

CHILD-MINDER PROFESSION IN ROMANIA FROM THE OCCUPATIONAL PHYSICIAN'S POINT OF VIEW

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Abstract: I investigated occupational health issues in the professional child-minders of Romania. This occupation is new in our country; it appeared and developed at the same time with the new child social protection strategies. I have noticed this occupation is a very distressful one and our legislation referring to workers' health monitoring does not include this profession. In the research I made in Alba County, I established a medical selection and a monitoring plan for the professional child-minders.

Keywords: professional child-minders, distress, legislation, health monitoring

Rezumat: Am analizat în câteva rânduri aspectele de medicină ocupațională la asistenții maternali profesioniști, meserie nouă în România, apărută odată cu noile strategii de protecție socială a copilului, plecând de la constatarea că această ocupație este solicitantă, atât fizic, cât mai ales psihosenzorial și nu se regăsește în legislația actuală de supraveghere a sănătății lucrătorilor. În baza constatărilor cercetării personale am propus un plan de selecție și monitorizare medicală a asistenților maternali profesioniști.

Cuvinte cheie: asistenți maternali profesioniști, stres, legislație, supraveghere sănătății

The experience of the European Community countries proved that the temporary care of the children separated from their own families (due to certain structural factors, such as: poverty, natural disasters, disease, abuse or abandon), provided in a familial climate is the protection way that corresponds to the their physical, psychological and social needs.(1)

The key character who accomplishes the protection of the child placed in different forms of abandon, and who offers a benefic alternative to the care provided in institutions is the **professional child-minder**.(2) She is that natural person, authorized by Child Protection Commission and who provides through her activity developed at her home, the care and the education necessary for a harmonious development of the children in foster placement.

By the Order to the Minister of Labour and Social Protection and of the President of the National Commission for Statistics no. 893/20527C/1997, the

occupations classification was approved to be completed with that of professional child-minder (p. 211 code 513103), thus becoming a component part of the basic occupational group "Children carrier".

Child-minder profession was officially mentioned for the first time in the text of the Emergency Ordinance no. 26 of June 1997 and subsequently, it was approved by the Law no. 108/98.

The so-called activity of the professional child-minder is mainly referred to in the Order no. 35/2003 on the approval of the minimum compulsory requirements for providing child protection at the professional child-minder's home and regarding the methodological guide for the implementation of these standards, as well as the Decision no. 679/2003 on the conditions for the obtainment of the certificate, certification procedures and the statute of the professional child-minder.

The latter established the **job requirements:**

- Full capacity of exercise;
- Conduct in society, health condition and psychological profile that should present guarantees for the correct compliance of the duties;
- To hold a home that should cover the needs for food preparation, hygiene, education, rest of its users;
- Special training: graduation of the 60-hour professional training courses.

Child-minder profession is new in Romania – the first persons were certified in the county of Alba in 1997 – it makes part of the professions with psycho-sensorial and/or physical strain and has a series of particularities: it involves a large responsibility – that of a life – the work cannot be normalized and there is no vacation. The professional child-minder develops an activity similar to that of a mother within her family, but it is an activity with professional character, implying as well:

- Defined activities, duties and competences;
- Contractual rights and duties;
- Proper education and improvement;
- Stable professional relations.

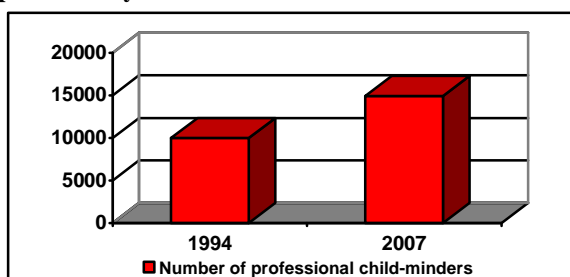
Still, the selection and monitoring of the personnel from the occupational physician's point of view are let at his/her disposal, in the Decision no. 355/2007 on workers' health surveillance, but the professional child-minders' type of work can be found no where.

The abuses of the professional child-minders on

the children in foster placement, part of them being also mentioned by the mass-media, proved the existence of certain undetected changes of their health conditions, especially of psychical nature, changes that in the absence of a medical selection and of a detailed monitoring cannot be identified earlier and can lead to real dramatic situations.

The number of the professional child-minders is increasing.(3)

Picture no. 1. Evolution of the number of the professional child-minders regarding the child protection system of 1994 until 2007.



Source: Mariela Neagu, ANPDC: știre Mediafax București, 10.08.2007.

Child-minder profession is a form of protection which requires a detailed selection and monitoring and special training with a view to train the children for the family life, for the reinsertion in their natural family or for the reinsertion in the foster family.(4)

The results of certain recent research made by Prof. Dr. Charles Nelson, manager of the Neurosciences Laboratory, Harvard University (5) proved that the under aged that were in foster placement registered an increase of the Intelligence Quotient from eight to ten points.

Due to the importance and novelty and to the profession particularities, I considered oportune to study the stress in the professional child-minders in the county of Alba between 2006-2008.(6) I started from the hypothesis that the professional child-minders are exposed to stressing agents with noticeable effects, both in the psychological and physiological field. The stress is different (larger) in the child-minders who must take care of handicapped children as against those who take care of un-handicapped children, disability being an extra stress factor. I have thus tested the occupational stress in 139 professional child-minders, out of a total of 220 child-minders active during the study period of time. Those 139 child-minders were divided in two groups, relatively homogenously:

- 69 subjects who had to take care children with handicap belonging to the researched batch;
- 70 subjects who had to take care of children, apparently healthy and belonging to the witness batch.

The study material was characterised through the structured interview and by the application of questionnaires.

In most of the cases, child-minder profession is

specific to women.

The age of the majority child-minders were between 45-49 years old for both batches; most of them being unemployed, so the selection for this job was mainly to solve the unemployment problem and was not based on testing the specific skills and motivation.

The main characteristics of the profession are: increased physical strain (especially in terms of attention and responsibilities), fatigue, increased physical strain; all these were higher in the professional child-minders who had to take care of handicapped children.

Regarding the working methods used for the investigation of stress in those two batches, I used the Survey of Work Styles questionnaire (standardized questionnaire, validated in Romania since 2004), as well as physiologic and electrophysiological tests, pulse in clinostatism, pulse in orthostatism, systolic and diastolic blood pressure in clinostatism and orthostatism, EKG, Teslenko and Crampton index.

The interpretation of SWS questionnaire showed the feeling of the lack of time in meeting the duties, especially in the child-minders with handicapped children, which translates an important psycho-sensorial strain of the work.

The results of the physiological and electrophysiological tests revealed:

- Cardiac frequency and systolic and diastolic blood pressures more increased in the researched batch with a weak or insufficient adaptation capacity, according to Crampton index and a relatively weak or good functional capacity in the case of Teslenko index;
- The people who had to take care of handicapped children had a 3-time larger probability to develop cardiac pathology (for example, ischemic heart disease).

Taking into account these results and the fact that today, the selection and the medical monitoring of the professional child-minders cannot be found in the Decision no. 355/2007 on the workers' health surveillance suggest the completion of the judicial act with the introduction of this professional category (unstandardized work, with neuropsychic stress), being necessary the following investigations:

- For the medical examination upon employment: as an extra measure within the psychological examination, I suggest besides the assessment of judgement and of the personality features, the intrinsic motivation and the stress resistance level of the future child-minder should also be assessed;
- Regarding the periodical medical examination: clinical (annual) examination, cardiologic examination (annual; today, it is not required), psychological examination (annual; today, it is done every three years, on the occasion of certificate renewal), psychiatric examination (with a periodicity established by the occupational physician, today, it is done every three years on the occasion of certificate renewal).

The surveillance of the professional child-minder

is a multidisciplinary activity that requires the collaboration of the occupational physician with the psychologist and family physician and with the social factors involved in this activity.

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