Community partnerships in health can promote early and exclusive breastfeeding, which provides vital protection for newborns against ill health and disease.

At a more basic level, nutrition and hygiene practices in the household are prime determinants of the health risks faced by mothers and newborns. Inadequate maternal nutrition, unhygienic practices at delivery, and in caring for the umbilical stump or cord, inattention to basic hygiene practices such as hand washing with soap or ashes after using latrines and before preparing and eating meals, and indoor air pollution can accentuate the spread of infections and diseases such as tetanus, diarrhoea and acute respiratory infections. Raising awareness of improved individual household practices and behaviours, such as exclusively breastfeeding newborns and infants up to six months, has considerable potential to improve the health and well-being of families.

Simple messages regarding basic hygienic practices in food preparation – such as keeping food in covered containers to exclude insects and drying cloths used to clean dishes or pans in the sun – can have beneficial results. Improving household knowledge of elementary health, nutrition and environmental health interventions, along with increased empowerment of women to make decisions about their own or their children’s health, could have a strong positive impact on health outcomes both for children and new or expectant mothers.

### Community partnerships in primary health care

Communities have a vital role in health care and nutrition of mothers, newborns and children. The notion of the community as a cornerstone of primary health care was asserted in the Alma-Ata Declaration of 1978, and it is clear that the goal of health care for all cannot be achieved without community participation, especially in poorer and more remote areas. It is beneficial that communities take an active part in improving health care, hygiene practices, nutrition and water and sanitation services. This is, however, not merely a necessary tool in the absence of more expensive alterna-

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**Early and exclusive breastfeeding**

![Figure 3.6: Percentage of infants less than six months old that are exclusively breastfed, 2000–2007](image)

* Excludes China. ** Sub-Saharan Africa comprises the regions of Eastern/Southern Africa and West/Central Africa.

Source: Demographic and Health Surveys, other national household surveys and UNICEF.