

Basic practices for community-based health-care interventions

A number of agencies, including UNICEF and WHO, have agreed on 12 key household practices for neonates and infants that can help to promote child survival, health and nutrition in communities:

- **Exclusive breastfeeding:** Exclusive breastfeeding from birth to six months. (Mothers found to be HIV-positive require counselling about possible alternatives to breastfeeding.)
- **Complementary feeding:** Starting at about six months old, feeding children energy- and nutrient-rich complementary foods while continuing to breastfeed for at least two years could prevent more than 10 per cent of deaths from diarrhoea and acute respiratory infections, particularly pneumonia; and increase resistance to measles and other illnesses.
- **Micronutrient supplementation:** Improving the intake of vitamin A through diet or supplements in communities where it is deficient could reduce mortality among children aged 6 months to five years by 20 per cent.
- **Hygiene:** Better hygiene practices, particularly hand washing with soap (or ashes) and the safe disposal of excreta could reduce the incidence of diarrhoea by 35 per cent.
- **Immunization:** Vaccination against measles for children under age one could prevent most of the measles-related deaths each year. Caregivers should make sure children complete a full course of immunizations (bacille Calmette-Guérin; diphtheria, pertussis and tetanus vaccine; oral polio vaccine; and measles vaccine) before their first birthday.
- **Malaria prevention:** The use of insecticide-treated mosquito nets in households in malaria-endemic areas could lower malaria-related child deaths by as much as 23 per cent.
- **Psychosocial care and development:** Promote mental and social development by responding to a child's need for care and by talking, playing and providing a stimulating environment.

- **Feeding and fluids for sick children:** Continue to feed and offer more fluids, including breast milk, to children when they are sick.
- **Home treatment:** Give sick children appropriate home treatment for infections.
- **Care seeking:** Recognize when sick children need treatment outside the home, and seek care from appropriate providers.
- **Appropriate practices:** Follow the health worker's advice about treatment, follow-up and referral.
- **Antenatal care:** Every pregnant woman should have adequate antenatal care. This includes having at least four antenatal visits with an appropriate health-care provider and receiving the recommended doses of tetanus toxoid vaccination. The mother also deserves support from her family and community in seeking care at the time of delivery and during the postpartum and lactation period.

Further important practices that protect children include: providing appropriate care for those who are affected by HIV and AIDS, especially orphans and vulnerable children; protecting children from injury and accident, abuse and neglect; and involving fathers in the care of their children.

Many of these practices can be undertaken by community health workers or by community members themselves, given the appropriate support and distribution of products and services. The direct involvement of the community is perhaps most appropriate for those aspects of health care and nutrition that most closely affect members on a daily basis. These include infant and young child feeding, other caring practices, and water and sanitation.

See References, page 107.