher training and practice, since teachers in school institutions are the agents responsible for social transformation. In the historical context of teacher training in our country, it is often treated with disregard, because until then there was no need for a qualified professional, let alone an education that explored the child's development in its entirety. During the presentation of the school's structural adaptations to accommodate autistic students, we were asked if there was a need to adapt the classroom structure observed in Table 3.

Table 3 - The structure of the classrooms must be adapted.

Individua	Justify	
1		
YES		
1	We need to develop playful lessons for him so that his suggestion is	
	different from the other students in the class.	
2	We moved to a bigger room because he felt suffocated in the other room.	
	He wanted more space.	
3	We had to move the room downstairs. He was afraid of heights	
4	At first, I had a hard time coming up with an activity that would get his	
4	attention. But today I've got it figured out.	
NO		
5	Everything has been normal so far in my classroom.	
6	The student accepts the routine. The content is already developed with	
	something in mind so that the child can participate and develop.	
7	Because the school has a suitable structure for the child's adaptation.	
8	As she is mildly autistic, she has already adapted to the activities of the	
	other students. But even so, with the same content I look for activities that	
	are easier to solve.	

Source: Research data, 2019.

In this way, it is possible to identify physical changes in the physical space of the classroom and the school, most of which had to be adapted to accommodate autistic students. The schools in the community already have adequate space for these children with disabilities and disorders.

However, when it comes to the teaching materials used in class, there is a need for specific materials to support them, and again, the teachers said that yes, the school provides these materials, and even the teachers themselves are always trying to innovate methodological ways for students to learn. According to the National Institute for Educational Studies and Research Anísio Teixeira (INEP), in 2017, 61.3% of Brazilian schools had students with disabilities included in regular classes (ROSA, 2018). However, according to the school census conducted in the same year, 98.9% of these students were included in regular classes (BRASIL, 2017).

According to the Program for the Implementation of Multifunctional Resource Rooms, based on Decree No. 7.611 of 2011 and Ordinance No. 13 of 2007, which provides specialized educational care, the school must provide a set of computer equipment, furniture, teaching materials and accessibility to regular public schools (BRASIL, 2007).

According to Rosa (2018), schools must provide effective access conditions to all citizens who need their services, whether they are disabled or not (DAMASO, 2011). The same authors point out that changes in the environment can be implemented through legislation, policy changes, or technological developments that create accessibility in the environment.

The Accessible School Transportation Program, based on the FNDE Resolution No. 12 of 2012, defines the criteria for the continuous cash benefit (BPC) of social assistance (DUARTE et al., 2017), which adheres to the School Path Program, which aims to acquire accessible vehicles for school transportation (BRASIL, 2012). However, we can see from the results that they are similar to those found by Lemos (2018), especially in teacher training, where the lack of training for professionals with broad and deep knowledge of the development of children with autism weakens the teaching process and limits the conditions for learning school content. In addition, Barbosa, Alves & Martins (2010) point out that the teacher needs to know the peculiarities of each student, in order to identify their possibilities and difficulties, thus promoting their development, regardless of the condition they present (BARBOSA, ALVES & MARTINS, 2010).

According to Neves (2018), schools should better monitor the schooling process of children with ASD. Inclusive education requires, above all, prepared teachers with knowledge about the disabilities and also about the potential of each student, which is a challenge every day, and it is the duty of the teacher to believe in their students and to always be up to date.

FINAL CONSIDERATIONS

Identify the forms of specialized care for autistic students; for example, teachers pointed out that the school's Political Pedagogical Plan provides for the inclusion and care of the educational needs of students with neurodevelopmental disorders such as ASD. Progress is still limited due to the severity of the disorder, which makes it a challenge for educational professionals, especially since many of the behaviors displayed by these

individuals in the school environment may still be related to educational or psychological issues.

Among the main factors evaluated for autism were behavioral changes, lack of social interaction and eye contact, language deficits, motor limitations, depression, hyperactivity, self-injury, tantrums and sudden rages, seizures, and sensitivity to tactile stimuli. In addition to low IQ (severe mental retardation), normal or gifted, changes in motor coordination, difficulty cooperating in carrying out hygiene instructions, among others.

Given this situation, it is clear how important it is for teachers to be trained to work with these biological, neurological, and metabolic differences in students with ASD, in addition to the work of a trained multidisciplinary team and the involvement of parents or responsible family members.

As a result, most teachers still feel unprepared to work with students with ASD. Training, sharing of experiences, study groups, technical guidance from specialists and increased knowledge are needed to help these professionals feel more confident in dealing with students with this symptom. In addition to structural adaptations to the school, differentiated care with a monitor to meet their needs, help with play and educational activities.

BIBLIOGRAPHICAL REFERENCES

APA. American Psychiatric Association. **Diagnostic and statistical manual of mental disorders**. 5th ed. Arlington, VA, American Psychiatric Publishing, 2013.

ARAUJO, F. A. & ARAÚJO, M. P. M. **Jogos e brincadeiras para crianças autistas**: possibilidades nas aulas de educação física. Anais do Seminário Nacional de Educação Especial e do Seminário Capixaba de Educação Inclusiva, v. 2, p. 283-299, 2019.

ALVES, L. da S. **Autismo e relação familiar**: Contribuições da logoterapia para a autotranscendência. 2015. Disponível em dspace.bc.uepb.edu.br. Acesso em dezembro de 2019.

AMERICAN PSYCHIATRIC ASSOCIATION, et al. *DSM-5*: Manual diagnóstico e estatístico de transtornos mentais. Artmed Editora, 2014.

BARBOSA, I. G., ALVES, N. N. L. & MARTINS, T. A. T. Organização do trabalho pedagógico na educação infantil. In.: OLIVEIRA, D. A., DUARTE, A. M. C. &

VIEIRA, L. M. F. Dicionário: trabalho, profissão e condição docente. Belo Horizonte: UFMG, 2010.

BRASIL, Lei nº 5.692, de 11 de agosto de 1971. **Fixa diretrizes e bases para o ensino de 1º e 2º graus, e dá outras providências**. Diário oficial da União. Disponível em www.planalto.gov.br. Acesso em dezembro de 2019.

BRASIL, 1988. **Constituição Federal – Planalto**. Disponível em www.planalto.gov.br. Acesso em dezembro de 2019.

BRASIL. 1990. **Estatuto da Criança e do Adolescente** (ECA). Disponível em www.planalto.gov.br. Acesso em dezembro de 2019.

BRASIL. Secretaria de Educação Especial. Política Nacional de Educação Especial na Perspectiva da Educação Inclusiva. Brasília. 2008. Disponível em www.planalto.gov.br. Acesso em dezembro de 2019.

BRASIL. **Ministério da Educação**. Declaração da Salamanca – Sobre princípios, políticas e práticas na área das necessidades educativas especiais. 1994. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

BRASIL. **Ministério da Saúde**. Secretaria de Atenção à Saúde. Departamento de Ações Programáticas Estratégicas. Linha de cuidado para a atenção às pessoas com Transtornos do Espectro do Autismo e suas famílias na Rede de Atenção Psicossocial do SUS. Brasília: Ministério da Saúde, 2013. Disponível em saude.gov.br. Acesso em dezembro de 2019.

Diretrizes de Atenção à Reabilitação da Pessoa com Transtornos do Espectro do Autismo (TEA), Brasília, 2014. Disponível em saude.gov.br. Acesso em dezembro de 2019.

Departamento de Atenção Especializada e Temática, Coordenação Nacional de Saúde Mental. Linha de cuidado para a atenção às pessoas com autismo e suas famílias na rede de atenção psicossocial do sistema único de saúde. Brasília, Saúde, 2015. Disponível em saude.gov.br. Acesso em dezembro de 2019.

RAPS - **Rede de Atenção Psicossocial**. Disponível em saude.gov.br. Acesso em dezembro de 2019.

SUS - **Sistema Único de Saúde**. Disponível em saude.gov.br. Acesso em dezembro de 2019.

BRASIL, Lei nº 4.024, de 20 de dezembro de 1961. **Fixa as Diretrizes e Bases da Educação Nacional**. Diário Oficial da União. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

Lei n. 9.394, de 20 de dezembro de 1996. **Estabelece as diretrizes e bases da educação nacional**. Diário Oficial da União, Brasília, DF. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

Lei nº 12.764, de 27 de dezembro de 2012. **Institui a Política Nacional de Proteção dos Direitos da Pessoa com Transtorno do Espectro Autista**. 2012. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

Lei nº 13.146, de 6 de julho de 2015. **Institui a Lei Brasileira de Inclusão da Pessoa com Deficiência** (Estatuto da Pessoa com Deficiência), em Brasília, DF. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

Lei nº 13.438 de 26 de abril de 2017, que altera um inciso da Lei nº 8.069, de 13 de julho de 1990 (ECA), para tornar obrigatória a adoção pelo SUS de protocolo que estabeleça padrões para a avaliação de riscos para o desenvolvimento psíquico das crianças. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

Lei nº 4.024, de 20 de dezembro de 1961. **Fixa as Diretrizes e Bases da Educação Nacional**. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

Lei nº 8.069 de 13 de julho de 1990. **Dispõe sobre o Estatuto da Criança e do Adolescente e dá outras providências**. Diário Oficial da União, Brasília. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

Lei nº 13.146, de 6 de julho de 2015. **Estatuto da Pessoa com Deficiência é a denominação da Lei Brasileira de Inclusão da Pessoa com Deficiência**. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

Lei nº 12.764, de 27 de dezembro de 2012. **Institui a Política Nacional de Proteção dos Direitos da Pessoa com Transtorno do Espectro Autista**; e altera o § 30 do art. 98 da Lei no 8.112, de 11 de dezembro de 1990. Brasília, DF. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

Lei nº 6.101 de 18 de novembro de 2016, essa obriga os estabelecimentos públicos e privados no Município do Rio de Janeiro a inserir nas placas de atendimento prioritário o símbolo mundial do autismo e dá outras providências. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

BRASIL. Decreto nº 6.949, de 25 de agosto de 2009. **Promulga a Convenção Internacional sobre os Direitos das Pessoas com Deficiência e seu Protocolo Facultativo**, assinados em Nova York, em 30 de março de 2007. Diário Oficial da União, 2009. Disponível em www.planalto.gov.br. Acesso em dezembro de 2019.

Decreto nº 7.611, de 17 de novembro de 2011. **Dispõe sobre a educação especial, o atendimento educacional especializado e dá outras providências**. Disponível em www.planalto.gov.br. Acesso em dezembro de 2019.

Decreto n. 7.612, de 17 de novembro de 2011. **Diretrizes de Atenção à Reabilitação** da Pessoa com Transtornos do Espectro do Autismo. Instituiu o Plano Nacional dos **Direitos da Pessoa com Deficiência** - Plano Viver sem Limite. Disponível em www.planalto.gov.br. Acesso em dezembro de 2019.

BRASIL. L12764 - Institui a Política Nacional de Proteção dos Direitos da Pessoa com Transtorno do Espectro Autista; e altera o § 3º do art. 98 da Lei nº 8.112 de 27 de dezembro de 2012. Disponível em www.planalto.gov.br. Acesso em dezembro de 2019. BRASIL. Portaria normativa nº- 13, de 24 de abril de 2007. Dispõe sobre a criação do "Programa de Implantação de Salas de Recursos Multifuncionais". Disponível em www.planalto.gov.br. Acesso em dezembro de 2019.

Portaria n° 793/GM/MS de 24 de abril de 2012. **Institui a Rede de Cuidados à Pessoa com Deficiência no âmbito do Sistema Único de Saúde**. Disponível em www.planalto.gov.br. Acesso em dezembro de 2019.

Portaria nº 324, de 31 de março de 2016. **Protocolo Clínico e Diretrizes Terapêuticas do Comportamento Agressivo**. Disponível em www.planalto.gov.br. Acesso em dezembro de 2019.

Portaria nº 1.060, de 5 de junho de 2002, a Política Nacional de Saúde da Pessoa com Deficiência está voltada para a inclusão das pessoas com deficiência em toda a rede de serviços do Sistema Único de Saúde (SUS) de acordo com a Rede de Cuidados à Saúde da Pessoa com Deficiência. Disponível em www.planalto.gov.br. Acesso em dezembro de 2019.

CAMPOS, L. K. & FERNANDES, F. D. M. Perfil escolar e as habilidades cognitivas e de linguagem de crianças e adolescentes do espectro do autismo. Codas. São Paulo, p. 234-243, 2016.

CASTRO, A. C. de & GIFFONI, S. D. A. O conhecimento de docentes de educação infantil sobre o transtorno do espectro autístico. Revista Psicopedagogia, v. 34, v. 103, p. 98-106, 2017,

CID-10: Classificação Estatística Internacional de Doenças e Problemas Relacionados à Saúde - 1a Revisão. São Paulo: Editora da Universidade de São Paulo; 1997.

COIMBRA, B. S., SOARES, D. C. L., DA SILVA, J. A., & VAREJÃO, L. C. **Abordagem odontológica a pacientes com transtorno do espectro autista (TEA)**: uma Revisão da literatura. Brazilian Journal of Development, v. 6, n. 12, p. 94293-94306, 2020.

COMER, R. J. Fundamentals of abnormal psychology. Macmillan, 2010.

DAMASO M. C. M. C. As barreiras arquitetônicas como entraves na inclusão de alunos com deficiência física. 2011. Trabalho de Conclusão de Curso da Universidade de Brasília, Brasília. Disponível em bdm.unb.br/bitstream. Acesso em dezembro de 2019. DSM-V (DSM-5) Manual Diagnóstico e Estatístico de Transtornos Mentais da American Psychiatric Association 5ª ed. Texto Revisado. Artmed., Porto Alegre, p.1-992. 2014.

DUARTE, C. M. R., MARCELINO, M. A., BOCCOLINI, C. S. & BOCCOLINI, P. D. M. M. Proteção social e política pública para populações vulneráveis: uma avaliação do Benefício de Prestação Continuada da Assistência Social-BPC no Brasil. Ciência & Saúde Coletiva, v. 22, p. 3515-3526, 2017.

FNDE – **Fundo Nacional de Desenvolvimento da Educação**. Caminho da Escola. Disponível em www.fnde.gov.br. Acesso em dezembro de 2019.

Resolução FNDE nº 12 de 8 de junho de 2012. Estabelece os critérios para que os entes participantes do Benefício de Prestação Continuada da Assistência Social (BPC) possam aderir ao Programa Caminho da Escola para pleitear recursos, visando à aquisição de veículos acessíveis para o transporte escolar no âmbito do Plano de Ações Articuladas. Disponível em www.fnde.gov.br. Acesso em dezembro de 2019.

Resolução/FNDE nº 27 de 27 de julho de 2012. Dispõe sobre a destinação de recursos financeiros, nos moldes e sob a égide da Resolução nº 7, de 12 de abril de 2012, a escolas públicas municipais, estaduais e do Distrito Federal da educação básica, com matrículas de alunos público alvo da educação especial em classes comuns do ensino regular, que tenham sido contempladas com salas de recursos multifuncionais em 2010 e 2011 e

integrarão o Programa Escola Acessível em 2012. Disponível em www.fnde.gov.br. Acesso em dezembro de 2019.

FERREIRA, B. F. M. Relatórios de Estágio realizado na Farmácia Cristo Rei e no Klinicka Bolnica Dubrava. 2020.

LEMOS, C. E. B. Representação social dos professores de alunos com autismo sobre os processos de ensino e aprendizagem. 2018. Disponível em bibliodigital.unijui.edu.br. Acesso em dezembro de 2019.

LORD, C. Autism spectrum disorders. Neuron, 2000, 28.2: 355-363.

MAHONEY, A. A. & ALMEIDA, L. R. Afetividade e processo ensino-aprendizagem: contribuições de Henri Wallon. Psicologia da educação, São Paulo, n. 20, p. 11-30, 2005.

MARTINS, L. M. As aparências enganam: divergências entre o materialismo históricodialético e as abordagens qualitativas de pesquisa. Anais... Reunião Anual da ANPED, 29, p. 1-17, 2006.

MATTOS, J. C. Alterações sensoriais no Transtorno do Espectro Autista (TEA): implicações no desenvolvimento e na aprendizagem. Revista Psicopedagogia, 36(109), 87-95, 2019.

MELO, S. **Escolarização de alunos com autismo**. Revista Brasileira de Educação Especial, 2016.

MINAYO, M. C. de S. (Org). **Pesquisa social: teoria, método e criatividade**. 17ª Ed. Petrópolis, RJ, Vozes. 1995.

MINISTÉRIO DA EDUCAÇÃO. **Programa Escola Acessível** - Programa Educação Inclusiva: direito à Diversidade. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

RENAFOR - **Programa de Formação Continuada de Professores em Educação Especial**. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

Política Nacional de Educação Especial na Perspectiva da Educação. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

Programa Implantação de Salas de Recursos Multifuncionais. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

Transporte Escolar Acessível. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.

- PPP **Projeto Político Pedagógico**. Disponível em portal.mec.gov.br. Acesso em dezembro de 2019.
- INEP Instituto Nacional de Estudos e Pesquisas Educacionais Anísio Teixeira. Censo Escolar da Educação Básica. Disponível em portal.inep.gov.br. Acesso em dezembro de 2019.
- NEVES, P. F. de A. C. **Descortinando os propósitos da educação para as crianças com transtorno do espectro autista**: em cena os serviços de apoio. 2018. Disponível em repositorio.bc.ufg.br. Acesso em novembro de 2019.
- ONU Organização das Nações Unidas. Disponível em nacoesunidas.org. Acesso em novembro de 2019.
- ORRÚ, S. E. **Autismo, linguagem e educação**: interação social no cotidiano escolar. Rio de Janeiro: Wak Editora, 2007.
- PEDREIRA, A. S. & COSTA, M. L. S. D. **Autismo na educação infantil**: desafios da qualificação do professor, Trabalho de Conclusão de Curso da Universidade Federal da Paraíba, 2017. Disponível em https://repositorio.ufpb.br. Acesso em dezembro de 2019.
- GLAT, R. & PLETSCH, M. D. **O papel da Universidade no contexto da política de Educação Inclusiva**: reflexões sobre a formação de recursos humanos e a produção de conhecimento. Rev. Educ. Espec., v. 23, n. 38, p. 345-356, 2010.
- TEA **Transtorno do Espectro do Autismo**. OPAS/OMS Brasil. Disponível em www.paho.org. Acesso em dezembro de 2019.
- ONU **Nações Unidas no Brasil**. Rejeitar pessoas com autismo é um desperdício de potencial humano, destacam representantes da ONU. 2016. Disponível em https://nacoesunidas.org. Acesso em dezembro de 2019.
- UNESCO Organização das Nações Unidas para a Educação, a Ciência e a Cultura. RESENDE, L. M. G de. Paradigma e trabalho pedagógico: construindo a unidade teóricoprática. In.:_____. TACCA, M. C. V. R. Aprendizagem e trabalho pedagógico. Campinas, SP: editora alínea. 2006.
- ROSA, S. C. M. Desempenho funcional de alunos incluídos na rede municipal de ensino regular de Alfenas-MG e diagnóstico da acessibilidade escolar. 2018. Acesso em bdtd.unifal-mg.edu.br. Acesso em novembro de 2019.
- RUSSO, F. **Graus de Autismo importante saber**. In: Neuroconecta, 2017. Disponível em http://neuroconecta.com.br. Acesso em dezembro de 2019.

SILVA, V. A supervalorização do diagnóstico de autismo na escola: um estudo sobre subjetividade social. 2015. Dissertação de Mestrado em Educação da Universidade de Brasília, Brasília. Disponível em https://repositorio.unb.br. Acesso em dezembro de 2019.

SPITZER, R. L., GIBBON, M. E., SKODOL, A. E., WILLIAMS, J. B., FIRST, M. B. **DSM-IV-TR casebook**: Um companheiro de aprendizagem para o manual diagnóstico e estatístico de transtornos mentais, texto rev . American Psychiatric Publishing, 2002.

VOLKMAR & WIESNER, **Do autismo**, **A Descoberta**. O que é autismo? 2017. Disponível em statics-submarino.b2w.io. Acesso em dezembro de 2019.

WEISSMAN, L. & BRIDGEMOHAN, C. Autism spectrum disorder in children and adolescents: Overview of management. In: Augustyn M, Patterson MC, Torchia MM, editors. 2017.

WORLD HEALTH ORGANIZATION. **Pervasive developmental disorders**». International Statistical Classification of Diseases and Related Health Problems 10th ed. (2006. NIMH - Autism Spectrum Disorder». *www.nimh.nih.gov*. Consultado em 19 de setembro de 2019.

Recebido em: 24 de maio de 2021

Aceito em: 06 de julho de 2021