

*Posted on November 29<sup>th</sup> 2011*

An interesting article by TK Sundari Ravindran on “**Public-Private Partnerships in Maternal Health Services**”, published in *EPW*, November 26, 2011, Vol xlvi no 48.

**Brief Summary:**

In recent years public-private partnerships have been offered as the miracle-cure that would help fix all the challenges to the health sector. Over the last decade, a number of ppps providing maternal health services have come into existence but few have been evaluated. This paper examines whether ppps with the for-profit private sector which provide maternal health services have contributed or are likely to contribute to making quality maternal health services accessible at affordable prices to the poor and marginalised sections of the population, as envisaged by policymakers. The limited evidence indicates that they have not increased either availability or physical access to services for a vast majority of women living in rural areas. The investment of substantial government and donor resources in ppps without robust evidence on their contribution to reduction of maternal mortality does not appear justified.

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**Title: Guidelines on optimal feeding of low birth-weight infants in low- and middle-income countries**

**Authors:** World Health Organization

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## **Summary**

The Department of Child and Adolescent Health has developed guidelines on optimal feeding of low birth weight infants in low- and middle-income countries. These guidelines include recommendations on what to feed low-birth weight infants, when to start feeding, how to feed, how often and how much to feed.

The guidelines were developed using the process described in the WHO Handbook for Development of Guidelines. Systematic reviews were conducted to answer 18 priority questions identified by the guidelines development group. The population of interest is low-birth weight infants, and the critical outcomes include mortality, severe morbidity, growth and development. The implementation of these guidelines in low- and middle-income countries is expected to improve care and survival of low birth weight infants.

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