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# A Collection of Recent NGO, Think Tank, and International Government Reports

Issue 46, 2017, June

Welcome to Grey Matter, the Ministry of Health Library’s Grey Literature Bulletin. In each issue, we provide access to a selection of the most recent NGO, Think Tank, and International Government reports that are relevant to the health context. The goal of this newsletter is to facilitate access to material that may be more difficult to locate (in contrast to journal articles and the news media). Information is arranged by topic, allowing readers to quickly hone in on their key areas of interest. Email library@moh.govt.nz to subscribe.

Click on any of the bulleted points below to go to a section of interest.

[Primary Care](#_Primary_Care)

[Public & Global Health](#_Public_&_Global)

[Nutrition, Physical Activity, & Obesity](#_Nutrition,_Physical_Activity,)

[Cancer & Palliative Care](#_Cancer_&_Palliative)

[Health Systems, Costs, & Reforms](#_Health_Systems,_Costs,)

[Child, Youth, & Maternal Health](#_Child,_Youth,_&)

[Mental Health & Wellbeing](#_Mental_Health_&)

[Disability & Social Care](#_Disability_&_Social)

[Addiction, Drugs, & Alcohol Use](#_Addiction,_Drugs,_&)

[Multimorbidities](#_Multimorbidities)

[Workforce](#_Workforce)

[Health of Older People](#_Health_of_Older)

## Primary Care

### [Building better foundations for primary care](https://grattan.edu.au/wp-content/uploads/2017/04/Building-better-foundations-for-primary-care.pdf)

“The problems with primary care in Australia have been apparent for at least two decades. Chronic conditions have become a much greater burden. Care for patients with chronic conditions is fragmented; patient outcomes can and should be improved; unnecessary admissions to hospital can be reduced; and resources could be used much more efficiently. A more strategic ‘whole of system’ approach that brings together data systems, performance management, care pathways, service development, funding reform and systems management is required.” *Source: Grattan Institute*

### [Clinical governance for Primary Health Networks](https://ahha.asn.au/system/files/docs/publications/210417_issues_brief_no_22-_clinical_governance_for_phns.pdf)

“This issues brief sets out the rationale for developing and implementing a clinical governance framework for PHNs in commissioning the provision of primary health services that are safe and effective. It provides principles that inform clinical governance policy including recommendations on how clinical governance should be supported in commissioning undertaken by PHNs for contract development, management, auditing and compliance. PHNs also have a role in influencing the uptake of quality improvement activities in general practice including the interface between primary care and community services.” *Source: Deeble Institute*

### [Innovations to Champion Access to Primary Care for Immigrants and Refugees](http://www.wellesleyinstitute.com/wp-content/uploads/2017/03/Innovations-to-champion-access-to-primary-care-for-immigrant-and-refugees.pdf)

“This think piece emphasizes the importance of equitable access to care and explores promising practices and strategies to improving health care access for immigrants and refugees.” *Source: Wellesley Institute*

[Back to top](#_top)

## Public & Global Health

### [The future of HIV services in England: Shaping the response to changing needs](https://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/Future_HIV_services_England_Kings_Fund_April_2017.pdf)

“This report explores the challenges and opportunities facing HIV services in four areas in England, and makes recommendations on future development to those in national and local leadership roles.” *Source: King’s Fund*

### [Urban green space interventions and health: A review of impacts and effectiveness](http://www.euro.who.int/__data/assets/pdf_file/0010/337690/FULL-REPORT-for-LLP.pdf?ua=1)

“There is a wide range of international agreements and commitments to enhance and support the establishment of green spaces in urban settings, as these are considered to provide a range of benefits to the urban population. Yet, little is known on the most effective ways to deliver urban interventions on green spaces, and how to make sure that the environmental, social and health benefits are maximized. To respond to this question, this new WHO report provides the results of an evidence review and an assessment of local case studies on urban green space interventions.” *Source: WHO Europe*

### [Global Health and the Future Role of the United States](http://nationalacademies.org/hmd/reports/2017/global-health-and-the-future-role-of-the-united-states.aspx)

“The United States has long been a leader in global health. Yet resources are not unlimited, and the case for continued commitment must be made. With support from a broad array of federal agencies, foundations, and private partners, the National Academies of Sciences, Engineering, and Medicine convened an ad hoc committee to identify global health priorities in light of current and emerging global health threats and challenges. In the resulting report, Global Health and the Future Role of the United States, the committee provides recommendations to the U.S. government and other stakeholders for increasing responsiveness, coordination, and efficiency in addressing these threats and challenges by establishing priorities and mobilizing resources. *Source: National Academies Press*

### [Healthier, fairer, safer: the global health journey 2007–2017](http://apps.who.int/iris/bitstream/10665/255351/1/9789241512367-eng.pdf?ua=1)

“This independent report, commissioned by WHO and written by Sir Liam Donaldson, reflects on the trends, achievements and challenges in global health over the past decade during which Dr Margaret Chan has been Director-General of WHO. It discusses the role of WHO in dealing with such issues as the rise of noncommunicable diseases, leaps in life expectancy, and emerging threats like climate change and antimicrobial resistance.” *Source: WHO*

### [Preventing Intimate Partner Violence Across the Lifespan: A Technical Package of Programs, Policies, and Practices](https://www.cdc.gov/violenceprevention/pdf/ipv-technicalpackages.pdf)

“This technical package represents a select group of strategies based on the best available evidence to help communities and states sharpen their focus on prevention activities with the greatest potential to prevent intimate partner violence (IPV) and its consequences across the lifespan. These strategies include teaching safe and healthy relationship skills; engaging influential adults and peers; disrupting the developmental pathways toward IPV; creating protective environments; strengthening economic supports for families; and supporting survivors to increase safety and lessen harms.” *Source: CDC*

### [Tobacco and its environmental impact: an overview](http://apps.who.int/iris/bitstream/10665/255574/1/9789241512497-eng.pdf?ua=1)

“This overview assembles existing evidence on the ways in which tobacco affects human well-being from an environmental perspective – i.e. the indirect social and economic damage caused by the cultivation, production, distribution, consumption, and waste generated by tobacco products. It uses a life cycle analysis to track tobacco use across the full process of cultivation, production and consumption. In doing so it draws attention to gaps in the scientific evidence – particularly where the only data available are those currently self-reported by the tobacco companies themselves – and indicates where objective research could hold the greatest benefits to improving understanding of the relationship between tobacco and the environment.” *Source: WHO*

### [Ten Years of Transformation: Making WHO fit for purpose in the 21st century](http://www.who.int/about/who_reform/report-2017.pdf?ua=1)

“WHO has made extraordinary progress  in its bold reform agenda over the past decade. Innovative leadership, managerial structures and systems have resulted in increased effectiveness, efficiency, responsiveness, transparency and accountability. This report tells the story of WHO's transformation from 2007 through to the current day.” *Source: WHO*

### [Diagnosis, Prevention, and Treatment of C. difficile: Current State of the Evidence](https://www.effectivehealthcare.ahrq.gov/index.cfm/search-for-guides-reviews-and-reports/?pageaction=displayproduct&productid=2476&utm_source=ahrq&utm_medium=twitter&utm_term=&utm_content=11&utm_campaign=ahrq_cdiffbed_2017)

“This is a summary of a systematic review that evaluated the recent evidence regarding the accuracy of diagnostic tests and the effectiveness of interventions for preventing and treating Clostridium difficile (C. difficile) infection. The systematic review included 93 articles published between 2010 and April 2015. This summary is provided to assist in informed clinical decision making. However, reviews of evidence should not be construed to represent clinical recommendations or guidelines.” *Source: Agency for Healthcare Research and Quality (AHRQ)*

[Back to top](#_top)

## Nutrition, Physical Activity, & Obesity

### [Overweight and obesity in the Western Pacific region: An equity perspective](http://iris.wpro.who.int/bitstream/handle/10665.1/13583/9789290618133-eng.pdf)

“This publication suggests some key policy measures as ways forward to reshape the current patterns of overweight and obesity in the Region. Opportunities for health and well-being must be available for all.” *Source: WHO*

### [Finding a Path to Safety in Food Allergy: Assessment of the Global Burden, Causes, Prevention, Management, and Public Policy](https://www.nap.edu/catalog/23658/finding-a-path-to-safety-in-food-allergy-assessment-of?utm_source=NASEM+News+and+Publications&utm_campaign=96b399c981-NAP_mail_new_2017-05-01&utm_medium=email&utm_term=0_96101de015-96b399c981-102579513&mc_cid=96b399c981&mc_eid=887bc22fe0)

“Finding a Path to Safety in Food Allergy examines critical issues related to food allergy, including the prevalence and severity of food allergy and its impact on affected individuals, families, and communities; and current understanding of food allergy as a disease, and in diagnostics, treatments, prevention, and public policy. This report seeks to: clarify the nature of the disease, its causes, and its current management; highlight gaps in knowledge; encourage the implementation of management tools at many levels and among many stakeholders; and delineate a roadmap to safety for those who have, or are at risk of developing, food allergy, as well as for others in society who are responsible for public health.” *Source: National Academies Press*

### [Obesity Update 2017](http://www.oecd.org/health/health-systems/Obesity-Update-2017.pdf)

“In the last few years, new policy strategies devised to fight obesity have emerged. This Obesity Update focusses on a selection of those, specifically at communication policies aimed to tackle obesity, in particular by improving nutrient information displayed on food labels, using social and new media to sensitise the population, or by regulating the marketing of food products. Better communication helps empower people to make healthier choices. However, comprehensive policy packages, including not only communication but also broader regulatory and fiscal policies, are needed to tackle obesity effectively.” *Source: OECD*

### [Ambition and Action in Nutrition 2016-2025](http://apps.who.int/iris/bitstream/10665/255485/1/9789241512435-eng.pdf?ua=1)

“In the context of a renewed global momentum for improving nutrition and a resultant increased complexity of the nutrition landscape, the Programme Area Network on Nutrition developed a fit-for-purpose and coherent nutrition strategy, WHO’s Ambition and Action in Nutrition 2016-2025. This has been the first-ever strategic exercise on nutrition undertaken by WHO. The strategy was developed in the context of the internal WHO reform.” *Source: WHO*

[Back to top](#_top)

## Cancer & Palliative Care

### [No regrets: how talking more openly about death could help people die well](http://www.macmillan.org.uk/documents/aboutus/health_professionals/endoflife/no-regrets-talking-about-death-report.pdf?utm_source=The%20King%27s%20Fund%20newsletters&utm_medium=email&utm_campaign=8245132_NEWSL_HMP%202017-05-02)

“This report finds that more than 62,000 people die of cancer in hospitals each year in the UK despite a significant majority stating that they would like to die at home. It reveals the challenging obstacles that people face when discussing death and highlights the need for better communication to help people plan for their final days.” *Source: Macmillan Cancer Support*

### [Diet, Nutrition, Physical Activity and Breast Cancer](http://www.wcrf.org/sites/default/files/CUP_BREAST_REPORT_2017_WEB.pdf)

“Published in May 2017, the report is the most rigorous, systematic, global analysis of the scientific research currently available on diet, weight, physical activity and breast cancer, and which of these factors increase or decrease the risk of developing the disease.” *Source: World Cancer Research Fund International*

[Back to top](#_top)

## Health Systems, Costs, & Reforms

### [Leading across the health and care system: Lessons from experience](https://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/Leading%20across%20the%20health%20and%20care%20system.pdf?utm_source=The%20King%27s%20Fund%20newsletters&utm_medium=email&utm_campaign=8227959_NEWSL_ICB%202017-05-10&dm_i=21A8,4WCQF,FLWRH5,IK41M,1)

“This paper offers those who are leading new systems of care some guidance on how to address the challenges they face. It draws on the Fund’s work on the development of new care models, sustainability and transformation plans, and accountable care organisations. It is also informed by the experience of people who have occupied system leadership roles and draws on case studies from our research and organisational development work.” *Source: King’s Fund*

### [Caring to change: How compassionate leadership can stimulate innovation in health care](https://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/Caring_to_change_Kings_Fund_May_2017.pdf)

“This paper looks at compassion – which involves attending, understanding, empathising and helping – as a core cultural value of the NHS and how compassionate leadership results in a working environment that encourages people to find new and improved ways of doing things.” *Source: King’s Fund*

### [How cultural alignment and the use of incentives can promote a culture of health: Stakeholder perspectives](https://www.rand.org/content/dam/rand/pubs/research_reports/RR1800/RR1889/RAND_RR1889.pdf)

“In 2013, the Robert Wood Johnson Foundation embarked on a pioneering effort to advance a Culture of Health. This report focuses on two questions that are central to understanding how individuals and sectors think about health and are motivated to promote it: How can the commonly understood concepts of cultural identity (e.g., ethnic or religious; lesbian, gay, bisexual, transgender plus; military) and organizational culture be harnessed to develop a Culture of Health? How can incentives be used to promote individual health and engage investors and leaders within organizations or governments to promote health and well-being broadly?” *Source: RAND Corporation*

### [World Report on Health Policy and Systems Research](http://apps.who.int/iris/bitstream/10665/255051/1/9789241512268-eng.pdf?ua=1)

“This first World Report on Health Policy and Systems Research reflects the importance of monitoring and measuring developments in the field. It provides evidence that allows national policy-makers and funders to see how their investments contribute to the generation and use of policy-relevant knowledge. Its chapters describe the evolution of the field, the current state of play and results to date, the challenge of institutional capacity and emerging trends, illustrating the importance of this area of research for the attainment of the Sustainable Development Goals.” *Source: WHO*

### [Redesigning the Delivery of Specialty Care Within Newly Formed Hospital Networks](http://catalyst.nejm.org/redesigning-specialty-care-delivery/)

“This article briefly reviews the frequently described approach of centralizing specialty services and then uses the story of Carolinas HealthCare System to describe an emerging alternative strategy of decentralizing specialty services.” *Source: NEJM Catalyst*

### [Blocks: Tools and methodologies to assess integrated care in Europe](https://ec.europa.eu/health/sites/health/files/systems_performance_assessment/docs/2017_blocks_en_0.pdf)

“Measuring integration is different from measuring the performance of integrated care. This report addresses this dual challenge: on the one hand it focuses on design principles, building blocks, and system levers, to identify principles and factors that enable successful and effective integration of care. On the other hand the report looks for tailored ways to assess the performance of integrated care models in such a way that is able to capture the specific added value brought in by the integration.” *Source: European Commission*

### [Leading a Culture of Safety: A Blueprint for Success](http://www.npsf.org/page/cultureofsafety#bot)

“Leading a Culture of Safety: A Blueprint for Success was developed to bridge this gap in knowledge and resources by providing chief executive officers and other leaders with a useful tool for assessing and advancing their organization’s culture of safety. This guide can be used to help determine the current state of an organization’s journey, inform dialogue with the board and leadership team, and help leaders set priorities.” *Source: National Patient Safety Foundation*

### [Advancing Healthcare in Ontario: Optimizing the Supply Chain – A New Model](http://www.health.gov.on.ca/en/pro/ministry/supplychain/docs/advancing_hc_supplychn_expert_panel_may2017_en.pdf)

“World-class healthcare systems are supported by seamless, integrated and value-based supply chains. Going beyond the procurement of goods and services, robust supply chains deliver value and contribute to improved quality of patient care. This report sets out a strategy to transform Ontario’s healthcare supply chain over the next three years. This strategy will build on successes to date. It will support and shift care closer to home. Most important, it will improve patient experience and ensure access to high quality products and services at each and every point of care.” *Source: Government of Ontario*

[Back to top](#_top)

## Child, Youth, & Maternal Health

### [Raising our children: guiding young Victorians in care into adulthood](http://thehomestretch.org.au/site/wp-content/uploads/2016/08/Raising-Our-Children_Guiding-Young-Victorians-in-Care-into-Adulthood.pdf)

“This report has been produced by Deloitte Access Economics and commissioned by Anglicare Victoria for the Home Stretch(link is external) campaign. It is a study of the socio-economic costs and benefits of extending care exit from the age of 18 to the age of 21 in Victoria. It finds that if the age of care was extended from age 18 to 21, outcomes would improve in a range of areas including mental health, physical health and intergenerational disadvantage.” *Source: Deloitte Access Economics*

### [Mindfulness-based interventions for improving cognition, academic achievement, behavior, and socioemotional functioning of primary and secondary school students](https://campbellcollaboration.org/media/k2/attachments/Campbell_systematic_review_-_Mindfulness_and_school_students.pdf)

“This review examines the effects of school-based MBIs on cognitive, behavioral, socio-emotional and academic achievement outcomes with youth in a primary or secondary school setting. MBIs are interventions that use a mindfulness component, broadly defined as “paying attention in a particularly way: on purpose, in the present moment, non-judgmentally”, often with other components, such as yoga, cognitive-behavioral strategies, or relaxation skills training.” *Source: Campbell Collaboration*

### [Preventing adolescent relationship abuse and promoting healthy relationships](https://nzfvc.org.nz/sites/nzfvc.org.nz/files/NZFVC-issues-paper-12-preventing-adolescent-relationship-abuse.pdf)

“Adolescence is a key time when many young people begin to experience romantic and sexual relationships. For some of these young people this time in their life will also include some form of violence and/or abuse in their early relationships, yet most intervention and prevention programmes target adults. Better understanding of adolescent relationship violence and abuse (ARVA) with a focus on building healthy relationships is needed to better support young people as they enter adulthood.” *Source: New Zealand Family Violence Clearinghouse*

### [The Global Strategy for Women’s, Children’s and Adolescents’ Health (2016-2030)](http://www.who.int/life-course/partners/global-strategy/ewec-globalstrategyreport-200915.pdf?ua=1)

“The new Global Strategy aims to achieve the highest attainable standard of health for all women, children and adolescents, transform the future and ensure that every newborn, mother and child not only survives, but thrives. Updated through a process of collaboration with stakeholders led by WHO, the Strategy builds on the success of the 2010 Strategy and its Every Woman Every Child movement, which helped accelerate the achievement of the health-related Millennium Development Goals and will act as a platform to put women, children and adolescents at the heart of the new UN Sustainable Development Goals.” *Source: WHO*

[Back to top](#_top)

## Mental Health & Wellbeing

### [The impact of housing problems on mental health](https://gallery.mailchimp.com/c4f6b2fca0e12e49c424dea9f/files/82f8dcfb-92ac-4100-935d-79f2aa680424/The_impact_of_housing_on_mental_health.pdf)

“Shelter in partnership with the research agency, ComRes, explored the relationship between housing and mental health through a two-stage research project in early 2017. This research was central to Shelter’s 2017 Spring Advice and Services Campaign, and it is hoped it will provide a future evidence base for the necessary debate on how to reduce the negative impact housing problems can have on people’s mental health and usage of health services.” *Source: Shelter.org.uk*

### [Online support: Investigating the role of public online forums in mental health](https://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/Online_Support_Investigating_role_public_online_forums_mental_health.pdf)

“This report seeks to investigate the large amounts of mental health related discussion taking place on public online forums, and to explore the potential for the use of computational techniques to provide robust, actionable insight from these conversations to a wide audience - from healthcare professionals and policymakers to those affected by mental health issues themselves. Furthermore, this study addresses the technical and ethical challenges posed by the collection and analysis of online forum data.” *Source: Demos*

### [A review of seclusion and restraint practices in New Zealand](http://www.seclusionandrestraint.co.nz/)

“The following report has been produced by Dr Sharon Shalev, who has completed an independent review of seclusion and restraint practices in a number of New Zealand detention settings.” *Source: Human Rights Commission*

### [Improving youth mental health: What has worked, what else could be done](https://gallery.mailchimp.com/c4f6b2fca0e12e49c424dea9f/files/75f7d477-dba7-481d-a4b0-26e2bf2460b9/Improving_mental_health_A_research_summary_Improving_youth_mental_health.pdf)

“Adolescence can be a period of high vulnerability for young people. To support their resilience and wellbeing, the Prime Minister’s Youth Mental Health Project (YMHP) was launched in 2012 as a package of initiatives to complement existing services. Focus was placed on youth aged 12 to 19 with, or at risk of developing, mild to moderate mental health issues. This research summary presents insights from the evaluation which reports on the progress, achievements and effectiveness of the YMHP to June 2016. It focuses on what we can learn from this assessment of the YMHP: What has worked to improve youth mental health and where could further efforts be directed?” *Source: Social Policy Evaluation and Research Unit*

### [Youth Mental Health Project evaluation: Spotlight on youth less well served by the existing programme](http://www.superu.govt.nz/sites/default/files/Youth-Mental-Health-Project-At-a-Glance.pdf)

“The Prime Minister’s Youth Mental Health Project (YMHP) was implemented to improve outcomes for youth with, or at risk of developing, mild to moderate mental health issues. The YMHP evaluation found that the capacity of youth mental health services increased, and more youth were identified, supported and treated. It also found that some youth experienced positive changes in their mental health and wellbeing as a result. This At a Glance presents key findings about some groups of youth that were less well served by the existing programme.” *Source: Social Policy Evaluation and Research Unit*

### [Mental health and new models of care: Lessons from the vanguards](https://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/MH_new_models_care_Kings_Fund_May_2017_0.pdf)

“Where new models of care have been used to remove the barriers between mental health and other parts of the health system, local professionals saw this as being highly valuable in improving care for patients and service users. But there remains much to be done to fully embed mental health into integrated care teams, primary care, urgent and emergency care pathways, and in work on population health.” *Source: King’s Fund*

### [#StatusOfMind: Social media and young people's mental health and wellbeing](https://www.rsph.org.uk/asset/AAFB7DC1-35CE-4097-B26321C1667B5333.2D2662B7-A714-4ACB-A94A63BA544A8267/)

“RSPH and the Young Health Movement have published a new report, #StatusOfMind, examining the positive and negative effects of social media on young people’s health. The report includes a league table of social media platforms according to their impact on young people’s mental health. YouTube tops the table as the most positive with Instagram and Snapchat coming out as the most detrimental to young people’s mental health and wellbeing.” *Source: Royal Society for Public Health*

### [Reducing the risk of suicide: a toolkit for employers](https://gallery.mailchimp.com/c4f6b2fca0e12e49c424dea9f/files/71699d58-3e49-44f9-b98f-a5185d10f1a0/Reducing_the_risk_of_suicide_a_toolkit_for_employers.pdf)

“The toolkit helps embed suicide prevention strategies in an organisation’s health and wellbeing policies, guide its approach to supporting those at risk and act as a resource to provide support across the workforce.” *Source: Public Health England*

### [Research Summary: Subjective whānau wellbeing in Te Kupenga](http://www.superu.govt.nz/sites/default/files/Subjective%20whanau%20wellbeing%20summary.pdf)

“This publication summarises the research report Subjective whānau wellbeing in Te Kupenga, which was the first national survey of Māori wellbeing undertaken by Statistics New Zealand following the 2013 Census. It focuses on two key questions: 1.How well do Māori think their whānau are doing? 2.What are the critical factors associated with whānau doing well?” *Source: Social Policy Evaluation and Research Unit*

### [Turning the tide on bullying and poor workplace cultures: case studies](http://apo.org.au/system/files/90661/apo-nid90661-207056.pdf)

“These case studies demonstrate that while workplace bullying can come in many different forms, there are a number of common approaches that have been successfully employed to help turn the tide on bullying in the workplace and improve workplace cultures.” *Source: Victorian Public Sector Commission*

### [The economic value of informal mental health caring in Australia](https://www.mindaustralia.org.au/assets/docs/Mind_value_of_informal_caring_full_report.pdf)

“This report shows the economic value of informal care in Australia and it clearly validates the importance of carers.” *Source: Mind Australia*

[Back to top](#_top)

## Disability & Social Care

### [How to get the NDIS on track](http://apo.org.au/system/files/76268/apo-nid76268-151791.pdf)

“This discussion paper, released by National Disability Services (NDS), details their recommendations on the way forward for the National Disability Insurance Scheme.” *Source: National Disability Services*

### [Developing Affordable and Accessible Community-Based Housing for Vulnerable Adults: Proceedings of a Workshop](http://nationalacademies.org/hmd/Reports/2017/developing-affordable-and-accessible-community-based-housing-for-vulnerable-adults-proceedings.aspx?utm_source=HMD+Email+List&utm_campaign=14c02fd67c-AffordableHousing-PW-5%2F17&utm_medium=email&utm_term=0_211686812e-14c02fd67c-180268909&mc_cid=14c02fd67c&mc_eid=59ed043576)

“To better understand the importance of affordable and accessible housing for older adults and adults with disabilities, the barriers to providing this housing, the design principles for making housing accessible for these individuals, and the features of programs and policies that successfully provide affordable and accessible housing that supports community living for older adults and people with disabilities, the National Academies of Sciences, Engineering, and Medicine, with support from a group of sponsors, convened a public workshop on December 12, 2016, in Washington, DC.” *Source: National Academies Press*

### [The Economic Impact Of Inclusion In The Open Labour Market For Persons With Disabilities](http://www.easpd.eu/sites/default/files/sites/default/files/News/978-3-639-73089-0.pdf)

“This study looks into the inclusion of persons with disabilities and its impact on the economy. Persons with disabilities have been included in mainstream, specialist and active labour market programmes over the years in the EU. During the first decade of 2000s, many countries have used the "Work First Approaches", which led people to work before any training. The work first approaches have during the previous times provided good employment without people having the skills. In recent times, an activation approach has been developed in order to ensure that people with more complex disabilities are included in the labour market.” *Source: European Association of Service Providers with Disabilities*

### [Parents with learning disabilities](https://www.iriss.org.uk/resources/insights/parents-learning-disabilities)

“Little is known about how many families are affected by parental learning disability in Scotland and the UK and there are a number of challenges in establishing prevalence rates. It is clear, however, that the lives of parents with learning disabilities are likely to be characterised by marginalisation and disadvantage and they are likely to be disproportionately represented in the child protection system. There is a growing body of evidence that suggests that parents with learning disabilities can and do become good enough parents when the right support is in place.” *Source: Institute for Research and Innovation in Social Services*

[Back to top](#_top)

## Addiction, Drugs, & Alcohol Use

### [The nature of gambling-related harms for adults at risk: a review](https://www.kcl.ac.uk/sspp/policy-institute/publications/The-nature-of-gambling-related-harms-for-adults-at-risk-a-review.pdf)

“This scoping review looks at the prevalence of gambling-related harm affecting people described as adults at risk, including people with dementia, people with mental health problems, people with learning disabilities and other cognitive impairments. The review includes literature on the risks from regulated gambling; the risk of harm from scams and fake lotteries; and where gambling is cited as explanation among perpetrators for causing neglect or abuse to vulnerable adults.” *Source: King’s College London*

### [Effects of Early, Computerized Brief Interventions on Risky Alcohol Use and Risky Cannabis Use Among Young People](https://campbellcollaboration.org/media/k2/attachments/0189_SWCG_Smedslund_computerised_interventions_substance_abuse.pdf)

“A computerized brief intervention is any preventive or therapeutic activity delivered through online or offline electronic devices, such as a mobile phone, and administered within an hour or less, even a few minutes, of the substance abuse. Such interventions aim to reduce alcohol abuse or drug abuse in general. This review assesses research on the effectiveness of early, computerized brief interventions on alcohol and cannabis use by young people who abuse either one or both of these substances.” *Source: Campbell Collaboration*

### [Problem gambling and family violence in help-seeking populations: co-occurrence, impact and coping](https://gallery.mailchimp.com/c4f6b2fca0e12e49c424dea9f/files/3ed12693-bd38-45d8-915a-76b0e33973f7/Problem_gambling_and_family_violence_summary_sheet.pdf)

“The purpose of the research was to identify the level of family/whānau violence and abuse in people seeking help for problem gambling, and to increase our understanding of these issues. A wide definition of family/whānau violence was used, which included physical violence and coercive control (most often thought of as violence), as well as psychological and emotional abuse (more often thought of as conflict), and sexual abuse.” *Source: AUT University*

### [Anytime, anyplace, anywhere?](http://fare.org.au/wp-content/uploads/AVAILABILITY-REPORT-30-May-2017-FINAL.pdf)

“This discussion paper provides an overview of tangible policy options for Australian and UK governments and makes recommendations about the use of alcohol availability controls to mitigate harm. Alongside case study examples from each jurisdiction, it provides information about the legislative, regulatory, and policy options for introducing a range of availability controls. It also assesses political and community appetites for the introduction of these measures and, where possible, outlines the resource requirements for implementation.” *Source: Foundation for Alcohol Research and Education*

[Back to top](#_top)

## Multimorbidities

### [How to improve care for people with multimorbidity in Europe?](http://www.euro.who.int/__data/assets/pdf_file/0004/337585/PB_23.pdf?ua=1)

“Care systems in Europe are currently highly fragmented and organized around single diseases. This way of organizing care delivery is not responsive to the needs of patients with multimorbidity because their multiple conditions require care from multiple care professionals. Furthermore, disease-specific treatment guidelines may not apply to those with multiple chronic conditions as they may be mutually incompatible. Providing patient centred integrated care to patients with multimorbidity is a potential solution, but how to do this in practice remains poorly understood.” *Source: European Observatory*

### [How to strengthen patient centredness in caring for people with multimorbidity in Europe?](http://www.euro.who.int/en/about-us/partners/observatory/publications/policy-briefs-and-summaries/how-to-strengthen-patient-centredness-in-caring-for-people-with-multimorbidity-in-europe?utm_source=WHO%2FEurope+mailing+list&utm_campaign=db31faa5de-EMAIL_CAMPAIGN_2017_05_03&utm_medium=email&utm_term=0_60241f4736-db31faa5de-104992029)

“Too often health systems are centred around the disease rather than the patient. This policy brief identifies the key elements and potential benefits of patient-centred care for people with multimorbidity and flags up the strategies, which can help to strengthen patient-centred care.” *Source: European Observatory*

### [How to strengthen financing mechanisms to promote care for people with multimorbidity in Europe?](http://www.euro.who.int/__data/assets/pdf_file/0006/337587/PB_24.pdf?ua=1)

“Payment mechanisms that take multiple chronic conditions into account and actually promote better integration of care are sadly lacking. This policy brief examines the steps policy makers must take if they are to adapt financing systems to support people with multimorbidity better. It looks at securing sustainable funding; options for upgrading payment mechanisms; and how financing mechanisms can stimulate good quality integrated care for people with multimorbidity.” *Source: European Observatory*

### [How can eHealth improve care for people with multimorbidity in Europe?](http://www.euro.who.int/__data/assets/pdf_file/0007/337588/PB_25.pdf?ua=1)

“eHealth is an area of great untapped potential especially in care for people with multimorbidity. This policy brief identifies: the eHealth solutions available; their potential benefits; and the current policies around the adoption of eHealth in care for people with multimorbidity. It offers policy makers insights on how to exploit eHealth solutions to the challenges of multimorbidity.” *Source: European Observatory*

### [How to support integration to promote care for people with multimorbidity in Europe?](http://www.euro.who.int/__data/assets/pdf_file/0008/337589/PB_26.pdf?ua=1)

“The complex care needs of people with multimorbidity heighten the demand for integrated care. This policy brief identifies the most promising service arrangements for integrated care and examines how to support coordination and promote collaboration between care professionals and, strengthen professional competencies.” *Source: European Observatory*

[Back to top](#_top)

## Workforce

### [Integrating Community Health Workers into Complex Care Teams: Key Considerations](http://www.chcs.org/media/CHW-Brief-5-10-17.pdf)

“Complex care programs across the country are increasingly using community health workers (CHWs) to cultivate strong relationships with patients and deliver culturally competent education, care coordination, and system navigation assistance among other supports. CHWs complement traditional medical care delivery by addressing patients’ basic needs while allowing other providers to operate at the top of their licenses. This technical assistance brief examines effective strategies for including CHWs in complex care teams.” *Source: Center for Health Care Strategies*

### [Training the Future Child Health Care Workforce to Improve Behavioral Health Outcomes for Children, Youth, and Families](https://www.nap.edu/catalog/24789/training-the-future-child-health-care-workforce-to-improve-behavioral-health-outcomes-for-children-youth-and-families?utm_source=NASEM+News+and+Publications&utm_campaign=0971995e27-NAP+mail+new+2017.05.08&utm_medium=email&utm_term=0_96101de015-0971995e27-102579513&goal=0_96101de015-0971995e27-102579513&mc_cid=0971995e27&mc_eid=887bc22fe0)

“To examine workforce development across the range of health care professions working with children and families, as well as to identify innovative training models and levers to enhance training, the National Academies of Sciences, Engineering, and Medicine held a workshop in November 2016. The main objective of the workshop was to examine the development and training of an integrated health care workforce that can promote family-focused behavioral health care for children and their families. This publication briefly summarizes the presentations and discussions from the workshop.” *Source: National Academies Press*

[Back to top](#_top)

## Health of Older People

### [Turning Up the Volume: unheard voices of people with dementia](https://www.alzheimers.org.uk/download/downloads/id/3545/turning_up_the_volume_unheard_voices_of_people_with_dementia.pdf?utm_source=The%20King%27s%20Fund%20newsletters&utm_medium=email&utm_campaign=8284795_NEWSL_HMP%202017-05-12&dm_i=21A8,4XKL7,FLWRH5,IPXUC,1)

“This ambitious and innovative report…lets the voice of people living with dementia come through. It builds on their stories with the experiences of unpaid carers, and juxtaposes these with insight into public attitudes, exposing a backdrop of stigma. It presents a solid picture of what it is like to be affected by this condition across England, Wales and Northern Ireland today.” *Source: Alzheimer’s Society UK*

### [Design for dementia. Volume 1: a guide](http://www.hlpdesign.com/images/case_studies/Vol1.pdf)

“‘Design for Dementia’ is a Design Guide which aims to assist designers and others working in the built environment to tackle the challenge of dementia in society. Dementia is a growing issue associated with the demography of an ageing population.” *Source: Halsall Lloyd Partnership*

### [Design for dementia. Volume 2. Research Projects](http://www.hlpdesign.com/images/case_studies/Vol2.pdf)

“This volume complements ‘Design for Dementia’ Volume1 - A Guide, and describes outputs from a series of research projects which have been carried out by the Halsall Lloyd Partnership and Liverpool John Moores University. The findings from these projects support the recommendations described in Volume 1 and have been carried out in accordance with the participatory philosophy which the team have adopted.” *Source: Halsall Lloyd Partnership*

[Back to top](#_top)

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