

Text 1 - Leaders | Think outside the box

ADHD should not be treated as a disorder: adapting schools and workplaces for it can help far more

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Not long ago, attention-deficit hyperactivity disorder (ADHD) was thought to affect only school-aged boys—the naughty ones who could not sit still in class and were always getting into trouble. Today the number of ADHD diagnoses is rising fast in all age groups, with some of the biggest increases in young and middle-aged women.

The figures are staggering. Some 2m people in England, 4% of the population, are thought to have ADHD, says the Nuffield Trust, a think-tank. Its symptoms often overlap with those of autism, dyslexia and other conditions that, like ADHD, are thought to be caused by how the brain develops. All told, 10-15% of children have patterns of attention and information-processing that belong to these categories.

At the moment, ADHD is treated as something you either have or you don't. This binary approach to diagnosis has two consequences. The first is that treating everyone as if they are ill fills up health-care systems. Waiting lists for ADHD assessments in England are up to ten years long; the special-needs education system is straining at the seams. The second consequence occurs when ADHD is treated as a dysfunction that needs fixing. This leads to a terrible waste of human potential. Forcing yourself to fit in with the “normal” is draining and can cause anxiety and depression.

The binary view of ADHD is no longer supported by science. Researchers have realised that there is no such thing as the “ADHD brain”. The characteristics around which the ADHD diagnostic box is drawn—attention problems, impulsivity, difficulty organising daily life—span a wide spectrum of severity, much like ordinary human traits. For those at the severe end, medication and therapy can be crucial for finishing school or holding on to a job, and even life-saving, by suppressing symptoms that lead to accidents.

But for most people with ADHD, the symptoms are mild enough to disappear when their environment plays to their strengths. Rather than trying to make people “normal”, it is more sensible—and cheaper—to adjust classrooms and workplaces to suit neurodiversity.

In Portsmouth, in the south of England, teachers have been trained to assess a child’s neurodiversity profile on characteristics that include speech, energy levels, attention and adaptability. The goal is to find where children need support (being easily distracted) and where they have strengths (being a visual learner), without diagnosing them with anything in particular. Organising lessons to mix sitting, standing and working in groups is one way to make things easier for pupils with ADHD-type traits. Greater freedom to choose when to arrive at school or work can help those who are worn down by sensory overload during the morning rush. Bullet-point summaries of lessons or work memos, noise-cancelling headphones and quiet corners can help, too.

Such things should be universally available at school and at work. Greater understanding of neurodiversity would reduce bullying in schools and help managers grasp that neurodivergent people are often specialists, rather than generalists. They may be bad in large meetings or noisy classrooms, but exceptional at things like multitasking and visual or repetitive activities that require attention to detail. Using their talents wisely means delegating what they cannot do well to others. A culture that tolerates differences and takes an enlightened view of the rules will help people achieve more and get more out of life. That, rather than more medical appointments, is the best way to help the growing numbers lining up for ADHD diagnoses.

Fonte - The Economist – www.economist.com

QUESTÕES SOBRE O PRIMEIRO TEXTO:

1. O que significa a expressão “Think outside the box”? (1,0)
 - a) Pensar do lado de fora da caixa.
 - b) Considerar a vida social como uma caixa.
 - c) **Pensar de forma original e criativa.**
 - d) Encaixar o pensamento dentro das normas.

2. Escolha a opção correta para a definição da palavra “disorder” no contexto do título. (1,0)
 - a) Um desvio da ordem social normal.
 - b) **Uma doença da mente ou do corpo**

- c) Falta de sistema ou de organização planejada
- d) Uma perturbação da paz ou da ordem pública.

3. Escolha a opção incorreta considerando a informação contida nos primeiros dois parágrafos. (1,0)

- a) Alguns dos maiores aumentos de diagnóstico de TDAH são entre mulheres jovens e de meia-idade.
- b) Na Inglaterra, 4% da população é considerada portador de TDAH.
- c) Os sintomas de TDAH muitas vezes se sobrepõem aos do autismo, da dislexia como também de outros estados de saúde.
- d) É um fato comprovado que TDAH é causado pela maneira em que o cérebro desenvolve.

4. Quais são os detalhes da primeira consequência de tratar TDAH como doença? (parágrafo 3). Escolha a opção errada. (1,0)

- a) As consequências afetam somente o portador TDAH.
- b) Os sistemas de saúde estão sobrecarregados.
- c) As filas de espera para avaliações de TDAH são longas.
- d) O sistema de educação também está sobrecarregado.

5. Qual a conclusão lógica do fato científico de que não existe “o cérebro com TDAH”? (parágrafos 4 e 5). Escolha a opção correta. (1,0)

- a) O uso de medicação com terapia para todos com TDAH para que possam estudar e manter um emprego.
- b) Exigir que todos com TDAH se ajustem a parâmetros de normalidade nos locais de trabalho e estudo.
- c) Ajustar salas de aula e locais de trabalho para se adequarem à neurodiversidade.
- d) Considerar que os problemas de atenção, de impulsividade e a dificuldade de organizar a vida diária sejam controlados por medicações.

6. Quais são as sugestões para que a escola seja mais aberta a portadores de TDAH? Escolha a opção incorreta. (1,0)

- a) Organizar aulas que têm uma variedade de atividades.
- b) Oferecer resumos bem claros do conteúdo de cada aula.
- c) Ter o canto do silêncio ou oferecer fones de ouvido para cancelar ruído.

d) Ter salas de aulas especiais para os portadores de TDAH.

7. Quais são as conclusões do artigo? Escolha a opção incorreta. (1,0)

- a) Usar os talentos dos que tem TDAH com sabedoria significa delegar a outros o que eles não conseguem fazer bem.
- b) **A melhor maneira de ajudar aquelas pessoas diagnosticadas com TDAH é oferecer mais acesso a consultas médicas.**
- c) Aqueles com TDAH conseguem realizar diferentes tarefas simultaneamente ou fazer atividades que exigem atenção aos detalhes.
- d) Uma maior compreensão e aceitação da neurodiversidade reduziria a violência escolar.

Text 2 – ADHD myths and facts

ADHD Needs a Better Name. We Have One.

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Updated on November 1, 2024

ADHD is an inaccurate — and potentially corrosive — name. The term “deficit disorder” places ADHD in the realm of pathology, or disease. Individuals with ADHD do not have a disease, nor do they have a deficit of attention; in fact, what they have is an abundance of attention. The challenge is controlling it.

Therefore, we argue that a more accurate descriptive term is “variable attention stimulus trait” (VAST), a name that allows us to “de-medicalize” ADHD and focus instead on the huge benefits of having an ADHD brain.

VAST symptoms can, of course, negatively impact a person’s life, work, and relationships. Rejection sensitive dysphoria, a phrase coined by Dr. William Dodson, refers to the extreme emotional sensitivity and feelings of guilt, shame, and rejection often experienced by those living with VAST.

But with VAST there are always pairs; you can hyperfocus and then you can’t focus. You are distractible, but you’re also curious. So if individuals with VAST tend to succumb to perceived rejection, they can just as easily thrive with perceived recognition, an experience we call “recognition responsive euphoria.”

The Flip Side of Rejection Sensitive Dysphoria

Individuals with VAST are accustomed to receiving negative feedback in their personal, academic, and professional lives. Real or imagined criticism gets caught in the Default Mode Network — one of the primary networks in the brain that is active

when a person is not focused — and creates the negative feelings that spiral into rejection sensitive dysphoria.

However, the Default Mode Network can have the opposite effect when positive recognition is perceived by someone with VAST. This positivity and encouragement super-charges the VAST brain with the same intensity with which negative feedback defeats it.

Those with VAST are often embarrassed to ask for encouragement, so supporters have to remember to offer accolades for goals met, effort expended, and movement in the right direction. Do not wait to praise perfection because perfection may never happen without praise along the way. Individuals with VAST thrive when surrounded by positive people and when they can step away from projects and people that are a chronic disappointment. These choices, sometimes paired with medication, create recognition responsive euphoria and lead people with VAST to success and happiness.

Just as a little negativity can tumble into anxiety and panic, a drop of praise can build into a tsunami of hope and motivation. Remember, key traits of VAST are resilience and an amazing ability to never give up.

Fonte: Additude - <https://www.additudemag.com/attention-deficit-disorder-vast/>

QUESTÕES SOBRE O SEGUNDO TEXTO

8. Qual a tradução correta de “variable attention stimulus trait”? (1,0)
 - a) Traço de estímulo de atenção variável
 - b) Atenção variável de estímulo tratado
 - c) Variável de atenção de traço de estímulo
 - d) Característica de atenção no estímulo variável
9. Qual o significado da palavra “coined” na frase “a phrase coined by Dr. William Dodson”? (parágrafo 3).
 - a) Marcado
 - b) Valorizado
 - c) Cunhado
 - d) Tratado
10. Por que os indivíduos com “VAST” sentem “rejection sensitive dysphoria”? Escolha a opção incorreta. (1,0)

- a) Porque estão acostumados a receber opiniões negativas nas suas vidas pessoais, acadêmicas e de trabalho.
- b) Porque uma das características da doença “VAST” é sofrer de ansiedade e depressão.
- c) Porque a Rede de Modo Padrão do cérebro recria os sentimentos de rejeição vivenciados.
- d) Porque aqueles com “VAST” frequentemente sentem vergonha de pedir incentivo.