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AUTISM SPECTRUM DISORDER - ASD

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SUMMARY

This paper presents research on Autism Spectrum Disorder (ASD). These objectives are crucial to understanding this disorder. To achieve this, it is necessary to use specific methodologies that meet each student's needs. These methodologies should support teachers' classroom work, thereby facilitating the student's teaching and learning. Based on this research, this article was developed, explaining what Autism Spectrum Disorder is and how each child is unique depending on the type or degree of autism they carry within their genes. This article then demonstrates appropriate strategies for a group of professionals to understand these crucial factors from the earliest stages of development, identifying them as early as possible to better serve them. This includes including family counseling on the subject, so that everyone can understand this disorder, which so profoundly impacts children's intellectual performance. Taking all of this into consideration, everyone can be involved in this long journey for children who so desperately need good support, promoting inclusion—another topic that is also frequently questioned by professionals. Extensive discussion on this topic and this exchange of information leads to the conclusion that if the people involved are truly committed to the same goal, we will certainly have a different reality—one that is more appropriate, welcoming, and inclusive.

Keywords: Autism Spectrum Disorder. Inclusion Legislation. Diagnosis.

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ABSTRACT

This work presents the research carried out on Autism Spectrum Disorder – ASD. The objectives are of great importance in gaining knowledge about this disorder. To make it happen, it is necessary to use specific methodologies that serve each student according to their needs, in which these methodologies help in the work of teachers in the classroom and thus facilitate the teaching and learning of that student. In view of all this research, the relevant article was prepared in which it was presented what Autism Spectrum Disorder is, how each child is unique depending on the type or degree of autism they carry in their genes so that appropriate strategies can be shown in which a whole group of professionals are able to understand such important factors from the first moments of manifestation in their development and as soon as possible it is identified to better serve them and also including the family providing guidance on the subject, so that everyone can understand this disorder that affects children so much in their performance. intellectual.

Taking into account all of this, everyone can be involved in this long journey for children who are in great need of good monitoring, promoting the inclusion of another subject that is also frequently questioned by professionals. There have been enough discussions on this subject and this exchange of information leads to the conclusion that if the people involved are truly committed to the same purpose, we will certainly have a different, more adequate, welcoming and inclusive reality.

Keywords: Autism Spectrum Disorder. Inclusion. legislation. Diagnosis.

INTRODUCTION

Autism Spectrum Disorder (ASD) is a neurodevelopmental disorder, marked by impairments in social communication skills and the presence of patterns of stereotyped, repetitive, and restricted behaviors. The set of deficits that a person with ASD presents varying degrees of intensity (which can be mild, moderate or severe) and also from individual to individual (different deficits in different people).

This implies a characterization of ASD as a continuum or spectrum with wide variation in the way it presents clinically (JEANE AMR ARAUJO; ANDRÉ B.

VERAS; ANDRÉ AB VARELLA . 2019).

In Brazil, Law No. 12,764, enacted in 2012, classified Spectrum Disorder

Autistic (ASD) as a disability, No official data on this population in the territory

nationally, federal statistical mapping continues, for the first time, with the

Demographic Census, under the responsibility of the Brazilian Institute of Geography and Statistics

(IBGE). As a concept in formation applied to a human body that operates and

manifests differently from the average, autism is crossed by historical changes and
sociological issues that occur within the scope of disability.(FERNANDA VG DEBETTO;

GUSTAVO S. SALDANHA, 2023)

Its etiology is still unknown, however, the current tendency is to consider it as a syndrome involving genetic, neurological and social factors of the child. The recognizing the symptoms manifested by children with autism is essential for obtaining an early diagnosis. The signs have variable expressivity and generally begin before the age of three. The child with ASD presents a unique triad, which is characterized by difficulty and qualitative impairments in verbal and non-verbal communication. verbal, in social interactivity and in the restriction of their cycle of activities and interests. In this type of disorder, stereotyped movements and mannerisms, as well as a variable intelligence pattern and extremely labile temperament, Therefore, it is a situation that triggers changes in family life due to the needs monitoring the child for their development (RAYSSA NM PINTO et al. 2016). This bibliographic review article aims to present a historical approach to special and inclusive education, highlighting essential events for the recognition of ASD. This will allow us to understand the Disorder, both for education and health professionals, as well as for their families, clarifying that such knowledge will help us work with autistic people.

LIERATURE REVIEW

SCHOOL INCLUSION OF CHILDREN WITH AUTISM.

The family and education professionals question the inclusion of these children, as the school needs adjustments. Battisti, Heck, and Michels (2015) highlight the challenge that schools face when they receive children with disabilities, as they need of environmental, curricular and methodological adaptations for the development of teaching learning; there must be commitment in order to have school inclusion; teachers, students, parents, principal, community, and everyone who participates in school life directly or indirectly. It is necessary to ensure quality retention so that access is guaranteed, it is essential that the educator conveys confidence and security so that the student be able to learn in a meaningful way.

The National Functional Curriculum is an important curriculum for promoting autonomy and stimulation of children, the main objective of which is to make the student more productive, independent, and more socially accepted. Adequate training is necessary if otherwise, the methodology used in the classroom will not serve to achieve the desired objective; the scope of learning. The teacher needs to be aware that it is important for him to change

their beliefs and attitudes so that the autistic child can learn in a meaningful way (LIBÂNEO J,C,2012).

It is necessary to enable the progressive expansion of socialized experiences, allowing the development of new knowledge and behaviors to overcome the social deficits of these children; in the coexistence of these children with others, it will be allowed that their interactive skills are stimulated, avoiding isolation, in this way regular education will favor development, through coexistence and exchange of relationships. It is

It is important that the autistic child feels safe and close to the teacher, so that quality teaching and learning can be ensured. It is necessary to train everyone involved the autistic child and develop new forms of communication and interaction through playful activities that enable learning and inclusion ((LIBÂNEO, 2012).

THE CONTRIBUTION OF THE FAMILY TO THE PERSONALITY OF AUTISM

The family is of fundamental importance in the formation of the individual, that is, it is a factor important for the constitution of personality and influence, behavior through coexistence and its teachings, and is also responsible for caring for, protecting and teach the individual to live in society (MENESES, 2013).

The arrival of a new member, whether planned or in an unexpected situation, is

It is very natural for the family to idealize everything perfectly, with plans detailing the education they want offer, plan everything that has to do with respect to that child who is arriving. But not even things always go as expected, the diagnosis of Autism Spectrum Disorder, for example, it demands a series of changes in the plans, routine and future of this family, therefore, it is normal for parents to worry (MENESES, 2013).

But it is common for parents to not accept the diagnosis at first, thus delaying the child's treatment, looking for other doctors in search of other satisfactory diagnoses or opinions (MENESES, 2013).

According to experts, ASD causes serious behaviors such as difficulty interact socially, such as maintaining eye contact, identifying facial expressions and understand communicative gestures, express one's own emotions and make friends. Difficulty communicating, characterized by repetitive use of language and difficulty in initiate and maintain a dialogue (ALMEIDA, 2018).

We can conclude that autism does not only affect the individual, but also all other members who live alongside you, so the help of parents is essential for the development, intervention and treatment of the same, being able to count on the help of

a team of multidisciplinary professionals, that is, from different areas, such as Psychologist, Neuropediatrician, speech therapist, educational psychologist, occupational therapist, pedagogue, nutritionist, etc. Therefore, both the family and the cross-functional team need to work together to achieve the great evolution in the treatment of ASD (ALMEIDA, 2018).

THE IMPORTANCE OF EARLY DIAGNOSIS OF AUTISM

In the new version of the classification (ICD-11), to be implemented in 2022, this category is now called autism spectrum disorder (ASD) and excludes Rett syndrome and disorder with hyperkinesia and retardation, approaching the 5th revision of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) and emphasizing cognition, intellectual ability and functional language. Children with ASD tend to have developmental problems between 12 and 24 months, but warning signs may be noticed before they are complete one year. Several authors present converging data that early diagnosis favors and enhances the possibilities of intervention in the early stages of child development by enabling the acquisition of repertoire, such as the development of skills: cognitive, such as verbal language and communication; sociocognitive, such as attention shared10; and behavioral, such as autonomy and social skills. Some authors also describe that early diagnosis helps in better guidance for parents through psychoeducation and the development of management strategies. In this sense, the importance of early diagnosis of autism is increasingly evident in the literature, due to the potential impact of the intervention, which provides stimulation for the child. This is because, in first years of life, there is a greater capacity for neural organization, which favors better prognosis and quality of life. Parents are usually the first to suspect5,6, but lack of knowledge of the aspects of development expected for each age can delay the search for assistance (VANIA R. GIRIANELL, et al. 2023).

In the United States, several cases are identified in children with an average age of age between 3 and 4 years (8). In Brazil, one in every 160 children has ASD, therefore, It is considered that 2 million people are within the autistic spectrum (9,10). In In recent decades, the occurrence of new cases of autism has increased in many countries (11). This increase may be related to greater knowledge about the disorder, consequently, to an increasingly early and clear perception of the criteria for diagnosis, although in many health centers there is still a lack of recognition of ASD symptoms (BRUNA F. STEFFEN, *et al*, 2019).

The diagnosis of ASD is based primarily on the patient's clinical presentation, with criteria established in the DSM V. If detected in the first 36 months some of the symptoms described in the manual, associated with long-term interventions, the prognosis will have an impact positive, since the age at the beginning of treatment is one of the determining factors for its better evolution. Thus, the worst prognoses are directly related to the diagnosis after three years of age, since after that age the child has more difficulty in adapting to a better relationship with oneself and others. Thus, a favorable prognosis will be possible through the adoption of treatment before crystallization of symptoms (CANUT ACA, et al 2014)

However, despite great advances in studies, many children still remain for many years without a diagnosis or with inadequate diagnoses, due to the large loss in terms of professional training and knowledge. Thus, professionals in health, education and other related areas, which have childhood as a focus, must be increasingly prepared to deal with cases of autism in their practices, being knowledge of the subject is extremely important for identifying signs, diagnosis and early intervention (BRUNA F. STEFFEN, *et al*, 2019).

METHODOLOGY

To prepare this literature review, the methodology used was of the type bibliographic research and had as main descriptors: autism, Spectrum Disorder Autistic people, family, and early diagnosis. A study was conducted based on surveys in books, articles available in virtual libraries and reliable scientific databases such as Scielo and Google Scholar. The criteria adopted for selecting articles were inclusion of articles published from 2013 to 2024, except for basic references for production of the article. After the bibliographic material was collected, the analysis stage was carried out and interpretation of information for discussion and description of the proposed topic.

RESULTS AND DISCUSSION

The family of an individual with autism plays a decisive role in their development educational. These are families who experience pain and disappointment at different stages of their lives. life, starting from the moment of the news of the disability and during the process of child development. The family can contribute in a very special way to the development of children with autism at school, mainly providing them with education professionals with information about children's forms of communication.

If there is at least one form of communication used by the child, the others can be developed (Peteer, 1998 apud Serra, 2010). The registration of children with autism at school can bring changes within the family, as the child is attending another social group and having the opportunity to interact with other children. Parents, in turn, begin to live with other parents in this new universe and to believe in possibilities for the systematic development and learning of their children. According to Silva (2019), it is of utmost importance to establish bonds between family members, teachers, children and other professionals involved so that the proposed activities are directed to the needs and peculiarities of each child.

When we think about the healthy upbringing and development of any child, we quickly refer to the role in the family nucleus and of all the adults involved in the your care.

This is no different when we turn to the reality of children with ASD, who need all the support, support and affection, just like any other child. It turns out that, in context of ASD, the role of the family becomes evident when we understand that even the direct interventions with the child only have the desired effect when they are maintained at all times environments in which the child lives; this is what we call generalization.

That's why there's so much talk about parental guidance work, when we talk about autism. What is the focus of parenting? Working with parents or with people caregivers aim to teach the basic principles of behavior and strategies behavioral strategies to enable them to appropriately manage their children's behavior. This is how the entire family unit gains autonomy to provide the right environment suitable for the healthy development of the autistic child. Furthermore, it is in this context that important information is given about what positive parenting practices are in raising children. What science has to say about the role of family in development of children with ASD, There are many studies that focus on studying positive practices in raising children.

It turns out that when we talk about parents of atypical children the number of studies on this field drops dramatically, revealing an absence of evidence that could help, even more, families living with ASD, and autistic people themselves. Considering the data presented, it is clear that when we think about child development, especially of children on the spectrum, we are talking about the entire family nucleus and the adults who make part of child care.

There is no intervention for child development that is effective without family is involved. Below are some studies that help us understand which the role and importance of the family in the life of a child on the spectrum.

The results reveal that the inclusion of children with autism in school is a process which is under construction and is still in an early stage. This is because, despite the current legislation, the school is not prepared to offer quality education for the student with autism. There is a lack of infrastructure, specialized professionals and training for teachers. According to the articles analyzed, it was possible to observe, mainly, difficulties reported by teachers in relation to the characteristics of the Disorder of the Autism Spectrum. This highlighted the difficulties teachers have in carrying out differentiated observations and interventions, justified by the fact that they have to meet the other students; the fact of not observing students with ASD demonstrates a disadvantage in terms of the school inclusion process, since it is necessary to understand details of the child, which will serve as indicators of their development zone, so that their particularities are considered during the necessary adaptations. (DIVINA EA PEIXOTO; MARIANA L. MENDES, 2022)

In the results of the study, some of the most highlighted were observed by teachers as difficulties in the inclusion process. At this point, it is interesting to observe that the behavior and communication category were more expressed than the category pedagogical difficulties. The results of the above study corroborate those of teachers interviewees presented a need for support to deal with the particularities of these children; considering also that the knowledge they had in their education did not were sufficient. It is also observed that one of the difficulties pointed out by teachers in these studies, they do not refer exactly to knowledge about the characteristics of the diagnosis of students with ASD, but rather the lack of knowledge and training considered deficient in dealing with practical challenges in the classroom. It is worth noting that it is done continuing education for teachers is extremely necessary with regard to improvement of practical issues related to inclusion in the school environment. also highlighted the lack of adequate pedagogical support from institutions. The results indicated that teachers face difficulties in obtaining the necessary support, provided legally, such as the availability of an assistant or companion when necessary, as well as a Specialized Educational Assistance (AEE) service within the school itself. (DIVINA EA PEIXOTO; MARIANA L. MENDES, 2022)

Among the diagnoses addressed, Brazil presented, in this period, a proportion of childhood autism diagnosis of 31.9% in CAPSi, ranging from 23.7% in the North to 39.0% in the Northeast. GDD (Global Developmental Disorder), without classification, presented highest proportion in the North (73.1%) and lowest in the South (36.5%), a region that, however, had the highest proportion of unspecified PDD (17.5%). The mean and median age was higher for atypical autism, while the median age was the same for the other disorders. In in relation to the regions, some variations were observed: the North region had a higher average age for atypical autism and younger for other PDD – but with a low occurrence cases, and the first quartile above the distribution in Brazil for all diagnoses. For the Northeast and Southeast regions, as well as for Brazil, with the exception of the diagnosis of atypical autism, early diagnosis occurred in 25% of cases (Table 1). (VANIA R. GIRIANELL, *ET AL.* 2023).

Table 2 presents the results of RRb and RRa, and the respective intervals with 95% confidence interval (95% CI). Early diagnosis of children with childhood autism was 48% greater than that of atypical autism. The other categories also presented a diagnosis early onset higher than atypical autism: PDD without subtype designation (RRb = 1.55), others TGD (RRb = 1.48) and unspecified TGD (RRb = 1.44).

There is some consensus among experts that autism is caused by dysfunctions of the central nervous system (CNS), such disorders lead to a pattern of child development. Despite this evidence of abnormalities in neurodevelopment linked to autism, due to the complexity of the CNS and the great variability of symptomatic manifestations, the etiology of autism is still unknown. It is reported to be a heterogeneous and multifactorial disorder, influenced by environmental, genetic and neurological factors. Furthermore, controlling this inflammation reversed changes that this caused in neurons, cells responsible for storing and transmitting information in the brain and which are found younger in autism (BRUNA F. STEFFEN, et al, 2019).

Table 1. Proportional distribution of the diagnosis of autism and other types of PDD (Disorder Global Development) attended at CAPSi and respective mean and median age of diagnosis according to region of residence. Brazil, 2013_2019

| Região de residência | Diagnóstico | n | % | Idade da criança (em anos) | | | | | | |
|-------------------------|----------------------|---------|-------|----------------------------|------------------|---------|---------------|---------------|------|----------|
| | | | | Média | Desvio padrão | Mediana | 1° Quartil | 3º Quartil | Min. | Max |
| | Autismo atípico | 13 | 1,0 | 7,3 | 2,0 | 6,0 | 6,0 | 9,0 | 5 | 11 |
| | Autismo infantil | 322 | 23,7 | 6,3 | 2,7 | 6,0 | 4,0 | 8,0 | 1 | 12 |
| Norte | TGD geral | 993 | 73,1 | 6,1 | 2,8 | 6,0 | 4,0 | 8,0 | 1 | 12 |
| Norte | Outros TGD | 2 | 0,1 | 4,5 | 0,7 | 4,5 | 4,3 | 4,8 | 4 | 5 |
| | TGD não especificado | 28 | 2,1 | 5,8 | 2,7 | 5,5 | 3,8 | 7,0 | 2 | 12 |
| | Subtotal | 1.358 | 100,0 | 6,2 | 2,7 | 6,0 | 4,0 | 8,0 | 1 | 12 |
| | Autismo atípico | 203 | 3,7 | 5,9 | 2,8 | 5,0 | 4,0 | 7,5 | 1 | 12 |
| | Autismo infantil | 2.144 | 39,0 | 5,0 | 2,7 | 4,0 | 3,0 | 7,0 | 1 | 12 |
| Nordeste | TGD geral | 2.798 | 50,9 | 5,2 | 2,8 | 5,0 | 3,0 | 7,0 | 1 | 12 |
| Nordeste | Outros TGD | 133 2,4 | 5,3 | 2,9 | 5,0 | 3,0 | 7,0 | 1 | 12 | |
| | TGD não especificado | 217 | 3,9 | 5,4 | 2,6 | 5,0 | 3,0 | 7,0 | 1 | 12 |
| | Subtotal | 5.495 | 100,0 | 5,2 | 2,8 | 4,0 | 3,0 | 7,0 | 1 | 12 |
| | Autismo atípico | 36 | 4,0 | 6,3 | 2,8 | 5,5 | 4,0 | 9,0 | 2 | 12 |
| | Autismo infantil | 235 | 26,2 | 5,6 | 2,8 | 5,0 | 3,0 | 8,0 | 1 | 12 |
| | TGD geral | 590 | 65,8 | 5,7 | 2,9 | 5,0 | 3,0 | 8,0 | 1 | 12 |
| Centro-Oeste | Outros TGD | 6 | 0,7 | 6,7 | 4,3 | 5,0 | 3,3 | 10,5 | 3 | 12 12 |
| | TGD não especificado | 30 | 3,3 | 5,9 | 2,9 | 6,0 | 4,0 | 8,0 | 1 | 12 |
| | Subtotal | 897 | 100,0 | 5,7 | 2,8 | 5,0 | 3,0 | 8,0 | 1 | 12 |
| | Autismo atípico | 308 | 2,4 | 6,3 | 3,0 | 6,0 | 4,0 | 9,0 | 1 | 12 |
| | Autismo infantil | 3.815 | 29,4 | 5,5 | 2,8 | 5,0 | 3,0 | 7,0 | 1 | 12 |
| | TGD geral | 7.646 | 59,0 | 5,4 | 2.9 | 5,0 | 3,0 | 7,0 | 1 | 12 |

(VANIA R. GIRIANELL, et al. 2023).

Table 2. Crude and adjusted relative risk of factors associated with early diagnosis of children with diagnosis of autism and other types of PDD treated at CAPSi. Brazil, 2013 to 2019.

| Variáveis | RRb | IC95% | RRa | IC95% |
|----------------------|------|-----------|------|-------------------------------------|
| Diagnóstico inicial | | | | |
| Autismo atípico | 1,00 | | 1,00 | |
| Autismo infantil | 1,48 | 1,27-1,71 | 1,43 | 1,23-1,66 |
| TGD geral | 1,55 | 1,34-1,80 | 1,50 | 1,29-1,74 |
| Outros TGD | 1,48 | 1,21-1,81 | 1,49 | 1,21-1,83 |
| TGD não especificado | 1,44 | 1,22-1,69 | 1,49 | 1,26-1,76 |
| Origem | | | | |
| Outros ^a | 1,00 | | 1,00 | |
| Atenção básica | 1,51 | 1,37-1,68 | 1,40 | 1,26-1,55 |
| Demanda espontânea | 1,45 | 1,31-1,61 | 1,29 | 1,16-1,43 |
| Ano do diagnóstico | | | | |
| 2013 | 1,00 | - | 1,00 | |
| 2014 | 1,25 | 1,15-1,35 | 1,25 | 1,15–1,35 1,15–1,35 1,23–1,44 |
| 2015 | 1,26 | 1,16-1,36 | 1,24 | |
| 2016 | 1,34 | 1,24-1,44 | 1,33 | |
| 2017 | 1,43 | 1,34-1,54 | 1,41 | 1,37-1,58 |
| 2018 | 1,50 | 1,40-1,60 | 1,47 | 1,37-1,58 |
| 2019 | 1,40 | 1,31-1,52 | 1,40 | 1,30-1,50 |
| Região de residência | | | | |
| Norte | 1,00 | - | 1,00 | - |
| Nordeste | 1,86 | 1,67-2,08 | 1,90 | 1,70-2,13 |
| Centro-Oeste | 1,52 | 1,31-1,76 | 1,51 | 1,31-1,76 |
| Sudeste | 1,71 | 1,54-1,90 | 1,69 | 1,52-1,88 |

(VANIA R. GIRIANELL, et al. 2023).

FINAL CONSIDERATIONS

After analyzing the text, we concluded that Autism Spectrum Disorder – ASD is a complex condition affecting communication, behavior and even social interaction. With this we understand that not all cases are the same, there being need to have knowledge of each framework related to ASD.

The importance of an early diagnosis was also observed, which allows for a rapid intervention so that it can be worked on in some way with the child that will be actually diagnosed with this disorder. There is much to be done, as it will not be a task easy considering that there are several cognitive aspects to be analyzed, each child may present a specific diagnosis according to the level presented in your evaluation. In addition to the team specialized in monitoring this child who was diagnosed with ASD, the family must also be present on this long journey, as it is an ongoing process that needs to be worked on not only at school but at home also. Many scholars in this area have focused their studies on this topic, to to be able to welcome these children who were previously forgotten and treated in any way, without proper care, today we can count on efficient studies that allow us inclusion is so debated and often treated in any way, because what we see in most of the time it is a total disregard, which should not happen since we have a north to follow, when the subject is autism, that is, we are no longer uninformed regarding even inclusion. Currently, we can already count on a multitude of research and means that will help us in working with children with Autism Spectrum Disorder, we cannot let children with different abilities be left out of the search for their development in terms of learning. When there is an early diagnosis Much can be done if there is proper monitoring and all people are present. committed, that is, it is not only the professionals in the area, but also teachers and family.

There is important data to be presented, data that shows the percentage of children who have autism, there may not be enough data to having such a wide scope in relation to service, but it is already a point quite positive for the search for this quantity, which will lead to the knowledge of an entire population, so that due rights are given to these children who previously lived at margin of exclusion



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