

CONCEPTION ABOUT THE CAREGIVER'S ROLE BY GENERAL EDUCATION TEACHERS

CONCEPÇÃO SOBRE O PAPEL DO CUIDADOR POR PROFESSORES DO ENSINO COMUM

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Abstract: The school caregiver has become a reality, and their importance is linked to changes in the school environment to accommodate students with more severe disabilities, especially in terms of motor abilities. The research question in this study is: what is the conception about the caregiver's role by general education teachers? Thus, the objective is to analyze the underlying conceptions of regular education teachers about the role of the caregiver in the classroom. Five teachers who worked in a single school in the interior of the state of São Paulo, and who had caregivers and students with disabilities enrolled in their class participated in the study. Data collection was conducted through semi-structured interviews and the content was written in a copybook. Data processing and analysis consisted of identifying the conceptions with the help of two judges who validated the conceptions extracted from the reports. The results indicated that the conceptions about the role of the caregiver is that they are a professional to give assistance to students with disabilities inside and outside the classroom. Emphasis was given by four participants in relation to the caregiver's role within the classroom, assigning them academic activities, such as reading and writing. In conclusion, the results contrast with the duties for hiring these professionals by municipalities, which would be to take care of issues related to hygiene, feeding, and commuting within the school.

Keywords: special education; school caregiver; conceptions; inclusive education.

Resumo: O cuidador escolar tem se tornado realidade e sua importância está atrelada às modificações do ambiente escolar para receber estudantes com deficiências mais severas, principalmente em termos motores. A pergunta de pesquisa neste estudo é: qual a concepção sobre o papel do cuidador por professores do ensino comum? Dessa forma, tem-se como objetivo analisar as concepções subjacentes de professores de ensino regular sobre a atuação do cuidador em sala de aula. Cinco professores do ensino comum que trabalhavam em uma única escola no interior do estado de São Paulo, e que possuíam cuidadores e estudantes com deficiência matriculados em sua turma, participaram da pesquisa. A coleta de dados foi realizada por meio de entrevista semiestruturada e Caderno de Conteúdo. O tratamento e análise dos dados consistiu em identificar as concepções com o auxílio de dois juízes, que validaram as concepções extraídas dos relatos. Os resultados indicaram que as concepções sobre a atuação do cuidador é a de que ele é um profissional para ajuda dentro e fora da sala. Ênfase foi dada por quatro participantes em relação às funções do cuidador dentro da sala de aula, atribuindo a eles atividades acadêmicas, como leitura escrita. Concluindo, os resultados se contrapõem às

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atribuições para a contratação desses profissionais pelos municípios, que seria a de cuidar de questões relacionadas a higiene, alimentação e deslocamentos dentro da escola.

Palavras-chave: educação especial; cuidador escolar; concepções; educação inclusiva.

INTRODUCTION

School caregivers were not part of educational policies even when people began to talk about allowing students with disabilities to attend school in Brazil. The earliest reports from mothers with children with cerebral palsy already emphasized that they were prevented from entering school due to their motor disabilities. The obstacles were: 1) architectural issues, such as steps and stairs in the school; 2) the student's lack of independent movement; or 3) personal characteristics which prevented them from using the bathroom and eating meals at school. Thus, the students' mothers or sisters were invited to perform the role of helping them with these tasks to resolve this situation, which they did not perform independently. It is clear that the conditions were blamed on the students, as if the problem were theirs, but in reality, they were conditions that were lacking in the schools (Manzini, 1989).

Along these same lines, other studies with parents and teachers also indicated that the dependence and lack of autonomy of students who were more severely compromised for practical care, such as bathing and changing diapers, would be conditions that would prevent them from entering schools (Silveira; Neves, 2006). However, studies with parents of children with intellectual disabilities indicated the opposite direction, meaning that when they began attending regular school classes, their hygiene and eating habits improved and were generalized to the home environment, so that they gained independence and autonomy in life activities (Costabile; Brunello, 2005).

In turn, regular schools began to adapt with the discussion and dissemination of the Guidelines for Special Education Policy from the Perspective of Inclusive Education (Brasil, 2008). This document mentions the need for education systems to make monitor or caregiver roles available in the school routine to assist students with hygiene, eating and mobility needs. Although the guidelines described the need for the role of a school caregiver, it did not yet have the force of law at that time, but it was already possible to find the presence of a support intern within the classrooms.

A study by Araújo and Lima (2011) indicated that the support intern was considered a favorable measure for inclusion according to the parents of children with

disabilities who attended special or regular schools, or those whose children were not yet in school, especially in relation to the entry of more physically challenged children into school. This item was considered by parents as a major factor for including children with disabilities in school.

With the discussions and advances in educational policies aimed at the entry and permanence of students with disabilities in school (Brasil, 2008), the legislation began to guarantee some of the required conditions, such as the school support professional, renamed within the school as school caregiver.

Then with the discussions in the National Convention on the Rights of Persons with Disabilities, the school support professional was included in the Statute of Persons with Disabilities (Brazil, 2015). The Statute indicates in its article 28 that it is the responsibility of the public authorities to “[...] ensure, create, develop, implement, encourage, monitor and evaluate [...]”, among several demands, the supply of school support professionals (Brasil, 2023, p. 20-22).

Therefore, despite the nomenclature being different, the terminology “caregiver” is found in the profiles of Brazilian municipalities to hire school support professionals, whose function and attribution are defined in the Inclusion Law, in item XIII, of article 3:

[...] school support professional: person who performs feeding, hygiene and transportation activities for students with disabilities and works in all school activities where necessary, at all levels and types of education, in public and private institutions, excluding techniques or procedures identified with legally established professions (Brasil, 2023, p. 11-12).

Therefore, the statute guarantees an old demand, and most importantly it was transformed into Law number 13.146, in 2015, and updated in 2023. In analyzing this law, there is a definition of the duties of this professional which can be summarized as care for hygiene, food and transportation. Its application is intended for the various education modalities and levels, regardless of whether it is a public or private educational institution. There is a specific care in the law, because there are professions that also work with the same target audience as Special Education, so they are excluded from those that were already legally determined. An incursion into this interpretation can refer to the school support teacher, who has other functions different from those of the school support professional.

In reality, the municipalities and states of the federation are responsible for hiring school support professionals and the nomenclatures of the notices may be different, as Lopes (2018) rightly pointed out in his research that covered different states of Brazil: 1) Assistants/Interns; 2) Child development assistant (*Auxiliar de desenvolvimento infantil - ADI*); 3) School life assistant (*Auxiliar de vida escolar – AVE*); 4) or caregiver.

Research on school caregivers indicates that these professionals can address the motor and cognitive limitations of students in the target audience for Special Education and are essential to the inclusion process. According to Alessi Júnior *et al.* (2022), caregivers also work to guide students' activities and socialization activities, and often to meet pedagogical demands, as they "[...] are involved in the teaching-learning process, working together with all teachers (Alessi Júnior *et al.*, 2022, p. 244).

Certainly, the caregiver's role in the school environment routine is extremely important for the school inclusion of students with disabilities. However, one caveat must be pointed out: would they be able, with a high school diploma, to work in the teaching and learning process with academic activities?

In this sense, the question falls on training these professionals. In terms of training, the requirements for hiring these professionals can be very different in municipalities and states. For example, in 2016, the city of Santa Rita in the state of Paraíba opened a call for applications for Level II Education Agents (caregivers for people with special needs), and the minimum educational requirements were to have completed high school and a teacher training course (Facet, 2016).

Certainly, caregivers can bring other benefits by gaining a deeper understanding of the socio-emotional characteristics of students with disabilities, as they can create an emotional bond with them and better understand their needs (Alessi Júnior *et al.*, 2022; Araújo; Lima, 2011), as caregivers are responsible for assisting with basic tasks such as hygiene, feeding, and getting around; and they will be close to the student at other times and in socializing spaces, outside the classroom.

In order to understand the problem presented, the research question that led to the structuring of this study was: what is the conception of the caregiver's role by regular school teachers?

OBJECTIVE

This study is part of a larger research project that sought to analyze the various conceptions about the role of teachers with students with disabilities. In this sense, the objective of the present study was to analyze the underlying conceptions of regular education teachers about the role of caregivers in the classroom.

METHOD

The study presented herein uses a descriptive approach, being a cross-sectional study based on a qualitative analysis with the data collected through interviews and content notebooks.

The research participants were five regular school teachers who worked at a single school in the interior of the state of São Paulo, Brazil, and had students with disabilities enrolled in their class. The inclusion criterion for the sample was that in addition to having experience with students with disabilities, all teachers also had a caregiver in their classroom who worked with these students. Each teacher in the convenience sample taught a class and had a student with a disability enrolled. More specifically, of the five students with disabilities, four had intellectual disabilities and one had an intellectual disability with autism. The school had a Resource Room that served the students, and all of them had a report.

Data collection began through a semi-structured interview and was complemented by other collection sessions using the Content Notebook. A script with open questions was prepared with several themes to conduct the interview. The script was evaluated by master's and doctoral students who were taking a scientific methodology course whose theme was the interview.

After the evaluation, the questions were modified and the script was sent to two external judges who had experience in Special Education and with the use of interviews as indicated by the literature in the area (Manzini, 2020). The final script was prepared after this evaluation. It is interesting to note that the final script did not mention questions about caregivers, a fact which appeared during the interviews with the five participants mentioned in the inclusion criteria of this study. This fact occurred due to two questions in the script: "Do they (students with disabilities) participate in the activities? Do they

receive any help?”. The conceptions about caregivers was deepened in the second collection through the content notebook.

The content notebook was a procedure developed by Dr. Carolina Martuscelli Bori (Manzini, 2020) and later used by several researchers in their research work on the verbal reports of participants (Nunes, 2019; Manzini, 1989; Mello, 2019). The information in the content notebook comes from the transcribed statements of an interview (unstructured or semi-structured). The transcription is done in full and contains the statements of the interviewer and interviewee. The notebook is prepared on a sheet of A4 paper in portrait position. The first page contains a message to the research participant, informing them that the notebook was prepared with all the questions and answers that occurred during the interview. The notebook is divided into columns, with the first containing the most important message for the researcher, the second column the important message, the third column is important, but a little further from the main objective, and so on, the notebook is divided in order of importance. This composition and the column titles depend on the research problem and the objective to be achieved. Five or six columns are generally sufficient to format the notebook. The column titles must be clear to the interviewee and are identified after the interview. Therefore, the procedure analyzes the content and the information is inserted into the columns, forming a notebook with several pages, hence the name content notebook (Manzini, 2020).

After collecting data through the semi-structured interview with the five teachers and after transcribing the verbal data, it was possible to prepare the content notebook; the notebook was composed of four columns, as shown in Table 1.

Table 1 – Content notebook columns.

What do I do with the student?	What do I think about to plan and execute this ?	What does the student do?	Other information
Questions and answers	Questions and answers	Questions and answers	Questions and answers

Source: Author's own elaboration.

With each page turned, the header with the names of the columns remains in the notebook to guide the reading. This formatting can be done by inserting the names of the columns from the content notebook into the MS Word header.

The procedure for the data collection sessions consists of reading the information in the notebook with the participant, and the researcher can then ask new questions about

the topic and delve deeper into the information. The participant can voluntarily change the information, talk more about the topic, or ask to remove some information. In other words, the procedure gives validity on the participant's part to the information that is now in written form.

This information was presented to the participants during the data collection on the first page of the notebook: "This notebook contains all the oral information you gave during our interview. Now, you can read, reformulate, change or add to any of it". The data collection sessions are conducted with the researcher reading it aloud. A notebook is given to the interviewee. Additional questions can be inserted into the researcher's notebook to be delved into during the data collection sessions. The number of sessions may vary according to the content. More than three data collection sessions are generally rare, and the subject may be exhausted in the second or third data collection session.

The data collection sessions are recorded and with the help of the content notebook, and later the information (changes, reformulations or additions) are transcribed and inserted in the exact points of the notebook where the reading occurred. This was the procedure followed in the data collection of the present study, which included the initial semi-structured interview and a single data collection using the content notebook.

The data analysis and treatment was performed based on the content notebook. The researcher and two other researchers participated in identifying the conceptions. The definition of conception used was based on Mendes (1995). For the author, conception is:

[...] the result of the set of information which enables individuals, social groups, society, or culture, to describe the characteristics of the phenomenon, or the way in which it manifests itself, identify the phenomenon based on the characteristics described, explain its occurrence through the establishment of relationships between determined and consequent events, and derive strategies to intervene in the condition (Mendes, 1995, p. 8).

Based on this author's theoretical framework, a detailed reading of the transcripts was performed to identify and name each conception. The judges indicated by agreement whether the quoted excerpt displayed a conception and whether the name given to it was appropriate. This agreement procedure between judges served to validate the data and is known as consensual analysis between the researcher and the two judges.

The example below illustrates how the conceptions were identified and named.

[...] So I think they need a tutor, the same activity that I prepared, doesn't even need a tutor to have prepared it (P4).

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Conception identified and named P4 - *Conception about the caregiver*.

After identifying the concepts, another treatment was carried out to analyze how, and if, the participants indicated how to resolve the situation described. Again, based on Mendes (1995), people can explain the occurrence of facts and establish relationships to proceed with strategies to intervene in that situation. Table 2 presents an example of this analysis.

Table 2 – Conception of the caregiver’s role.

Identification of the situation	How to resolve the situation
P1: Because I alone would not be able to take care of my class and take care of D. at the same time, because he requires much more attention than other students.	P1: I start the activity with him, showing him how to do it and also showing the caregiver, and she continues.

Source: Author’s own elaboration.

The results of the processing and analysis of the collected data are presented below.

RESULTS AND DISCUSSION

As already mentioned, all five participants presented their conceptions regarding the caregiver’s role. Information about the conceptions can be seen in table 3 below.

Table 3 – Conception of the caregiver’s role.

Identification of the situation	How to resolve the situation
P1: Because I wouldn’t be able to take care of my class and take care of D. at the same time, because he requires much more attention than other students.	P1: I start the activity with him, showing him how to do it, and also showing the caregiver, and she continues.
P3: When they removed the caregiver, I had to put her next to me. She had to sit in the front, and I helped	P3: In oral classes she listened, but when it was time to write, to actually write, she needed the caregiver.

<p>her as much as I could, but it was very difficult and complicated, because I had to leave her and give more attention to the class, which had a much larger number of students.</p>	<p>P3: The caregiver helped, we worked on different activities for her.</p>
<p>P3: Many times it was questioned here, in my class, that she didn't need it because she went to the bathroom by herself, drank water by herself, but J. here, I don't think it's a daycare, we're not here to teach her how to drink water or go to the bathroom.</p>	<p>P3: Because she already knows how (to drink water and go to the bathroom), J. is here to learn, to learn to read and write, and that's the part where she needs the caregiver the most.</p>
<p>P4: So I think they need a tutor (caregiver), the same activity that I prepared, doesn't even need the tutor to have prepared it.</p> <p>A: I think so, a person who would stay there by their side, like the caregiver and the tutor. The caregiver is responsible for hygiene and food, but here in this city, the caregiver ends up staying inside the classroom to help too, but not in the state, for example, the caregiver is responsible for food and hygiene outside the classroom. Theoretically, the tutor would be responsible for the pedagogical part.</p>	<p>P4: But if he stayed there next to me with my activity, like the monitors, the assistant teachers. That's it, helping him, using some resource too, look at the alphabet, look at this letter, pay attention to the alphabet.</p>

<p>P4: Because I see that G. wants to read, he scans the alphabet.</p>	<p>P4: So it's very difficult, if he had someone there by his side, with the alphabet ready for him. I think it's the tutor, not the caregiver, he knows how to manage on his own.</p>
<p>P5: [...] because the others, for the most part, had autonomy, did almost everything by themselves, it was corrected on the board, those who had more difficulties we gave a more special look at.</p>	<p>P5: I would prefer it if I were with him (the caregiver), because then I would give guidance and the person would talk to the child.</p>

Source: Author's own elaboration.

In analyzing the excerpts from the transcripts shown in Table 1, it can be identified that the conceptions about the caregiver are related to what the teachers initially think about their students and the situation. The time factor needed to take care of the classroom and the student is mentioned by two teachers: “[...] I wouldn't be able to take care of my class and take care of D. at the same time alone (P1)”; “[...] I had to leave her and give more attention to the classroom (P2)”. Thus, from the teachers' point-of-view, the caregiver would be responsible for giving attention to the student to resolve this situation, especially to carry out the activities: “[...] but when it was time to write, to actually write, I needed the caregiver (P3)”.

One of the teachers mentioned that he had already been asked why a caregiver was present, since her student was independent in relation to drinking water and going to the bathroom. For her, the caregiver would have another function, which would be to help in the process of learning to read and write: “[...] because she already knows how (to drink water and go to the bathroom), J. is here to learn, to learn to read and write, and that is the part where she needs the caregiver the most” (P3). P4 also conceived this in this same direction: “[...] That's it, helping him, using some resource as well, look at the alphabet, look at this letter, pay attention to the alphabet”.

Another interesting fact is that one of the teachers indicates knowing exactly what the caregiver's function is, but the report also presents divergences about the different attributions that the State and Municipality assign to this position:

[...] but here in this city, the caregiver ends up staying inside the classroom to help too, but the state, for example, doesn't, the caregiver is to take care of food and hygiene outside the classroom. Theoretically, the tutor would be responsible for the pedagogical part (P5).

Therefore, it is clear from the reports that the teachers' conception was that the caregiver should have the role of assisting in pedagogical activities, as pointed out in the previous examples. Perhaps a more aggravating issue is knowing that the caregiver would not have the training to perform this function, but even so it would be a means to resolve the classroom situation, as mentioned by one of the teachers: "[...] So I think they (students) need a tutor; the same activity that I prepared, does not even need the tutor to have prepared it (P4)". Only one teacher made it clear in his conception what his student needed: "[...] do you think they would need a caregiver? (interviewer's question). No, in my opinion not. Maybe a tutor teacher (P2)". The reports convey an underlying message: the teachers conceive that the caregiver is not prepared to work with teaching and learning issues. Therefore, one way to resolve this situation is to guide the caregiver on how he or she should conduct the pedagogical activity: "[...] I start the activity with him or her, showing him or her (the student) how to do it, and also showing the caregiver, and she continues" (P1); "[...] The caregiver helped, we worked on different activities for her." (P3); "[...] I would prefer her to be with him or her (the student), because then I would give guidance and the person (the caregiver) would talk to the child" (P5).

It is possible to see some of the duties of this professional in observing the legislation that indicates the profile for hiring educational caregivers in municipalities in the interior of São Paulo, as provided in Complementary Law No. 045, of December 14, 2017. One of the first issues of the law is that it focuses on the target audience of the school as mainly indicating students with motor difficulties, which may be in the upper limbs, to perform activities such as having a snack; or in the lower limbs related to movement. The situations which involve basic care in the daily activities of the school are mentioned, including: 1) giving the student a snack and promoting oral hygiene; 2) assisting in hygienic activities related to using the bathroom, such as body and intimate hygiene, and changing diapers and clothes; and 3) care with postural adjustment, which involves moving around safely (Promissão, 2017).

Therefore, one question which may arise is about the appropriateness of hiring caregivers for students with intellectual disabilities without motor difficulties. Although the students have reports on their cognitive condition, there is no mention in the reports about the need for caregivers for these students regarding activities of daily living and movement within the school. It seems that the needs of the teachers, which are evident in the reports, are directed towards auxiliary pedagogical activities with these students.

In analyzing Complementary Law No. 045, it is possible to verify a character related to educational needs in one of its attributions: “[...] understand basic indications contained in the student’s academic record with reference to special educational needs”. However, this topic is not very clear in relation to what to understand and what the caregiver’s attribution would be. Perhaps the research participants needed another professional: the assistant teacher, or support teacher or tutor, as evaluated by one of the research participants (P2). The legislation on assistant teachers or tutors where the study was conducted indicates that the support teacher performs recovery tasks for students with low academic performance and their expected training is a Full Undergraduate Degree in Pedagogy or a Higher Normal Course or at Intermediate Level (Teaching).

The requirement at the municipal and state hiring levels for training *school support professionals* has been to have completed high school. This issue is also analyzed by Lopes (2018) in her study on the profile and performance of caregivers whose data were collected in more than one state of the Federation; she found that most caregivers who participated in the study had temporary positions, were hired by outsourced companies and had completed high school. The author found that there was a lack of standardized duties for this professional. The duties were provided by the school management and the outsourced companies provided a 15-day course. In turn, she found in documents that the school support professional in four schools in the study also had the role of assisting in pedagogical activities. The author emphasizes that care with hygiene, transportation and food was the subject of reports from all the managers who participated in the study. In cities considered large, such as Campinas, the city government indicates in its guidance document on the caregiver service that it is not the role of this professional to develop pedagogical activities (Campinas, 2021). The Department of Education establishes a list of duties for this professional, who is also hired by outsourced companies.

One of the issues that needs to be discussed is: what specific training should be required for the role of caregiver or school support professional? The literature on students with cerebral palsy presents a series of precautions for these children and young people: 1) the need to know the key points for holding and manipulating lower and lower limbs; 2) care with food to avoid inhaling food; 3) care with postural adaptation, furniture and wheelchairs to avoid worsening the motor condition of these students; 4) how to promote communication and interaction using alternative communication resources. These would be just some of the content that should be present in training caregivers for this type of student condition and that could be considered in educational policies aimed at school inclusion.

CONCLUSION

The results indicated that teachers' conceptions of caregivers are linked to situations which require pedagogical activities that (according to teachers) they are unable to perform due to the time they have to spend in the classroom and with students with disabilities. Thus enters the figure of the caregiver to assist and provide continuity in activities, such as reading and writing. On the one hand, there is an underlying message from the research participants that the caregiver is not prepared to deal with teaching and learning situations, which seems to create a stalemate. On the other hand, to resolve this stalemate, teachers put themselves in the position of teaching the caregiver how to develop pedagogical activities with students with intellectual disabilities.

It can be concluded that the participants' conceptions of caregivers do not correspond to what the legislation determines about the profile for hiring educational caregivers, which proclaims what the role of this professional would be: to perform personal care activities for students with disabilities, such as hygiene, feeding and helping with transportation.

Finally, it seems that the lack of a support teacher or tutor, whose role is to assist the teacher in pedagogical activities, shifts (according to reports) to the caregiver a role for which he or she is not prepared.

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