

MEDICALIZATION PHENOMENON IN SCHOOLS: TEACHERS' SOCIAL REPRESENTATIONS

FENÔMENO DA MEDICALIZAÇÃO NAS ESCOLAS: REPRESENTAÇÕES SOCIAIS DE PROFESSORES(AS)

FENÓMENO DE LA MEDICALIZACIÓN EN LAS ESCUELAS: REPRESENTACIONES SOCIALES DEL DOCENTE

Rafaella Oliveira RESENDE¹
Rosely Ribeiro LIMA²

ABSTRACT: This article presents the results of a research that aimed to find out what are the social representations of teachers about the phenomenon of medicalization in schools and its possible repercussions on educational policies to think about children's health in their learning process. We interviewed 72 teachers who work in early childhood education and the first phase of elementary education in public and private schools in a city in the interior of Goiás, using a semi-structured script. Data were processed using the IRAMUTEQ software. The analyzes interrelated the contributions between Social Psychology, specifically TRS, Educational Psychology and Educational Policy. The social representations identified are about the consideration and belief in the use of medication by children as an important factor for the progress of educational practice; a systemic problem generated by capitalism, which is affecting the school teaching-learning process and the population's own health.

KEYWORDS: Students. Teachers. Medicalization. Social representations. Educational policies.

RESUMO: O presente artigo apresenta resultados de uma pesquisa que objetivou levantar quais são as representações sociais de professores(as) sobre o fenômeno da medicalização nas escolas e suas possíveis repercussões diante das políticas educacionais para pensar a saúde das crianças em seu processo de aprendizagem. Foram entrevistados(as) 72 professores(as) que atuam na educação infantil e primeira fase do ensino fundamental de escolas públicas e privadas de uma cidade do interior de Goiás, diante de um roteiro semiestruturado. Os dados foram processados no software IRAMUTEQ. As análises interrelacionaram as contribuições entre a Psicologia Social, especificadamente da TRS, a Psicologia da Educação e a Política Educacional. As representações sociais identificadas dizem respeito a consideração e crença do uso do medicamento pelas crianças como fator importante para o andamento da prática educativa; uma problemática sistêmica gerada pelo capitalismo, que está afetando o processo de ensino-aprendizagem escolar e a própria saúde da população.

PALAVRAS-CHAVE: Alunos(as). Professores(as). Medicalização. Representações sociais. Política Educacional.

¹ Federal University of Jataí (UFJ), Jataí – GO – Brazil. Postgraduate Education Program. ORCID: <https://orcid.org/0000-0001-8255-7061>. E-mail: rafaella.resende@hotmail.com

² Federal University of Jataí (UFJ), Jataí – GO – Brazil. Professor of the Postgraduate Program in Education. ORCID: <https://orcid.org/0000-0002-5223-1826>. E-mail: roselylima@ufj.edu.br

RESUMEN: Este artículo presenta los resultados de una investigación que tuvo como objetivo identificar las representaciones sociales de los docentes sobre el fenómeno de la medicalización en las escuelas y sus posibles repercusiones en las políticas educativas para pensar la salud de los niños en su proceso de aprendizaje. Entrevistamos a 72 docentes que actúan en la educación infantil y en la primera fase de la enseñanza fundamental en escuelas públicas y privadas de un municipio del interior de Goiás, frente a un guión semiestructurado. Los datos fueron procesados mediante el software IRAMUTEQ. Los análisis interrelacionaron los aportes entre la Psicología Social, específicamente la TRS, la Psicología Educativa y la Política Educativa. Las representaciones sociales identificadas se refieren a la consideración y creencia en el uso de medicamentos por parte de los niños como un factor importante para el progreso de la práctica educativa; un problema sistémico generado por el capitalismo, que está afectando el proceso de enseñanza-aprendizaje escolar y la propia salud de la población.

PALABRAS CLAVE: Estudiantes. Maestros. Medicalización. Representaciones sociales. Política educativa.

Introduction

The Theory of Social Representations (TRS) was defended by Serge Moscovici in 1961 in his work entitled "The Social Representation of Psychoanalysis". It was inspired by Durkheim's Sociology, and then developed, inserted, and fed by Social Psychology. The problematizations revolved around the interrelation between subject and object and how the process of elaboration of social knowledge is dynamized; the research questions also sought to understand how this knowledge is shared by the population and how it served as guidelines for individual and social practice.

TRS differs from the phenomenon of social representations, because the first presents itself as a psychological and social theory of knowledge, which seeks to understand and explain the process of structuring knowledge from the construction of social representations, while the second would be complex and dynamic manifestations of a social and practical knowledge about a specific object, thus being understood as a phenomenon.

It is intended to say that social representations can be conceived as collective theories about phenomena experienced by people, which, from such theories, generate knowledge that comes from common sense and at the same time receive influence from the reified universe, and their contents are socially constructed in order to designate a model of social thought and become interpretive and practical knowledge of reality. Jodelet (2001) points to social representations as being able to guide and direct the behavior and communicability of a society.

Moreover, they assist in the transmission and assimilation of knowledge. Therefore, understanding the social representations of teachers about phenomena that generate

problematizing questions about the area of Education becomes relevant as it becomes possible to know a little more about the reality of Education in Brazil in face of the research object built about the phenomenon of medicalization in schools.

When trying to understand the knowledge built and experienced by people about the social representations of a certain phenomenon, it is important to check how it is established in the environment where it is historically dynamic, as well as in its context. In the case of medicalization in schools, it was verified that the medicalization process arose from hygienist movements. Zucoloto and Patto (2007) point out that hygienist practices emerged in the face of the discourse of imposing healthy habits from schools, avoiding the proliferation of diseases.

One of the events that contributed to the growth and maintenance of the medicalization of students in the school environment was the attribution of pathologies linked to school failure. In this scenario, it became common to note that those children who presented any difficulties in learning, or who did not behave according to what was expected by the institution, were quickly pathologized and medicated.

According to Collares and Moysés (2013), Brazil can be appointed as one of the countries with the highest number of diagnoses for problems and disorders linked to the educational process and, consequently, to school failure, considering that it is one of the world's largest consumers of methylphenidate, an element present in medications such as Ritalin® (Novartis) and Concerta® (Jansen).

Based on this, it is understood that understanding the social representations of teachers about a phenomenon that permeates the entire sphere of Education is extremely relevant, for it makes it possible to visualize part of the reality of schools today and how professionals have been dealing with the relationship between learning difficulties and the continuous use of medication by students.

In this small investigative cut, in view of the educational context, it is possible to attempt generalizations in the sense of understanding social processes and highlight the influence of the capitalist economic system and class society in this educational dynamic. For, according to Moysés and Collares (2014, p. 60-61), "Medicine thus artificially constructs the diseases of not-learning and the diseases of not-behaving, and the consequent demand for specialized health services, by asserting itself as the competent institution and responsible for their resolution." To investigate this cut of educational context is, also, to understand the multiple factors that involve learning disorders, and on the other hand, to highlight how the educational policy directions can reduce this phenomenon, imprisoning it to the school space.

Finally, research that strives to interrelate TRS, Educational Psychology, and Educational Politics can foster the elaboration of understandings and overcome of capitalism and class society.

Methodological crossing and outline of the results obtained

The quanti-qualitative research developed was based on the Theory of Social Representations (TRS). As a methodological-theory, on one hand, it defends the paradigm that understands that there is no separation between the individual and society and, on the other hand, it has investigative and scientific methodologies that offer elements for the understanding of this interrelationship. The study was developed in two stages, which were carried out simultaneously. Initially, a documental and bibliographic survey was carried out about the object of study of this investigation, as well as the theoretical referential on which it was based. Later on, the empirical research was started, with the purpose of collecting data, or better defining, the contents of the possible social representations.

The data/content collection tool used was a semi-structured script that served as the basis for the interviews. A computer program was used to process the interviews in order to help in the lexical and content organization arising from the interviewees' speeches, the software used was Interface de R pour les Analyses Multidimensionnelles de Textes et de Questionnaires (IRAMUTEQ). Before being started, the research was approved by the Ethics and Research Committee of the Universidade Federal de Goiás (UFG) - Regional Jataí, currently Universidade Federal de Jataí (UFJ). The interpretation and analysis of the data/content were based on the TRS inserted in Social Psychology, simultaneously, by the contributions coming from Educational Psychology and Educational Policy.

In the research, seventy-two (72) teachers from urban public municipal and private schools of a city in the interior of the State of Goiás were interviewed, who work in early childhood education and in the initial years of elementary school, comprising a universe of professionals who perform their work activities from the nursery³ to the fifth year of elementary school. Of this sample, 46 (forty-six) were from public schools, 22 (twenty-two) from private schools, and 04 (four) worked in both institutions. Of the seventy-two (72) interviewed teachers, twenty-four (24) stated that they had already worked in both sectors at some point in their

³ Even at a young age, it was observed through the reports the existence of students already diagnosed since nursery school.

professional lives, however, until the moment they were interviewed, they were only working in one sector.

1.1 Among the interviewed teachers, sixty-six (66) had a degree in Education; of these, twenty (20) had a second degree. The remaining sixty-six (06) teachers had degrees in diversified courses like Psychology, Law, Mathematics, Physical Education, and Superior Normal Education. The secondary education courses mentioned by the teachers were: Law, Administration, History, Biology, Mathematics, Languages, Human Resources, Superior Normal, Nutrition, Visual Arts, Animal Husbandry, and Philosophy.

1.2 As to the time of employment of the professionals interviewed, 25% presented that they had been working for 0 to 5 years, 22.3% from 6 to 10 years, 9.7% from 11 to 15 years, and 43% with more than 16 years of experience as professionals in the area of Education. Overall, the teachers presented an average of 14.8 years of experience in the teaching profession. The time they have been working varied between a minimum of 03 (three) months and a maximum of 40 (forty) years.

1.3 The interviewed teachers are people of different genders and sexual orientations and because there was no intention of accessing which gender they identify themselves as, it was preferred to use a neutral noun to represent them next to their narratives, in the complete research report. As pointed out by Campos (2007), in the last decades there were remarkable social changes, among which can be highlighted events such as: the right acquired by women to enter the job market; the development and dissemination of new technologies and the media; the identification of the diversity of the family, racial, and ethnic structure; the different sexual orientations, the dissemination of new expressions of religiosity; and, finally, the confirmation of education as valuable for the development of the economy and as a factor of social mobilization.

The recognition of the socializing and transforming function of education proposes a reflection about the influences, incumbencies, and historical modeling that education, school, and teachers undergo in the face of the capitalist economic system and a class society. The fundamental role of women in the transformation of society is emphasized, or, as much as possible, of the non dissemination of "symbolic or physical violence" in social, or even, institutional and/or private contexts; as well as, the struggle of the social movements of black people, indigenous people, and the LGBTQIA+ community, for the due transformations of the school and society.

In the interviews, the following question was initially presented: "Do you think there is a difference in the performance of the teacher comparing public and private school? Faced with

this question, fifty (50) professionals said yes, and twenty-two (22) said no. Finding the teachers who work in public schools, thirty-three (33) said yes and thirteen (13) said no. Searching the teachers from private schools, twenty (20) said yes and two (02) said no, and of the teachers who work in both institutions, three (03) said yes and one (01) said no. Therefore, approximately 70% answered that there is a difference between the two institutions as to the teaching performance.

In view of the answers, the interviewees were asked to justify their choice. The teachers who work in public schools point out that in the private institution there is a greater participation of parents in the school life of their children, and also state that because there is a difference, their own children study in private schools. These data/narratives are recurrent in the studies on the importance of the family in the school life of children.

Valle (2003) highlights that the maintenance of the relationship between family and school increases the children's development potential. Santos (2006) exposes in his work that the absence of parents in relation to the education of their children may interfere with their school performance. However, the physical absence of parents in the school environment does not necessarily mean that they are exempt from their responsibilities regarding the support the child needs during school life.

The factors that lead to the difference in the participation of parents in the school life of their children from public and private institutions can be several: unavailability of time due to working hours; lack of knowledge to help them in the process (considering that many parents may have a lower level of education than their children); sociocultural dimensions; historical and political perspectives. Even fitting into some of these factors, many are still present, managing to meet the educational needs of their children adapting themselves to the family routine.

As to the answers of the private school teachers about the question presented initially, besides pointing out the greater proximity of the family in the institution they work for, they point out that the level of education in these schools presents itself as superior because of the existing materials and resources, including the presence of textbooks. In general, those interviewed understand that these factors fit as elements that directly affect the performance of the teachers.

The precariousness of the structures in schools can really affect the performance and professional development of teachers and, consequently, the learning of students. However, it is worth pointing out that the presence of some kind of apostille or teaching franchise does not necessarily mean an educational superiority among schools. Moreover, as exposed by Libâneo

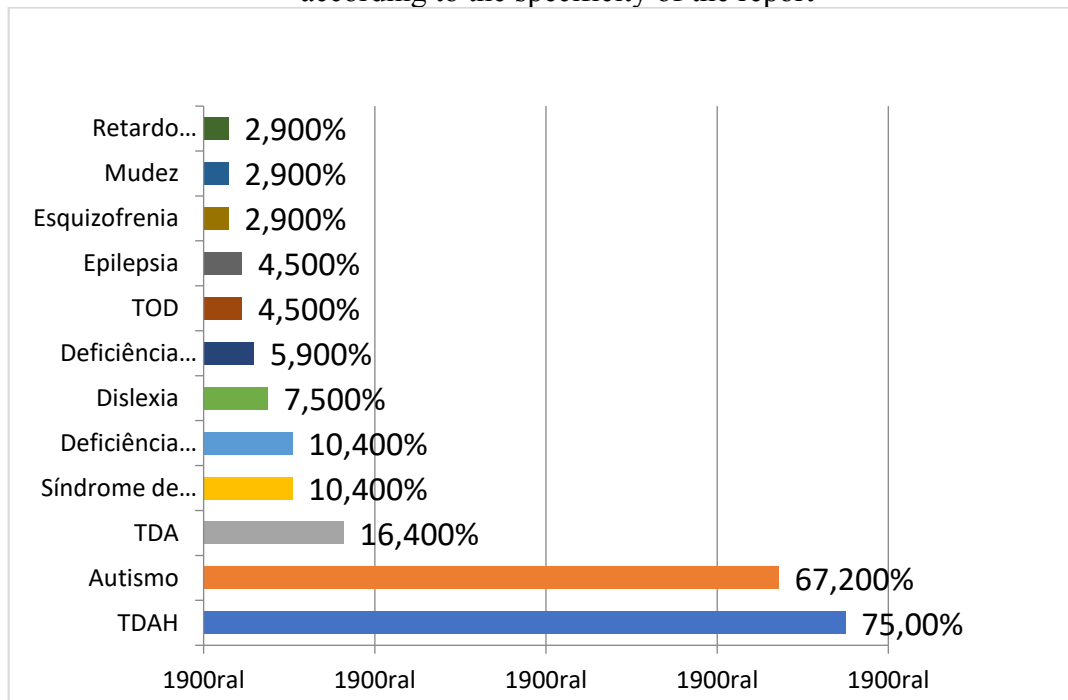
(2015), schools should not limit themselves only to teaching materials to transmit and transpose knowledge. Students should be introduced to a knowledge coming not only from books, but also elaborated and dynamized by science, by historical, social, cultural and political processes.

Medicalization in schools: clipping data/content and its possible implications for educational practice and population health

After the exposure of knowledge about the differences between the performance of public and private school teachers, the research participants were asked about their experiences with students who had some kind of diagnosis described in reports by health professionals; then they answered if they could quantify the cases and if they could say which diagnoses these students presented. After quantifying the results, it was found that seventy-one (71) teachers knew or had already taught classes for children with diagnoses; only one (01) teacher reported not having had this experience. Of the 71 (seventy-one), 32 (thirty-two) were unable to quantify how many students were enrolled and, at the same time, linked to reports from health professionals, or had already met throughout their careers. Finally, based on this data, an average of 4.2 students with diagnoses presented in reports by health professionals was found. In relation to knowledge about the diagnoses, 01 (one) interviewee exposed that, for not having had contact with students who had reports, he could not point out any type of diagnosis. Moreover, 04 (four) teachers were unable to inform which diagnoses their students presented, and 67 (sixty-seven) were able to highlight between 01 and 06 (one to six) diagnoses known throughout their career.

The diagnoses indicated were Attention Deficit Hyperactivity Disorder (ADHD) stands out in 71.6% of the answers; Autism Spectrum Disorder (ASD) appears in 67.2% of the notes; Attention Deficit Disorder (ADHD) is reported in 16.4% of the answers; Down's Syndrome stands out in 10.4% of the explanations, as well as Hearing Impairment; Dyslexia appears in 7.5% of the reports; Visual Impairment in 5.9% of the answers; Oppositional Defiant Disorder (ODD) in 4.5% of the reports, as well as Epilepsy; Schizophrenia was pointed out in 2.9% of the answers, as well as Mental Retardation, according to Figure 1.

Figure 1 – Graphic presenting the percentage of diagnoses mentioned by the interviewees, according to the specificity of the report⁴



Source: Data from the survey

Some diagnoses were mentioned only once, as was the case of Personality Disorder, Pervasive Developmental Disorder (PDD), Spastic Paraparesis, Encephalopathy, Linguistic Difficulty, Motor Difficulty, Mental Problem, Mental Disorder, Dyscalculia, Dysgraphia, Low Intelligence Quotient, Physical Disability, Microcephaly, Intellectual Disability, Irlen Syndrome. It is noteworthy that the data and diagnoses presented were based exclusively on the teachers' reports.

With regard to questions about the phenomenon of medicalization in schools, the answers were organized into a single corpus so that they could be processed using the IRAMUTEQ software. With the use of this computer program, all the speeches of the interview of each participant were considered as an Initial Context Unit (ICU), or it can be named text. Each of these is divided into Elementary Context Units (ECUs), text segments, or better defined, text fragments, sized by the software itself via lemmatization. After this separation, the Context Unit (UC) or the Regrouping of Text Segments (RST) is processed, which will later allow the performance of the correspondence factor analysis, using the frequency and incidence

⁴ Retardo = Mental retardation; Mudez = Muteness; Esquizofrenia = Schizophrenia; Epilepsia = Epilepsy; TOD = Oppositional Defiant Disorder; Deficiência auditiva = Hearing Impairment; Dislexia = Dyslexia; Síndrome de Down = Down's Syndrome; TDA = Attention Deficit Disorder; Autismo = Autism Spectrum Disorder; TDHA = Attention Deficit Hyperactivity Disorder

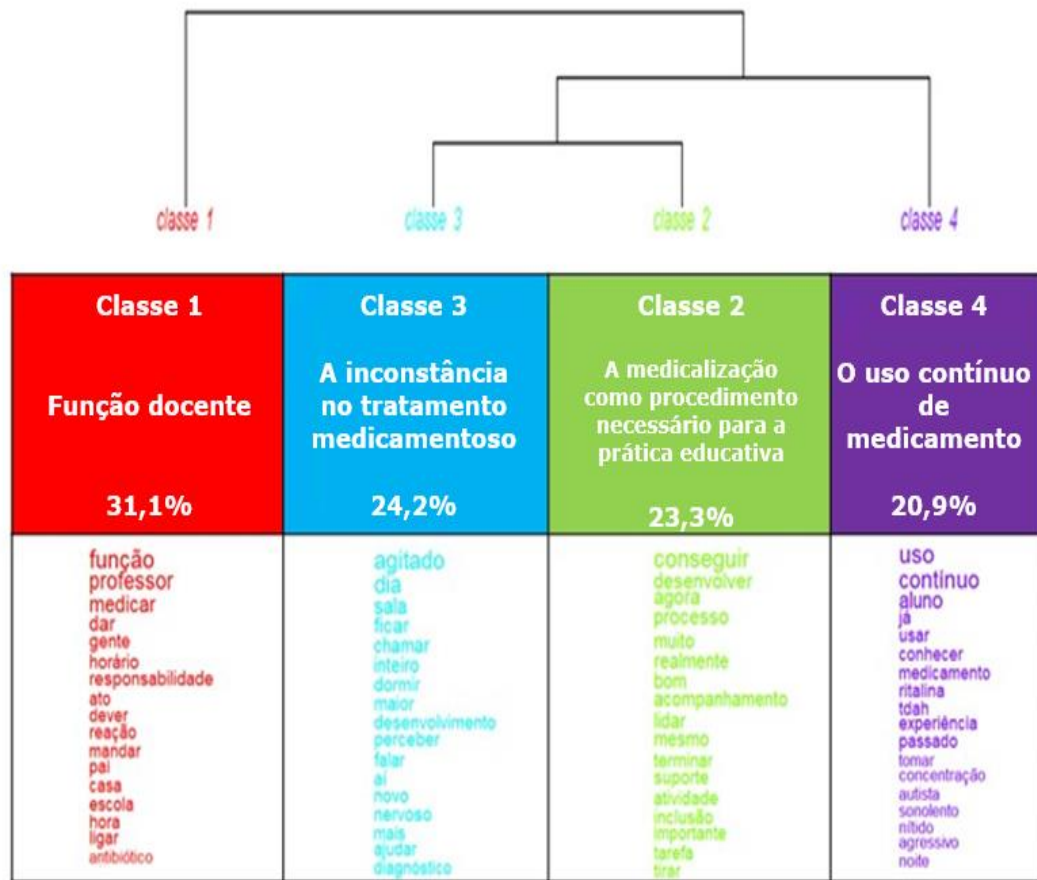
of words and the processed classes themselves containing a crossing of the collected homogeneous and consensual vocabulary, generating a graphic image.

The software proposes six possibilities for textual analysis, namely: statistics (lexicographical analysis); processing of content specifics; correspondence factor analysis; classification (Reinert's method); similarity and word clouds. The data presented in this article refer to the organization in front of the lemmatization tools, correspondence factor analysis and classification and generation of classes performed by the computer program, which allow the categorical analysis of the data in the face of a possible content analysis by the (a) researcher. Such organization seeks to present classes of textual segments that, at the same time, offer vocabularies similar to each other and distinct from the segments of the other classes. From this, the program presents a dendrogram that illustrates the relationships between the classes.

The number of classes identified and processed was 04 (four), which means that there is consonance between the reports of the interviewees, pointing to the existence of a consensus about what is understood about the phenomenon under study and how these subjects experience the process of medicalization in schools, thus enabling the understanding of which social representations emerge from the contents of the speeches.

This division of classes allowed a categorization of the content of the interviews into distinct parts. However, it is important to highlight the existence of intersection points, which become more evident and better understood when the program highlights the most relevant and significant words for each of the classes, as shown in Figure 02:

Figure 2 – Dendrogram that presents the points of intersection between the classes of content of the interviewees' speeches and the relevance of the most consensual words⁵



Source: Data from the survey

The class that presented the highest percentage in the corpus was number 1, with a total of 31.1% of ECUs. Based on its content, this class was titled “Teacher Function”. The second most evident class was number 3, comprising a percentage of 24.2% of ECUs. This received the title of “Inconstancy in drug treatment”. Then, class number 2 was presented with 23.3% of ECUs, named “Medicalization as a necessary procedure for educational practice” and, finally, class number 4, making up the percentage of 20.9% of students. ECUs, entitled “Continuous use of medication”. From the dendrogram, it can be seen that the contents of classes 2 and 3 have a strong proximity to each other, while classes 1 and 4 are distant, presenting very specific characteristics for each one.

⁵ Classe 1: Função docente = Class 1: Teaching role; Classe 3: A inconstância do tratamento medicamentoso = Class 3: The inconsistency of drug treatment; Classe 2: A medicalização como procedimento necessário para a prática educativa = Class 2: Medicalization as a necessary procedure for educational practice; Classe 4: O uso contínuo de medicamento = Class 4 = Continuous use of medication

The number of classes presented does not necessarily coincide with the amount of social representations involved, therefore, in order to understand whether they indicate any social representation, it is necessary to carry out an analysis of their content.

Faced with Class 1, the following consensual contents can be identified about the teaching role in the face of the phenomenon of medicalization in schools: the action of administering medication to students should not be considered as part of the teaching role, however much some interviewees have already performed such behavior; Furthermore, in addition to teaching practices, the teacher has as a function the precision and duty to guide and alert parents about the conflicts and difficulties faced by the child at school, especially in what concerns refers to their learning process, in order to warn about the possibilities of the existence of some type of illness or psychodiagnosis. Thus, the teaching function in the face of learning difficulties is to alert parents to a possible search for solutions outside school. However, the solution outside the institution to these challenges is often linked to the presentation of medical reports and the indication of medicines as a guarantee of an important result for the educational process.

According to Costa *et al.* (2019), with the increasing demand for children with some type of diagnosis, the immediacy to solve these problems gained space in order to consider educational problems as something that should be treated in an emergency way, which collaborates with the idea of that medication can present itself as a main form of solution, for achieving fast results.

From this, Costa *et al.* (2019) state that the idea that teachers should be responsible for pointing out and recording the first signs of probable disorders linked to the learning process is strengthened, given that, by closely monitoring the process of students' learning, and to verify any difficulty or difference from an early age, teachers feel safe in providing some kind of warning to parents, in order to allow them to look for solutions as soon as possible.

The role of the education professional, in this case, is anchored in the idea of caring for children's mental health, an important dimension for educational challenges; however, immersed in hegemonic discourses of efficiency and effectiveness, teachers are charged and charge for quick results in the educational process. A systemic problem generated by capitalism, which is affecting the school teaching-learning process and the population's own mental health.

Even though most of the interviewees say that they do not feel able to administer the medication to students, this majority of the professional category understands that they are prepared to indicate a probable interpretation of the existence of a possible diagnosis that challenges the learning process. In a way, this attitude would be understood as an action that

contributes to the educational process, being linked to the primary function of promoting the effective learning of students, because when diagnosed and medicated, they would be able to better develop the proposed activities in the classroom.

In view of this, a social representation of professional teachers is identified directly linked to the pressure of the capitalist economic system that forces them to be competent for the possible indication of learning problems, being a way of reporting to the parents an initial interpretation of a possible diagnosis and, thus, successively and systemically, if those responsible for the children do not forward the appropriate solution to other professionals outside the school environment, the teachers themselves do not feel able to proceed with the work with the student without official confirmation of the indication of the difference or disability of the child for the best performance of their craft, finally, they also want to resolve the problem quickly learning problem.

With regard to the other classes processed by the computer program, in relation to the various points of intersection, it is considered that classes 2, 3 and 4 have strong relationships with each other, presenting a single social representation, which would be to consider the use of the drug as a necessary procedure for the progress of educational practice. Teachers are affected, experience and reproduce the phenomenon under study and research, which is that of medicalization in schools, and go through an anchoring process to make it familiar, building an interrelationship between the medication and the success in school learning of students with differences or disabilities in face of the school routine or in face of the culture instituted in the context they experience.

In addition, in order to be able to believe that they are performing their role, in the urgency that the events occur in the educational process, the teachers help in the process of naturalization of the phenomenon, it is observed that the learning difficulties become understood within the reality of a context in the Health area; This one is based on the idea that all behavior that deviates from a pattern receives a connotation of disease, and must be diagnosed and, consequently, medicalized in order to be solved. It appears that knowledge in the area of Health is appropriated by the area of Education.

The drug presents itself not only as an important tool for solving diseases, but also problems related to the teaching-learning process. Teachers understand that its use is so effective that, even if it has adverse effects such as sleep, loss of appetite and apathy, children develop, with a considerable improvement in their learning process, being able to overcome the negative impacts that medication consumption can cause. In this sense, “[...] the medicalization

of the lives of children and adolescents is articulated with the medicalization of education in the invention of diseases of non-learning” (COLLARES; MOYSÉS, 2013, p. 3).

In addition, an observation that stood out in these content classes was the issue of inconstancy in the treatment, in which the teachers noticed that the parents often failed to administer the medication to their children or provided a higher dosage than is recommended. An important relationship was identified between this finding and class society, specifically, the economic difference between the students' families. These episodes strengthened the belief that, when applied responsibly and correctly, medication is beneficial for the teaching-learning process, regulating children's behavior, as teachers report that in the absence of medication, a setback in the student's learning became evident, as they were not able to behave in accordance with the rules of school culture.

Finally, the results point to the strong influence of hegemonic discourses of control, behavioral standardization, the search for efficient and fast results for the best progress of the educational process. The reproduction of teachers' social representations about the phenomenon of medicalization in schools in the face of this collected content, strengthen these discourses that lead to practical guidance and the very constitution of the school routine for the search for quality of life and health of the population, which it is directly linked to the misunderstanding generated intentionally by the capitalist economic system about the importance of awareness of human nature in the cultural, social, political and historical interrelation of a country.

Final remarks

When approaching the contents brought in the speeches of the teachers during the interviews, it is verified the existence of social representations that present the medical discourse as an unquestionable knowledge. The contents that present problematizations of learning, fostered in the educational space, are anchored in the area of Health for the possible resolution of these challenges. The image that can be seen is of a child who escapes the behavioral standards required by the school culture and the solution found in the urgency of educational practice is to interpret differences and deficiencies for a proper and quick solution together with a possible medical report and the use of medicines. . Fertile space for the misunderstanding of historical and political factors that condition social inequalities and are inserted, or rather, are rooted in the underground of schools and teachers can only interpret the stem and crown of the tree of the school institution , but not the roots generated by the capitalist

economic system that transport minerals that are in continuous control of the school as a fertile environment for human automation.

In view of this social representation of teachers whose medical knowledge, in the official form of a report that presents a diagnosis, is indisputable, it is understood that parents and teachers consent and agree with drug treatment. , even if the side effects are evident in children who consume it. In the speeches collected, it was observed that there is no space and chance for an alternative form for the development of the teaching-learning process, in which the student is welcomed and attended within his/her specificities and particularities, in a in order to respect their time and needs in the face of the dynamics of the procedural construction of knowledge and emancipatory awareness.

As explained by Moysés (2001), the professor is dependent on a medical science that provides a diagnosis, through his clinical view of the processes of not learning. As a result, this diagnosis carries images of complications for that child who does not learn, and brings the idea that the consumption of a medication could solve all the difficulties presented. For this same author, the drug is presented as a tool to avoid school failure, however, what is offered to that child is a drug that aims at obedience, discipline, thus explaining one of the biases of hygienist practices.

In view of this, it is reflected on the importance of an educational policy structured in planned measures, intervening in the formative and informative processes, which considers the concrete conditions of the school and that implements, together with the Public Ministry, actions that promote restructuring of this scenario, in order to in order to meet the identified demands. It is worth remembering that educational policies are of paramount importance for the implementation of a more democratic and inclusive education, in order to consider not only the local specificities of each school, but also the social, economic, political, cultural and historical ones.

ACKNOWLEDGMENTS: Thanks to the Coordination for the Improvement of Higher Education Personnel (CAPES) for the scholarship granted, assisting in the investment and improvement of this study and research.

REFERENCES

- COLLARES, C. A. L.; MOYSÉS, M. A. Controle e medicalização da infância. **Desidades: Revista Eletrônica de Divulgação Científica da Infância e Juventude**, Rio de Janeiro, n. 1, p. 11-21, 2013. Available at: <https://revistas.ufrj.br/index.php/desidades/article/view/2456>. Accessed on: 11 Nov.2021.
- COSTA, T. S. *et al.* Papel do professor face à medicalização: estudo exploratório no território brasileiro. **Psicologia da Educação**, São Paulo, v. 49, p. 89-97, 2019. Available at: <http://pepsic.bvsalud.org/pdf/psie/n49/n49a10.pdf>. Accessed on: 11 Nov.2021.
- JODELET, D. Representações Sociais: um domínio em expansão. *In*: JODELET, D. (org.). **As Representações Sociais**. Rio de Janeiro: EdUERJ, 2001.
- LIBÂNIO, J. C. **Organização e gestão da escola: teoria e prática**. 6. ed. São Paulo: Heccus, 2015.
- MOYSÉS, M.A.A. **A institucionalização do invisível: crianças que não aprendem na escola**. São Paulo: Mercado das Letras, 2001.
- SANTOS, G. B.; As estratégias de fuga e enfrentamento frente às adversidades do trabalho docente. **Estudos e Pesquisas em Psicologia**, v. 6, p. 1-6, 2006. Available at: <https://www.e-publicacoes.uerj.br/index.php/revispsi/article/view/11090>. Accessed on: 11 Nov. 2021.
- VALLE, L. E. L. R. Psicologia Escolar: Um duplo desafio. **Psicologia Ciência e Profissão**, Brasília, v. 23, n. 1, p. 22-29, 2003. Available at: <https://www.scielo.br/j/pcp/a/Sz5HSBxWXt7Ch7M4DzRrLsx/abstract/?lang=pt>. Accessed on: 11 Nov.2021.
- ZUCOLOTO P. C. S. V.; PATTO M. H. S. O médico higienista na escola: as origens históricas da medicalização do fracasso escolar. **Revista Brasileira de Crescimento e Desenvolvimento Humano**, São Paulo, v. 17, n. 1, p. 136-145, abr. 2007. Available at: http://pepsic.bvsalud.org/scielo.php?script=sci_arttext&pid=S0104-12822007000100014&lng=pt&nrm=iso. Accessed on: 11Nov.2021.

How to reference this article

RESENDE, R. O.; LIMA, R. R Medicalization phenomenon in schools: Teacher's social representations. **Revista on line de Política e Gestão Educacional**, Araraquara, v. 26, n. 00, e022003, Jan./Dec. 2022. e-ISSN:1519-9029. DOI: <https://doi.org/10.22633/rpge.v26i00.16461>

Submitted: 02/11/2021

Revisions required 26/12/2021

Approved: 20/02/2022

Published: 31/03/2022

Management of translations and versions: Editora Ibero-Americana de Educação