

**MEDICALIZATION OF EDUCATION AND THE
MEANINGS OF NOT LEARNING**

***MEDICALIZAÇÃO DA EDUCAÇÃO E OS
SENTIDOS DO NÃO APRENDER***

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Professionals in the areas of Health and Education, critical of medicalizing approaches, are unanimous in stating that such approaches mischaracterize and conceal the human condition, since they stem from a reductionist/deterministic logic focused on the individual and, especially, on its organic dimension. If we can follow a certain consensus, among such professionals, that this logic is committed, nationally and internationally, to the genesis of a “modern society” project built on the principles of productivity, competitiveness and consumption, it is interesting to highlight how, from mid-1980s, complaints about its segregationist and discriminatory character gain space and start circulating in various contexts and institutions.

Evidencing this fact, a growing process in the organization of groups involving professionals from different areas committed to movements, actions, production of knowledge capable of coping with and resist to actions that aim at the medicalization of life in Brazil has gained strength in the last decades in all its dimensions and spheres, especially in the context

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of Education, that are at the service of naturalizing social inequalities and injustices, transforming them into diseases and/or disorders.

Harmful effects, which entangle teachers, students and family members, produced from a medicalizing discursive network that circulates in the school context, whether materialized in disqualifying speeches, either in classifications, evaluations published in reports and reports, have been confronted from counter-hegemonic views committed to stripping their contradictions and their negative effects.

Throughout our history, we can accompany, on the one hand, the spread of a causal logic between restricted learning conditions and deficiencies inherent to students and their families (of a moral, behavioral, psychological and organic nature) and the perpetuation of the maxim that educators, family members and students should adhere, without question, to diagnoses and treatments determined by health specialists and, on the other hand, observe that such truths have been pointed out as discriminatory, since they deprive the subjects of a place and put them in a position of vulnerability.

We consider that the possibility of reframing and overcoming medicalizing positions emerges from movements committed to critical, imperative, about positions that individualize and naturalize the teaching-learning processes, as well as the explanation of the economic, political and cultural determinants that when (re)producing inequalities and social injustices restrict the democratization of the material and symbolic goods produced by humanity.

The theme “Medicalization of Education and the meanings of not learning” presented here was motivated by the recognition of the need to circulate/echo studies that offer elements for the understanding of medicalizing processes as restrictive for access to school-academic knowledge and, therefore, for the consolidation of the right to Education.

In this sense, the articles that make up the present Dossier start from the assumption that in order to face such processes, systematization and the implementation of theoretical and practical approaches that contribute to the promotion of human consciousness are necessary. In these articles, the commitment to vertical analysis is spelled out, triggering reflections on how medicalizing visions and procedures, which fall under educational processes involved from Basic Education to Higher Education, paradoxically establish experiences of not learning.

Presented by the Revista Ibero-Americana de Estudos em Educação (RIAEE), this dossier includes 16 articles written by researchers linked to different higher education institutions: Federal University of Alagoas (UFAL); Education Center of the Federal University of Alagoas (CEDU/UFAL), Federal University of Pelotas (UFPEL), Pontifical

Catholic University of São Paulo (PUC-SP), Federal University of Ceará (UFC), Federal University of Uberlândia (UFU), Paulista State University (UNESP/SP), State University of Rio de Janeiro (UERJ), Federal University of Paraná (UFPR), State University of Paraná (UNESPAR), Mackenzie Evangelical College of Paraná (FEMPAR), Tuiuti University of Paraná (UTP), Federal University of Santa Catarina (UFSC), Nove de Julho University (UNINOVE), Federal University of Paraíba (UFPB), João Pessoa University Center (UNIPÊ), State University of Midwest Paraná (UNICENTRO), University Federal da Bahia (UFBA) and Federal University of Rio Grande do Sul (UFRGS).

Delimited from different thematic and methodological cuts, these articles converge on the need to face and overcome, in the field of Education, the same social problem, that is, the one that (re)produces and naturalizes knowledge and normative, excluding and discriminatory practices as structuring of the system, institutions and educational interrelations. Reading these articles invites us to listen critically and responsively to reports from students, health and education professionals, echoing experiences of suffering and segregation lived by those who, as they do not meet educational demands, are considered to have difficulties, disabilities, individual pathologies and, as such, must be classified/diagnosed and treated.

In these articles, speeches conveyed in manuals, reports, as well as in statements produced by students and health and education professionals are treated as subjectivation processes made up of contradictory and sometimes antagonistic forces, which lead to adherence or refusal of a medicalizing way of being/thinking.

With a commitment to critically address power devices that constitute and naturalize the notion of disorders/deficiencies and, by extension, underpin the meanings of “not learning”, the articles in question reject approaches that reduce the student to the condition of object of learning, giving visibility to what is erased, listening to what is silenced about the restricted material and subjective conditions that deprive a significant portion of the Brazilian population from the right to quality education.

The articles were organized considering, initially, studies whose authors focused on broad aspects that contribute to the systematization and to the implementation of principles, criteria and practices, produced in the contexts of health and education, that subsidize medicalizing pedagogical practices, followed by the articles that deal with intersectoral actions that address, without their discussions, the (re)production of clinical-pedagogical practices that produce medicalization and conditions for not learning versus resistance to such practices in educational and clinical contexts.

The article **“Childhood and medicalization of life: an analysis of the diagnostic production and its links with schooling processes”** emphasizes the growing expansion of diagnoses of disorders and disabilities, particularly with regard to children, which refracts in their proliferation in the educational contexts resulting from what is called, in this article, as diagnostic inflation and its effects, which tend to overvalue processes of medicalization of life and childhood, especially with regard to schooling processes.

From this perspective, a brief history is presented regarding the constitution of the Diagnostic and Statistical Manual for Mental Disease (DSM), from the first to the fifth edition, published by the American Psychiatric Association (APA), placing it, in the contemporary context, from the impacts of this manual on this diagnostic production, which invariably leads to the reduction of human phenomena to behavioral manifestations that intensify the blame of the subject in the face of the demands of schooling processes, especially in situations that do not correspond to idealized standards of normality. Also highlighted are the recent criticisms of the DSM made by the psychiatric community itself and, especially, by one of its most prominent members: Allen Frances, coordinator of the group responsible for preparing the 1994 version of this manual.

The discussion details the relationship between the fifth version of DSM-5 and the actions, defined in legislation, that guide public educational and health policies that, in turn, guide the early identification and definition of predictive criteria for autism spectrum disorders (ASD), as well as the performance of professionals linked to the Unified Health System (SUS) network regarding the health of people with disabilities and their families, which intensifies, as explained in the text, “the logic of prevention”, as well as the “anticipation of risks” for pathologies of a psychiatric nature. Both this logic and this anticipation greatly value behavioral aspects and the etiological explanations of a biological nature for school failure, which tends to silence the unique characteristics of the constitution processes of being a child and being a student.

In the article **“New approaches in psychiatry in the 21st century: the school as a place of prevention and promotion in mental health”** it is demonstrated how the school has historically been constituted as a locus of research on psychiatry, particularly developmental psychiatry, its strategies for dissemination and legitimization of social and educational control, focusing on the selection of suspicious and at-risk children, taking the school universe individually for the medicalization process of childhood.

Based on bibliographic and documentary research, the process of understanding the school as a place for preventive intervention in mental health aimed at children and

adolescents is highlighted, mostly through the instrumentalization of educators, with a view to identifying and/or referring students considered suspect or at risk for such health problems. Under this bias, the article discusses the intensification of the medicalization process of childhood. The historical discussion of psychiatry and the school is, in the article, unveiled, showing the medicalization and pathologization of life and power relations.

“Notes on failure and diversity: meanings of learning and not learning in school” portrays different theoretical propositions about the theories of school failure and how the perspective of cultural diversity can reframe this issue, moving away from the biological dimension to the socio-historical interpretation of reality. School failure is, in this sense, reframed so that it can gain a new guise of understanding different educational approaches and consideration for social diversity.

Divided into three parts, it proposes: a critical analysis of the biologizing theories of school failure, which compete for the pedagogical and medical discourses to contribute to the production of normalizing devices under which subjects are classified as deviant; an analysis of the importance of cultural studies for the reframing of understanding about school failure, in which the effects of biological determinism constituted under positivist paradigms are considered, in the displacement, in terms of writing, from language studies to studies in the biological field; and, finally, the emphasis on the perspective of cultural diversity for understanding the processes of knowledge construction.

In the article entitled **“School failure and medicalization”**, reflections on learning related to methodological procedures that culminate in learning difficulties and school failure are presented. Inadequate methodologies, difficulties in dealing with students' social heterogeneity, lack of knowledge mediation and low teacher formation are parts of the reality that only legitimize the medicalization of education. The discussion undertaken reveals tortuous paths through which school actions perpetuate practices characteristic of an excluding school.

Under a suggestive diagnosis of ADHD, later defined as dyscalculia, a case study is used, whose discussion addresses the subject's normalization process that does not correspond to the socially prevailing normality standard instituted and disregards the panorama of the multiplicity of aspects involved in the production of school failure, since its determinants permeate and constitute social relations in their different spheres. This requires coping with school failure from the perspective of overcoming and not perpetuating it.

“Pathologizing discourse: the student subject as the origin and cause of school failure”, highlights the contributions from the theoretical-methodological perspective of

discourse analysis of Pêcheux affiliation, to carry out an imperative criticism of the pathological discourse and its effects as constituting a reality exclusionary and productive of “not learning at school” experiences.

Strikingly, considerations are made about how medicalizing discourses, represented ideologically as having authority, disqualify the condition of the student as an author, classify their written productions as meaningless and, thus, legitimize and naturalize failure as a result of individual limitations intrinsic to students. With the interpretative work grounded by the referred theoretical aspect, processes of signification are presented and discussed that explain the meanings of pathologization in the pedagogical discourse by (re)producing the maxim that school failure is the student's responsibility, concealing the various political, economic, cultural determinants that go through the teaching-learning processes. Still, they gain relevance in this discussion, as medicalizing discourses are institutionalized and mark the child's body, as the one who does not learn, while silencing criticisms to the educational system, as well as the different ways of being in the language and relating to school content.

“The discourse on dyslexia in the DSM-5 and its implications in the process of medicalization of education” characterizes the article that deals with the analysis of the discourse presented in the DSM, Diagnostic and Statistical Manual of Mental Disorders, used by health professionals. This text discusses the biologizing construction of the document specifically in relation to Dyslexia, with significant developments for the analysis of the students' school trajectory and the construction of technical reports. The adoption of the proposed criteria in a decontextualized and a-historical way promotes the imprisonment of the subject, with losses of subjectivity and understanding of their social relations.

The discussion undertaken highlights, among other aspects, the constitution of diagnoses untied from the socio-cultural context in which students or adults in non-school condition manifest or produce symptoms in reading, often linked to neurobiological disorders and quantified through standardized measures that legitimize under the status of disease modes of being and existing in the world that do not correspond to the imposed standard of normality, mark the inability to learn as one of the pillars that support the process of medicalization of learning.

In the article **“And when the child does not meet the school's expectations? Reflections on relationship with the family in the search for a diagnosis”** is a field research of bibliographic nature, which aimed to understand the way in which the school has responded to children diagnosed with Attention Deficit Hyperactivity Disorder (ADHD) from the point of view of pedagogical work and the relationship with the family. To this end, a case

study is presented, from which aspects that reveal the understanding of the student's condition are highlighted, which, in addition to what is required by the school, in cognitive and learning terms, ends up being supported in what is defined in the text as the “way of being at school”, constituted from the expectations of the adult, distancing the school from its primary function of welcoming diversity and difference, to the detriment of the responsibility of pedagogical work.

Reflections are presented focused on the diagnostic assessment to which children who do not correspond to this idealized way of being at school are submitted, to the wrong referrals, to the need for a multidisciplinary approach, to the absence or lack of dialogue between school and family, with a view to emphasize the hierarchical accountability process suffered by the child submitted to medicalization processes triggered by the unpreparedness of the school and the precariousness of the teaching work that disregards the integral formation and the child's well-being.

From a case study, attempts are reported by a family of a child diagnosed with ADHD, in the search, together with the school, for pedagogical solutions to the child's demands, at the same time as the weaknesses of this school are revealed in the conduction of such solutions, when transferring to the family, as well as, to other professionals the responsibility for their resolution, in clinical contexts, as it conditions such demands and solutions to referrals and treatments for other professionals, without questioning the way it has been dealing with diversity and difference. By abdicating itself from work with diversity and difference, overestimating obedience and subservience to regulation, the school systematically ignores its fundamental role in preparing the subject for autonomous and full exercise of citizenship.

The article **“External assessment policies and medicalization of education: from the meanings of “not learning” until “not teaching”**” aimed to analyze external evaluation policies and their effects regarding “not learning” and “not teaching”, as marks of the blame and medicalization of education. Through a bibliographic and field study, the classificatory logic of evaluations within the scope of policies and their effects both in the organization of pedagogical work and in the constitution of the ways of being a student and of being a teacher submitted to the result patterns derived from market interests. Under these effects, subjects who do not meet quantitative and classificatory expectations are blamed for not meeting idealized standards of normality.

In the text, unilateral accountability for evaluation is emphasized, since such accountability invariably falls on the teacher and the school, evidencing as the failure of both the low rates achieved in relation to the idealized goals foreseen in the ranking of schools

published by the State, Social, political and economic determinants, among others, end up being disregarded, in this process, contributing for the results of the external classificatory evaluations adopted by the State to reproduce the logic of exclusion.

The article **“Medicalization of education and the meanings of not learning discursivized in the pedagogical documentation: a look at school discourse”** aimed to understand the meanings about not learning discursivized by/in a selected elementary school, the one with the highest number of teachers with complaints about students who do not learn in the region where it is located. From documentary research, the naturalization, resulting from this discursivization, the constitution of meanings about not learning, from the medicalizing and pathologizing tendencies of the processes are discussed, specifically in relation to the pedagogical documentation of two children in the beginning of appropriation of writing, which promote, within the school, the proliferation of patients and diseases of not learning; as well as, the misunderstanding about the pedagogical documentation, understood as a mere record of information about the student, instead of being valued as a place of constitution and circulation of the educational memory, therefore of a dialogical nature, when contemplating the multiplicity of voices that are discursivized and who talk about the child.

In the discussion undertaken, the subjection of these children in the process of appropriation of written language is important, as well as the naturalization of meanings of not learning constituted under medicalizing and pathologizing tendencies of educational processes. In contrast, the understanding of written language as a complex cultural activity is highlighted; pedagogical documentation as a locus, for the school, for reflection and analysis of the educational processes, providing different narratives in which the scripts are written based on the voices in the relationships of each one, to the detriment of their reductionism to medical records and/or reports, whose use in the school environment can be taken as an example of the subjectification of medical discourse by education, which includes, in addition to medical information and copies of exams, vague records on educational trajectories, often supported by common sense, whose narratives invariably address only difficulties presented by the children.

In the article **“The school and the Elementary Education I, in face of learning difficulties: aspects for a discussion agenda on the (de)medicalization of education and the success of schools”**, works aspects about the role of the school and the teaching of schoolchildren, given the learning difficulties presented during Elementary School I, which concern the necessary distance from diagnoses that have led to the medicalization of Education. The discussion on such aspects is supported by theorizations that emphasize the

importance of intentional teaching, of action-reflection-action of the teacher, with emphasis on pedagogical interventions, in different places in the school space, which aim to meet the learning needs presented by children, those with difficulties in carrying out the activities. As a methodological proposal, the “tour class” gains relevance, under the perspective that it enables other possibilities for the children to recognize and systematize, with the help of a more experienced partner, the proposed reading and writing practices.

Criticisms are made about the effects of the medicalization of education process, distancing teaching activity from didactic-pedagogical essentiality. Under this understanding, teachers are advised that it is not just a matter of generally considering the effectiveness of the methods and their classification as good or bad, when they are called to rethink such prescriptions in favor of offers to each child understood in their singularities, contrary to the homogenizing prescriptions of school practices, since the initial formation of teachers, through public policies centered on indexes that do not concern the specificities of human development.

The article “**Promoting literacy versus medicalization on higher education: speech therapy contributions**”, shows how, in a more sensitive way, from the last decade, contradictions and problems have been triggered due to the expansion of admission of people in Brazilian Higher Education. The heterogeneity of academics regarding the diverse and unequal literacy conditions results in different possibilities for participation in academic and professional formation.

In addition to what has traditionally been happening at other levels of education, also in higher education a significant number of students who do not meet the expectations and demands of reading and writing texts relevant to this academic context have been considered, based on a logic medicalizing, as having problems/disorders/dysfunctions associated with organic-perceptual, cognitive and/or behavioral limitations. The severity and strength of this logic that crosses the educational context at all levels and teaching modalities is denounced, as they remove/deny the economic, cultural, political determinants that produce restricted literacy conditions and, therefore, accessibility to education, understood as a guarantee of entry, permanence and quality formation that favors emancipation and the exercise of citizenship.

Despite the evidence that the school experience previously lived did not guarantee to a significant portion of the students sufficient reading and writing conditions to participate actively and critically in an undergraduate course, one of the answers in face of this reality has been the referral of students to clinical care of speech therapists to overcome alleged

reading/writing difficulties/disorders. To face this problem, contributions from a speech therapy approach are presented, from a discussion of a clinical case, based on a socio-historical perspective, with an academic diagnosed as dyslexic, enrolled in higher education. Conducted from reading and writing practices involving different discursive genres and the analysis of their contexts of production and circulation, as historically and socially determined, the clinical process aimed at the re-signification, by the referred participant, of a condition of reader and writer marked by the status of incapacity, resistance and suffering, for a place of authorship and, therefore, for the establishment of relations with the written language charged with meanings.

The article **“The relationship of speech therapy students with reading and writing after a literacy workshop”** discusses, based on an Academic Literacy Workshop, the different suffering relationships that university students have when writing. The text brings the different positions taken by students before and after the Workshop, which allowed a new meaning of an educational trajectory of failure and school difficulties for a new relationship with the written language. The text shows that educational exclusion is perpetuated at the university, which, in view of academic requirements, only legitimizes the previously installed pathologizing process.

From two axes of analysis, the following are highlighted: the reading and writing difficulties presented by the university students, which, among other aspects, show the overvaluation, by the university students, of the normative aspects of the language, in view of the concern with the adequacy to the linguistic and formal norms that characterize the diversity of genres, especially academic genres, whose reading and writing practices adopted in the university context promote, to a large extent, the distancing of language as a discursive practice; as well as, the effects of the literacy workshop on their subjective position, among which the overcoming of limiting daily situations, the greater participation of/in the academic community and greater liberation of the student in the face of the complaints presented, which also made it possible to increase autonomy and reduction of anguish and suffering triggered by the condition of blame and immobilization in view of the protagonism necessary in the constitution of the subject by/in the discursive writing practices.

In the article **“‘I’ve always been kind of average’: speech therapy clinic and narrative construction in higher education”** the narrative in the speech therapy clinic shows a trajectory of suffering with the written language, by the university student, which refracts the different ways in which he builds a life story that gives meaning to his suffering. The search for diagnosis in the speech therapy clinic is a legitimation of this process,

evidenced from a case study of a university student. Such process, based on subsidies from the areas of Linguistics, Sociology and Speech Therapy, through the clinical interview and material written by him, rescues meanings and the life story of this university student in his relationship with written language.

Concomitantly, the resignification of the clinic as a welcoming place, based on the diagnosis for educational difficulties, highlights the university's unpreparedness in facing issues of this nature, while it allows speech therapy, from an enunciative-discursive perspective, to constitute a locus that favors the understanding of the social aspects involved in the construction of the student's entire career.

In the article **“Speech and language therapy at school: the dialogical approach as a demedicalizing strategy”** criticisms are made of medical approaches, considering the presentation and discussion of a speech therapy proposal, committed to systematization and the implementation of practices that allow a look at the child, knowledge and pedagogical practices capable of enhancing the place of the apprentice, the teacher and the teaching-learning process as characteristic of the relations established in the sphere of Education to meet their constitutionally recognized role: the democratization of symbolic goods constructed socially and historically.

Developed over a two-year period, in a public school in the city of São Paulo, and based on a theoretical and methodological perspective, of a Bakhtinian nature, this proposal was guided by listening to voices, as highlighted in the text, not always “consonants” that cross and constitute the school context. Carried out in three stages and involving teachers, students of the initial years and teachers from six support rooms, spaces were created to generate dialogue the views about the students' learning process, as well as possible difficulties that may be part of it. From this perspective, the destabilization of stigmatizing truths, assumed with one of the objectives of the proposal, occurred based on the dialogues produced around and in relation to the so-called “problems” children, as teachers were asked to look at such children not as those deviated from a homogeneous group, but as part of a group of real children, with potential and with diverse and particular experiences.

It is also worth noting that the proposal analyzed in this article, coherently with the assumed dialogical approach, clearly places the position of the speech therapist who is inserted in the educational context as a professional committed to teaching. In this sense, the article contradicts the perspective traditionally adopted by groups of speech therapists inserted in the school context, which values the identification and classification of alleged learning disorders, with the objective of preventing and/or overcoming them, based on actions and

stimulation directed at students or guidance and instrumentalization to teachers. In this analysis, the role of Speech Therapy is re-signified in the school context, based on the enhancement of the teacher's knowledge and the establishment of partnerships/dialogues that promote the sharing of knowledge about language, above all, of the different aspects involved with literacy processes and uses social aspects of writing.

In the article **“The effects of practices and discourses on the educational process of a subject with supposed reading and writing difficulty”**, based on a case study of a child with complaints of writing difficulties, it is presented the analysis of how medicalizing discourses and practices are instituted, disregarding aspects involved with the educational practices and with the different forms of learning of each subject, even before the confirmation of a clinical diagnosis. The article shows how, starting from an established “pre-diagnosis”, generally in the educational context, such approaches produce negative effects that constitute the child's subjectivity, as well as they permeate the educational context producing experiences that result in “not learning”.

A critical analysis of the mechanisms and reasons that lead to the construction of pre-diagnoses attributed to children, in general by educators, shows the fact that, after confirmation by health professionals, based on the description of children's behaviors in the school context, there are no changes that promote the overcoming of supposed difficulties and the advancement of school learning. From this perspective, diagnostics, above all, serve to seal limitations/disorders/deficiencies as arising from students' problems sufficient to justify school failure. Thus, the discussions conducted in that article trigger the paradox that exists in the fact that the diagnosis of alleged disorders, the description of symptoms, causes and classifications attested in the reports, instead of contributing to the child's understanding, of their particularities and their ways of learning serve, much more, to subsidize excluding pedagogical practices. As a way of coping with such a paradox, the importance of implementing partnerships between professionals in the area of Health and Education is also highlighted.

In the article **“Medicalization and speech therapy performance addressing school complaint”**, reports produced by speech therapists about their clinical work with children with school complaints are placed on the scene to learn how, in their speeches, ideological positions around the established tensions are materialized from different perspectives around the “school complaint”, the “school failure” and the “medicalization”

Although the school complaint is correlated to school failure and both phenomena, built by negative, disqualifying and suffering meanings, cross the school walls producing

effects on children, educators and family members, the fact that there are still studies that analyze them as such phenomena are restricted, emgendered from medicalizing principles and mechanisms produced, complementarily, by professionals in the areas of health and education. Going against the grain of studies and practices that traditionally reiterate and naturalize an organicist-biologizing logic, from a socio-historical theoretical-methodological perspective, speech therapists are invited to listen critically-responsively to discourses that, contradictorily, show intersectoral actions, involving speech therapists and educators corroborating or contrasting medicalizing approaches and practices that have been (re)produced in the school context.

In the proposed discussion, the existing tensions between ideological perspectives that, differently, guide the performance, the social role of Speech Therapy and the relationships established with the field of Education, assume relevance: - one called as biomedical, based on practices focused on the description of symptoms and causes and the classification of alleged disorders and/or difficulties, provide justifications for school failure as inherent to students and/or their families; - another committed to a concept of the subject, of its development and schooling processes based on listening and welcoming children, their families and school complaints, as socially and historically constituted.

During the reading of these articles that integrate this Dossier aspects such as the subjectification of medical discourse by education and related areas, which conditions the processes of constitution of the subject and of/in written language to the standardized and idealized reductionism in different ways of being and behave; the hierarchy of professional knowledge; the constitution of medicalizing and pathologizing processes as standardizing processes for these different ways of being and behaving; the excessive valuation of mechanistic and preventive practices that originate or result from this standardization, among others, are recurrently addressed and discussed based on the criticism of technical control over life.

Under the expectation that they will contribute to the necessary reflection on the proposed theme and the urgent debate about the meanings about not learning generated in the context of medicalizing conceptions and practices, we wish you all a good reading.

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