DISSEMINATION OF EXPERT KNOWLEDGE IN THE FIELD OF CHILDHOOD¹ DISSEMINAÇÃO DOS SABERES EXPERTOS NO DOMÍNIO DA INFÂNCIA DIFUSIÓN DE CONOCIMIENTOS ESPECIALIZADOS EN EL ÁMBITO DE LA INFANCIA

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The Dossier presented here brings together articles that problematize the issue of the dissemination of expert knowledge in the field of childhood understood as vectors of the psychopedagogization and medicalization of life. There is a frequently disseminated idea that the education of a child, whether family or school, would be susceptible to the intervention and control of knowledge, more or less methodical, which would be in the hands of experts in child development: pedagogues, doctors, neurologists, psychiatrists and psychologists, among others. Such dominance occurs thanks to the dissemination of the supposed effectiveness of this specialized knowledge about childhood, whose function would be to show that it is possible to foresee deviations considered harmful to what is considered to be the normal development of a child, in the social imaginary.

The inevitable existence of diffuse and unclear borders between the so-called normalities and psychic pathologies has allowed not only the multiplication of diagnoses – from 106 disorders in the first edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) in 1952, to more of 300 in the 5th edition of 2013 – as well as the acceptance of the idea that it would be possible to identify small signs that announce a serious pathology yet to come, affirming the need to carry out preventive interventions in the field of childhood. Such interventions would allow a premature identification of behavior, socialization and school learning problems, with a view to promoting an intervention in order to avoid both the



¹ The authors would like to thank CAPES for its support through the international cooperation project CAPES COFECUB: *A disseminação dos saberes expertos no domínio da Infância* (The dissemination of expert knowledge in the field of childhood), which made the organization of this dossier possible.

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chronicity of psychic pathologies and the emergence of disruptive conflicts in social life. This movement allowed for an unprecedented growth of the world pharmaceutical industry, both in terms of market volume and in terms of its advancement in the process of formation of psychiatrists.

Within this framework are the articles that make up this dossier. In addition to this presentation, the dossier is composed of 10 more items, comprising nine unpublished articles and an interview with the Argentinean social scientist Alejandra Barcala. The dossier begins with an article by Claude Olivier Doron, from the University Paris-Diderot, *Doctor Voisin's Orthophrenic Institute and the education of children "out of the ordinary" in France during the July Monarchy (1830-1848)*. Doron presents an instigating and very original article where he analyzes a moment in the history of pedagogy in France that is very little known. It is the first medical-pedagogical experiment carried out in France in the 1830s and 1840s that was aimed at children considered "out of the ordinary". The name given to this pedagogical experiment was the *Ortophrenic Institute*; a project elaborated by the alienist Felix Voisin with the objective of avoiding and preventing the formation of potential criminals and alienated people. The text shows what were the principles of this experiment, inspired by phrenology, what were the pedagogical techniques applied and how these works were at the origin of the construction of the idea of "abnormal child" and also of what, later, will be characterized as "conduct disorders" typical of children considered problematic or difficult.

The second article that makes up this Dossier was written by Leandro de Lajonquière, from the Paris 8 University, *On the irremediable education*. The text is part of the tradition of psychoanalytic studies in education. Lajonquière establishes in this study an instigating and very well elaborated dialogue between history and the present, presenting two educational experiences that occurred in different historical moments. Based on the analysis of these experiences, the author discusses the tendency of experts, but also of parents and adults in general, to medicalize children's lives, more specifically to prescribe medication to children without it being possible to speak of the existence of a disease. The reasoning is structured around the counterpoint between two educational experiences: the first that took place in France in the 19th century, known as *"the wild boy of Aveyron"*; the second, which took place in the United States, after the Civil War, referred to Helen Keller's education. The text proposes a well-founded reflection on what should characterize an educational process that can be considered successful; a process that is not centered on the search for effectiveness, but rather on the possibility of building a subjectivating space, or, as the author states, a space that allows

"making a subject of speech emerge".

Next, we present the article by Sandra Caponi, from the Federal University of Santa Catarina (UFSC) Considerations on the prescription of psychotropic drugs in early childhood: the case of childhood depression. The article takes as its starting point the work of Ian Hacking, particularly his study on engines to model people and the concept of the looping effect, to analyze the moment of emergence of the diagnosis of childhood depression. The article discusses the place occupied by childhood depression in the context of childhood pathologies, the problematic use of psychometric assessment scales; The limits of explanatory hypotheses are also questioned, particularly the serotonin deficit hypothesis, in order to study the supposed efficacy and adverse effects of antidepressants, such as Selective Serotonin Reuptake Inhibitors (SSRIs), in childhood. The text discusses the epistemological fragility of the arguments presented by psychiatrists who defend the diagnosis of childhood depression and the use of antidepressants, but also analyzes the difficulties of these diagnoses in the construction of children's subjectivity. Using Ian Hacking's concept of "looping effect", the text argues that the enunciation of the diagnosis of depression and the use of psychotropic drugs in childhood produce a transformation in the way children think about themselves, how they build their self, emotions and behaviors. Finally, it is argued that the diagnosis of depression in childhood leads to a process of individualization, biologization and cerebralization of suffering, silencing the social facts that may have caused suffering.

Next, the dossier brings two articles which address the controversies surrounding the drug treatment of Attention Deficit Hyperactivity Disorder (ADHD). The article by Marcia da Silva Mazon from UFSC, Consumption of psychotropic drugs and therapeutic style: the limits of the rational use of medicines, performs a reading based on the logic of the consumption of psychotropic drugs as a way of illuminating the limits of the rational use of medicines. The article points out how considerations about the rational use of medicines start from the premise that more information is enough for the actors - considered rational in order and with given preferences – to make a rational use. The purpose of the article was to contemplate the power relations which impose objects and discourses, building the reasonableness of which items can or should circulate through the markets. Based on controversies expressed in the media and the report by the National Commission for the Incorporation of Technologies in the Unified Health System (Conitec) on the refusal of ADHD drug treatment, how beliefs surrounding the consumption of psychotropic drugs can be a good starting point to understand tensions and controversies in the construction of this market. The article shows the mobilization of two distinct and alternating appeals to justify the methylphenidate market: either an appeal to health, or an appeal to the market seen as a consumer's right. Thinking about societies in the era of

therapeutic style and in a context in which problems from the private world fill the public space allows us to understand how certain discourses construct the idea of what is reasonable in a given context. The pharmaceutical industry and the medical class, in this alternation of justifications, sometimes health and sometimes market, mobilize consumers as market actors and free to make their decisions about the purchase of psychotropic drugs. Any criticism of the consumption of psychotropic drugs may sound like an infringement of rights and is a topic that urges further investigation.

Returning to the topic of the Conitec report, Tatiana Barbarini (FMG) and Elton Corbanezi (UFMT) in the article Between claims for treatment and refusal to incorporate medication into the SUS: an analysis of the social reality of ADHD in Contemporary Society, also explore ADHD as a clinical and psychiatric category riddled with controversy and as an expression of the medicalization of life. The authors analyze access to treatment and the demand for incorporation of methylphenidate and lisdexamfetamine in the Unified Health System (SUS). Regarding the Conitec report, the authors highlight the disagreement between public opinion and the result of the report, which refuses to incorporate drug treatment for ADHD. Such disagreement indicates how ADHD has consolidated itself as a medical and social reality that underlies the claim for individual and social rights, even if there is not enough scientific evidence regarding the effectiveness of drug treatment. In this context, any type of questioning of ADHD and/or methylphenidate can become a questioning of the rights of patients, even if there is not enough scientific evidence regarding the effectiveness of drug treatment. Amid this correlation of forces, there is the legitimate claim of patients for the right to treatment and to social conformation in a society that enshrines individual competition and performance since childhood, constituting them as a measure of normality and that leaves in the background the objective and subjective existential conditions.

Continuing the theme of medicalization, we present the article written by Fernando Freitas (UFRJ) and Luciana Jaramillo Caruso de Azevedo (UERJ) *Medicalizing children and adolescents*. Fernando and Luciana analyze, from a critical perspective, the epistemological weaknesses present in the biomedical foundations used to think about diagnoses of mental disorders, which are increasingly used to qualify the behavior of children and adolescents. This explanatory model medicalizes children's behavior as it takes as its starting point the idea that psychotropic drugs have the function of correcting an underlying brain abnormality. The authors claim that this type of approach is based on a fallacy that has already been denounced by several studies. The authors also argue that the process of medicalization and

psychopharmacologization of childhood represent threats to public health and the guarantee of the full exercise of human rights.

The article by Eugenia Bianchi (UBA), Milagros Oberti (UBA), Silvia Faraone (UBA) and Flavia Torricelli (UBA) Global medicalization, ADHD and childhoods. A media study from seven countries looks at which actors are represented in media about ADHD. The article assumes ADHD as a paradigmatic example of medicalization in mental health in children and highlights the globalizing nature of the diagnosis and the media as part of relevant non-medical actors that appear in the scene of medicalization. The authors carry out a survey of works (articles and magazines) which address the media about ADHD in countries in Asia, Europe, America and Oceania. The text brings valuable clues on how to investigate the interpenetration of scientific discourse in the media, as well as its manipulation: the missing elements, the nonexplicit contradictory elements. The data indicate, closely following what Foucault observed, that there is regularity in the dispersion: the data show the relationship between childhood, ADHD and the media with two main characteristics: heterogeneous discourses about ADHD and the media articulating with the globalization processes of medicalization. The authors highlight what is absent in the media and how in more popular sites the information that appears was not written by academics or even lacks scientific support. The diverse and non-convergent character that appears in the media analyzed is a common point, as well as the little or no presence of the voices of children diagnosed and treated with ADHD (they are rather objects or passive protagonists) and the absence of a gender perspective. The article is an excellent invitation for a research agenda on the topic.

The article by Henrique Sater (Unicamp) and Luana Marçon (Unicamp), *Psychiatric diagnosis and challenges for another childhood biopolitics*, brings critical reflections on psychiatric diagnoses and their specific uses in the field of childhood. Taking as a starting point small reports of clinical histories that arrive at child and adolescent care services, the article problematizes these psychiatric diagnoses and proposes thinking about a new childhood biopolitics. The authors discuss the hegemonic psychiatric rationale that classifies different misconduct as individual disorders and brain disorders, discussing how knowledge and medical power have configured childhood as a privileged space to exercise government over populations. The article proposes thinking about alternatives to guarantee the reception of children with mental suffering starting from the creation of less normative and less disciplinary care practices.

Next, we present the article by Juliana de Araújo Silva and Julio César Donadone, both from the Federal University of São Carlos (UFSCar) *Intermediating, judging and moralizing:* Estudos de Sociologia, v. 27, n. esp. 2, e022035, 2022. e-ISSN: 1982-4718

the role of the State, the organizational gift and the adoption process. The article proposes a dialogue between the adoption of children and adolescents and economic sociology, based on a reflection on the existence of an organizational gift within these social practices. The Church and the State were at the forefront of intermediation between those who "gave children" and those who "fetched children". According to the author of the article, children are removed/delivered by their biological families to the State, and the state power is to judge and moralize those who cannot "take care of the child", as well as those who can or cannot adopt. In addition, veiled prejudice makes the predilection for younger and white-skinned children more likely to be adopted. While black and "older" children are in the hot seat of being elected, when they turn 18 many are no longer assisted by the Childhood and Youth Court, becoming the responsibility of the Criminal Court; since almost 70% of the prison population in Brazil is black, with weakened or non-existent family ties. The State, through the judiciary, decides situations of child abandonment based on moral principles in the best interest of the child, as well as for all involved. The authors of the article question to what extent the decisions taken, based on the laws on adoption, would be fair and useful for all involved. The argument sustained in the article is that adoption was constituted as an expression of state bureaucratic violence. The research analyzed the perception of the donors, understanding the current configuration and significance of the adoption practices of children and adolescents in Brazil. Among the results, it was observed that adoption is established as an alternative to obtain the "gift" and is treated as an "unpaid market", rooted in relationships of compassion, altruism and friendship.

To conclude this Dossier, we present an interview with Alejandra Barcala conducted by Sandra Caponi, Marcia da Silva Mazon and Barbara Michele Amorim. Alejandra Barcala is a Psychologist and PhD in Psychology from the University of Buenos Aires (UBA/Argentina). She is director and professor of the International Doctorate in Community Mental Health at the Universidad Nacional de Lanús (UNLa) and one of the leading names in research on mental health and human rights. In the interview, Sandra, Marcia and Barbara walk through several investigations of the interviewee, inviting her to compare Brazil and Argentina about their unique experiences of public policies in mental health in the face of a common experience from the past of the military dictatorship. This is the great challenge proposed by Alejandra Barcala: thinking about mental health from the perspective of human rights. Alejandra recalls that in Argentina until 1990 the issue of mental health was silenced until the publication of the report "Vidas Arrasadas" (Broken Lives) which exposed the condition of violation of human rights in asylums, this publication generated public indignation and set in motion a public agenda for the mental health in the country. Until the publication of the National Mental Health Law in 2010

(law 26,657, now under debate again) it was a long way to go. Alejandra also highlights the fundamental role of the Movement of Mothers of Plaza de Mayo: they took the first steps towards the sanction and enactment of the Mental Health Law. Alejandra also touched on the issue of social inequality and inequality in health and mental health. She shows how in Argentina there was an increase in social inequalities (already underway) during the pandemic that was accompanied by an increase in psychiatric hospitalization of girls and boys. She draws attention to the social class of these children: they come from socially vulnerable homes in a process that Alejandra names as "medicalization circuits" supported, among others, by the school institution. In this context, they were not biomedical problems, rather they were suffering as a result of social traumas that, instead of being situated in the social context, were interpreted as individual psychopathological problems, outside the family, relational and community context. Alejandra also addressed her most recent research, the subject of ADHD and the increase in diagnoses accompanied by drug treatment of this disorder in Argentina. As the Argentine intellectual ponders, just as the school has the ability to accompany, transform and open a world of possibilities to a child, it can also subjectively mark them with a diagnosis for life.

How to reference this article

MAZON, M. S.; CAPONI, S. Dissemination of expert knowledge in the field of childhood. **Estudos de Sociologia**, Araraquara, v. 27, n. esp. 2, e022035, 2022. e-ISSN: 1982-4718. DOI: https://doi.org/10.52780/res.v27iesp.2.17572

Submitted: 15/06/2022 Required revisions: 10/07/2022 Approved: 12/08/2022 Published: 30/09/2022

> **Processing and publishing: Editora Ibero-Americana de Educação.** Review, formatting, standardization and translation



Estudos de Sociologia, v. 27, n. esp. 2, e022035, 2022. DOI: https://doi.org/10.52780/res.v27iesp.2.17572

