

New settings, old problems. Infections in child care centers

The continuing worldwide increase in the number of mothers working outside the home has led to the need to have child care facilities with different types of arrangements. Towards the end of the 20th century, the prevailing model was the public daycare center with qualified staff taking care of children from all social strata. In developing countries, early childhood care centers started in the 1970s as part of an effort to create a protective setting for young children in situations of social vulnerability. Since then, the demand for these services has grown progressively.¹

In Argentina, many children younger than 5 years old attend some type of child daycare center. Although available statistical information is not complete, the long waiting lists registered by official agencies indicate a significant demand.^{2,3} The offer of early childhood care varies greatly and may be categorized into four basic modalities: state-run centers (public day care centers), private day care centers, municipal facilities targeted to the vulnerable population, and community-managed facilities for disadvantaged sectors.⁴ Such diversity implies not only differences in each setting's primary objectives, but also in terms of resource availability and staff training, which may result in difficulties to ensure the implementation of a minimum standard of care.

In this context, infections, which are common in the first years of life, have become a particularly significant health problem.⁵ Based on what has been observed in different publications,^{6,7} this is a widely studied subject; however, the most effective strategies for a continuous and adequate implementation of preventive measures are still unknown. Most preventive actions encompass simple and low-cost practices. In this sense, the likely shortcomings of this system pose a challenge that is similar to that observed in relation to infections in other closed communities or particularly vulnerable populations. This means having knowledge on the setting, developing a specific regulation for such setting, training providers, and warranting a seamless and comparable implementation, the greatest number of times by the largest number of actors possible.⁸

Across Latin American countries, except for Venezuela, no recommendations on infection prevention for daycare center staff have been issued by national government entities.⁹

In Argentina, there is a Consensus on Infection Prevention in Daycare Centers and Schools (Consenso sobre Prevención de Infecciones en Jardines Maternales y Escuelas), elaborated by the Argentine Society of Pediatrics, and aimed to pediatricians.¹⁰

A Guideline for Staff has been published in the context of the Health Prevention Program for Daycare Centers implemented by Fundación para la Salud Materno Infantil (FUNDASAMIN). This Guideline is a collection of pieces of evidence on critical aspects, such as hand washing, diaper change and immunizations, among others. It also includes organizational aspects related to managing a healthy daycare center. The Guideline is available for free online.¹¹

However, in order to warrant the adequate implementation of effective preventive measures it is also critical to receive training, have minimum resources available, and monitor and collect data describing the impact of these actions.

In these new settings of child care, infections account for one problem related to health, but it is not the only one. Other aspects traditionally set aside to the home environment which deserve attention include unintentional injuries, safe sleep, nutrition and exercise, just to name a few. An approach to all these aspects should not be restricted to actions taken inside daycare centers but should go beyond this setting and involve the community of influence by promoting healthy habits.

Considering the right of every child to be cared of,⁴ it is necessary for every party to become involved, each in their role, for the purpose of developing healthy settings where such right could be exercised. It is the responsibility of educators, caregivers, health teams, authorities and members of the community to actively work towards achieving this goal. ■

*María E. Serra, M.D.
Rose M. Soria, B.S.N.*

<http://dx.doi.org/10.5546/aap.2016.eng.2>

REFERENCES

1. Oficina Internacional del Trabajo. Un buen comienzo: La educación y los educadores de la primera infancia: Foro de diálogo mundial sobre las condiciones del personal de la primera infancia. Ginebra, 2012.

2. Rodríguez Enríquez C. La organización del cuidado de niños y niñas en Argentina y Uruguay. Unidad mujer y desarrollo. Santiago de Chile: CEPAL, 2007. (Serie Mujer y Desarrollo N°90). [Accessed on: October 27, 2015]. Available at: <http://www.cepal.org/publicaciones/xml/5/32615/lcl2844e.pdf>.
3. UNICEF-Universidad Nacional de San Martín. Servicios de atención a niños y niñas de 45 días a 36 meses. Noviembre 2011 [Accessed on: October 27, 2015]. Available at: http://www.unicef.org/argentina/spanish/Serv_Aten_Ninos_web.pdf
4. Zibecchi C. Organizaciones comunitarias y cuidado en la primera infancia: un análisis en torno a las trayectorias, prácticas y saberes de las cuidadoras. Trab Soc 2013(20): 427-47.
5. Nesti MM, Goldbaum M. Infectious diseases and daycare and preschool education. *Jornal de Pediatria* 2007; 83(4):299-312.
6. Barros AJ, Ross DA, Fonseca WV, Williams LA, Moreira Filho DC. Preventing acute respiratory infections and diarrhoea in child care centers. *Acta Paediatr* 1999;88(10): 1113-8.
7. Zomer TP, Erasmus V, Van Beeck EF, Tjon-A-Tsien A, et al. Hand hygiene compliance and environmental determinants in child day care centers: an observational study. *Am J Infect Control* 2013;41(6):497-502.
8. Grupo Asesor Control de Infecciones y Epidemiología. Superar Los Obstáculos Utilizando Un "Conjunto De Medidas Para El Cuidado De La Salud". Marzo 2008. [Accessed on: Octubre 27, 2015]. Available at: www.codeinep.org/restricted/MARZO%20DE%202008.pdf.
9. Serra ME. Prevención de infecciones respiratorias en jardines maternos: recomendaciones y revisión sistemática de la evidencia. *Arch Argent Pediatr* 2014;112(4):323-31.
10. Sociedad Argentina de Pediatría. Consenso sobre Prevención de Infecciones en Jardines Maternos y Escuelas. Ciudad Autónoma de Buenos Aires, 1997. [Accessed on: October 27, 2015]. Available at: <http://sap.org.ar/docs/profesionales/consensos/prevencionInfeccionesJardines.pdf>
11. Serra ME, Soria RM. Prevención de infecciones en centros de cuidado infantil. Guía para el personal. Dirección General de Niñez y Adolescencia, Ministerio de Desarrollo Social, Gobierno de la Ciudad de Buenos Aires. Septiembre 2015. Available at: <http://fundasamin.org.ar/newsite/novedades/3357/>.