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

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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 identify their key areas of interest. Email library@health.govt.nz to subscribe.

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

Equity

A smarter approach to homelessness
"This report looks at trends in spending on homelessness prevention programs in the United Kingdom, assesses the barriers to these and makes recommendations for how these can be overcome. The dedicated efforts of the homelessness sector are commendable, but evidence suggests they alone cannot provide the long-term, systemic solutions required." *Source: Institute for Government*

World report on social determinants of health equity

"This comprehensive World report on social determinants of health equity, as requested by resolution WHA74.16, reviews the insufficient progress on meeting the Commission on Social Determinants of Health's targets on achieving health equity and focuses the narrative and action agenda on what produces and reproduces health inequities and what proven policy remedies are available. The report includes 14 specific recommendations for action within four action areas. Country examples throughout the report showcase actions and diverse strategies for actioning the report's recommendations across different contexts. The report aims to inform global, national and local policymaking, providing a foundation for coordinated action and investment in social determinants of health equity. The report was developed with input from scientific and policy advisory groups, commissioned papers and evidence reviews, extensive internal contributions across the three levels of WHO, and consultation with Member States through the Executive Board and World Health Assembly." *Source: WHO*

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Disability

Employing 100 evaluation: final report
"Over a two-year period, the Employing 100 program aimed to successfully place 100 jobseekers with disability into roles within four major employers in the healthcare and social assistance, and food and accommodation industries in New South Wales, Queensland and Victoria. In contrast to most disability employment programs, Employing 100 used an employer-led model that aimed to develop employer confidence and organisational capability with the goal of building a more inclusive workforce. The program team worked with the employers to build organisational capability and disability confidence before linking organisations with vetted talent providers.

The evaluation found that the Employing 100 program exceeded its original goals, with 240 people with disability employed across the four organisations. Most importantly, the average retention rate for these employees across the partner organisations was 83 per cent. The program evaluation identified four key elements of the program that contributed to its success." *Source: Centre for Social Impact*

Exploring help-seeking experiences in the health system among people with deafness or hearing loss and mental health concerns
"This research highlights the lived experiences of people who are d/Deaf, Deaf, hard of hearing, or experiencing hearing loss –alongside carers and service providers – to uncover the systemic barriers they face when accessing mental health support. Through a community-informed process, the study identifies urgent gaps in communication, cultural safety, and service integration, while also amplifying the resilience and insights of affected communities. The findings inform actionable strategies to create more inclusive, person-centred care and long-term systemic reform. A full set of recommendations and broader reflections on healthcare education and policy are provided." *Source: Deafness Forum Australia*

Disability reform action plan for government
"This paper maps core elements of the proposed reform agenda for Australia's disability sector including areas such as system design, foundational supports, quality and safety regulations, pricing and payments, market management, and workforce development. It highlights the importance of engagement and communication with people with disability, their families and carers, and providers." *Source: National Disability Services*

Assessing, differentiating, and reporting the functional strengths and support needs of children for whom there are developmental concerns

"This report describes the development of an evidence-based and culturally responsive approach to addressing the current gap in knowledge and lack of consensus about how best to assess, differentiate and report children's functional strengths and support needs. The framework will inform professional practice, operational guidance and decision-making.

The framework focuses on professional practice when working with children aged 0-12 years and their families in Australia. It can be used across relevant health, education, disability and community services to support all children, irrespective of whether they have a diagnosed condition or may receive a diagnosis in the future. This includes, but is not limited to, children with developmental delay, neurodevelopmental conditions, acquired disability, other health and medical conditions that result in the need for additional supports." *Source: Autism CRC*

Atoatoali'o: National Pacific Disability Approach

"Building on Previous work, including Faiva Ora National Pasifika Disability Action Plan (2016-2021) and the New Zealand Disability Strategy 2016-2026, the development of Atoatoali'o and the actions set out in this Pacific approach will feed into the refresh of the New Zealand Disability Strategy. Aligned to the Ministry of Disabled People – Whaikaha (the Ministry), Atoatoali'o serves as both a metaphor and a guiding principle for achieving the following priorities. It reinforces the importance of:

- Strengthening leadership and workforce capabilities to create a more connected and inclusive service environment (Priority 1 and Priority 2: Leadership and Workforce)
- Disability Awareness within Communities, which seeks to strengthen community networks and promote disability literacy among Pacific families and churches (Priority 3: Disability awareness within Pacific communities)
- Ensuring every Pacific disabled person and their families feel supported and valued (Priority 4: Access and Equity)
- Increase the visibility of Pacific disabled people in cross-government data and research through systematic collection and disaggregation of service usage information (Priority 5: Stakeholder Data and insights collaboration)
- Promoting a holistic, family-centered approach to support that reflects the interdependence of Pacific communities (Priority 6: Enabling Good Lives)."

Source: Whaikaha – Ministry of Disabled People

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Health Systems, Costs, & Transformation

Special Commission of Inquiry into Healthcare Funding

A final report from an inquiry to conduct a holistic review of the funding of health services in New South Wales (NSW). It finds that the NSW health system is a good one. It comprises doctors, nurses, and other clinicians and workers who are well trained, highly skilled, and dedicated. It is well managed. The money allocated to NSW Health by a combination of NSW Treasury and the Commonwealth Government is not wasted. However, it has failings. One significant failure is that adequate and timely primary care is not available to parts of the NSW population. There has been a failure to embed prevention in all its forms into the health system, despite repeated and evidence based recommendations to do so. *Source: Government of New South Wales*

Trends in the financialisation of outpatient care across OECD countries

"This paper summarises the findings of research into the financialisation of outpatient care across OECD countries. It finds that outpatient specialised services have become a recent target of financial

institutions active in the healthcare sector, notably across dentistry, ophthalmology, radiology, biology and primary care. While financialisation was reported to be a concern by a majority of responding countries, how financialisation is taking place also varies depending on how health systems are structured. Moreover, despite a growing evidence base around the potential – often negative – impacts of investments by some financial actors, notably private equity firms, countries lack a cohesive picture of the extent to which financial firms have scaled-up investments into their health systems. The paper further presents a set of policy considerations to address financialisation in outpatient care." *Source: OECD*

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Mental Health & Addiction

Exploring the relationship between non-communicable diseases and depression
"Non communicable diseases (NCDs) such as cancer, heart disease, stroke, chronic lung diseases and diabetes are the leading causes of death across OECD countries and represent a major disability burden among the living. At the same time, there is an increasing awareness of the prevalence and importance of mental ill health in society. In addition to personal suffering, both NCDs and mental ill health are associated with increased economic costs for governments through healthcare costs and lost productivity. As they often co-occur, it is crucial to better understand the relationship between NCDs and mental illnesses in order to develop policies that adequately address both. The aim of this paper is to better understand the impact of NCDs on depression." *Source: OECD*

Understanding and addressing inequalities in mental health
"Mental health status is not homogenous across populations but differs between males and females and by sexual orientation, ethnicity and indigeneity, migration status and socio-economic status, among others. Inequalities in mental health are often aggravated by inequalities in access to and quality of mental healthcare, which are more likely to negatively impact people in vulnerable circumstances. This Working Paper starts with an overview of inequalities in mental health status and access, experience and outcomes of mental health care, quantifying these differences and reviewing their determinants and risk factors. The second part of the paper strengthens the evidence base on policies to address the inequalities identified. Using information collected from 37 OECD countries through a questionnaire and interviews, it characterises policy adoption in the promotion of good mental health and prevention of mental-ill health, access to responsive and high-quality mental health care and the improvement of treatment experiences and outcomes for groups in most vulnerable circumstances and at higher risk. The paper highlights relevant and innovative strategies implemented by countries in addressing inequalities and complements country information with evidence from the literature on what interventions seem effective to reinforce population mental health resilience and close the mental health gaps." *Source: OECD*

Suicide worldwide in 2021: global health estimates
"An estimated 727 000 persons died by suicide in 2021. Suicide was the third leading cause of death among 15-29-year-olds; second for females, third for males. More than half of global suicides (56%) happened before the age of 50 years, and the majority of suicides occurred in low-and-middle-income countries (73%). The reduction of suicide rates is an indicator in the UN SDGs, the WHO GPW14 and the Comprehensive Mental Health Action Plan 2013-2030. Information on data and statistics is necessary for advocacy, information and planning purposes. This document provides this essential information in an accessible and digestible format. Target audiences are governments, policy makers, development agencies, health workers, academics, researchers, nongovernmental organizations, journalists/media, and the general public." *Source: WHO*

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Research, Technology, & Innovation

Closing the digital skills gap in health care: Identifying core digital skills and competencies and education and training opportunities for health professionals in the European Union
"Health professionals need appropriate digital skills and competencies for their roles in order to use digital health technologies effectively and ethically. This can help reduce administrative burdens and enhance time spent on patient care, ultimately contributing to better work environments and improved health outcomes. Moreover, greater use of digital health technologies is key to building resilient and well-functioning health systems that can respond to future health threats such as pandemics and climate change, can meet the growing demand for health care from ageing populations and will support the implementation of a strong European Health Union. The European Union (EU) and its Member States are taking action to support digital up-and-reskilling in the health sector such as through increased funding, or developing national/regional digital health strategies with improved digital literacy as a core aim. Progress nevertheless varies substantially between Member States and surveys show a current gap in digital skills training and education for the health and care workforce in the EU." *Source: European Observatory on Health Systems and Policies*

An Artificial Intelligence Code of Conduct for Health and Medicine: Essential Guidance for Aligned Action
"Over the last decade, advances in artificial intelligence (AI) technologies have created transformational opportunities for health, health care, and biomedical science. While new tools are available to improve effectiveness and efficiency in myriad applications in health and health care, challenges persist, including those related to increasing costs of care, staff burnout and shortages, and the growing disease burden of an aging population. The need for new approaches to address these long-standing challenges is evident and AI offers both new hope and new concerns.

An Artificial Intelligence Code of Conduct for Health and Medicine: Essential Guidance for Aligned Action presents a unifying AI Code of Conduct (AICC) framework developed to align the field around responsible development and application of AI and to catalyze collective action to ensure that the transformative potential of AI in health and medicine is realized. Designed to be applied at every level of decision making—from boardroom to bedside and from innovation labs to reimbursement policies—the publication serves as a blueprint for building trust, protecting patients, and ensuring that innovation benefits people." *Source: The National Academies Press*

How's Life for Children in the Digital Age?
"Today's children are growing up in a rapidly evolving digital world, where digital media play an important role in their daily lives. Digital services offer opportunities for learning, entertainment, accessing information, discovering new things, and connecting with other peers and community members. However, they also pose risks, including problematic or excessive use of digital media, exposure to inappropriate content, harmful conducts, and other online safety concerns.

The report How's Life for Children in the Digital Age? provides an overview of the current state of children's lives in the digital environment across OECD countries, based on the latest cross-national data. It explores the challenges of ensuring that children are both protected and empowered to use digital media in a beneficial way while managing potential risks. The report highlights the need for a whole-of-society, multi-sectoral policy approach, engaging digital service providers, health professionals, educators, experts, parents, and children to protect, empower, and support children, while also addressing offline vulnerabilities, with the ultimate aim of enhancing their well-being and

future outcomes. Additionally, it calls for strengthening countries' capacities to assess the impact of digital media on children's lives and to monitor rapidly evolving challenges." *Source: OECD*

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Health of Older People

Generating opportunities for long lives How can AI help us achieve healthier, wealthier, more connected long lives?
"We are living longer, but increasingly unhealthy, financially insecure and disconnected lives. Health systems are bursting at the seams. Economic inactivity is at a record high. And our places and communities aren't adapted to long lives. Along comes AI… Taking industry and Government by storm, to what extent can AI help societies become 'longevity-ready' and adapt to an ageing society?" *Source: International Longevity Centre UK*

Living better with dementia through care and support: it's not rocket science
"Dementia is the leading cause of death in the UK. The risk of dementia increases with age and as we live longer lives, more and more of us will live with the condition ourselves and/or as carers. However, dementia is not an inevitable consequence of ageing, and much more can be done to prevent, delay or lessen its impact on daily lives. Dementia remains woefully underdiagnosed across the country. And this has to change as diagnosis unlocks the care, support and treatment that people living with dementia need to manage their condition. We must improve post-diagnostic support, as without the guarantee of proper care pathways many people are left to cope alone. For example, even after a dementia diagnosis, in England only two-thirds - and in Scotland less than half - of people have a care plan. For too long, government has relied on families and friends to fill these gaps. But, in an ageing society, our informal support systems, local government, the formal care sector and health service can't continue to sustain the status quo." *Source: International Longevity Centre UK*

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Workforce

State of the world's nursing report 2025
"The 2025 edition of the State of the world's nursing provides the most comprehensive and up-to-date analysis of the nursing workforce. The report features new indicators on critical areas for nursing, such as education capacity, advanced practice nursing and remuneration. In addition to the 12 policy priorities from the Global strategic directions for nursing and midwifery 2021–2025, there are five additional policy priorities and a compilation of data from each WHO region. Country profiles reflect each country's national data and are available for download from the WHO National Health Workforce Accounts data portal." *Source: WHO*

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Health Policy

Diverging paths: How other countries have designed and implemented assisted dying
"The UK is among a growing number of countries that are debating or have recently legalised assisted dying, primarily in western democracies. While international experience has already

informed the debate in the UK, comparisons have focused on specific country examples and a narrow set of legal differences.

This briefing provides a comprehensive review of international evidence from 15 jurisdictions in 9 countries to describe a wider range of practical and operational differences in how comparable systems have set up assisted dying. We also describe the uptake of assisted dying in different jurisdictions, and how policy has changed over time in places with longer-standing laws.

The Nuffield Trust takes a neutral position on whether assisted dying should be legal. This review does not make a judgement about the effectiveness of different models." *Source: Nuffield Trust*

WHO guideline on balanced national controlled medicines policies to ensure medical access and safety: rapid communication
"WHO recommends that essential medicines, including those that are controlled, be available to all patients at all times at a price that the individual and the community can afford. In line with their obligations under the United Nation's drug treaties, governments and health systems must ensure that people who need controlled medicines for medical and scientific purposes can access them and also ensure that these medicines are used safely and appropriately. Policies should seek to maximize access to essential and beneficial controlled medicines for all people who need them, while effectively restricting non-medical use, which poses serious risks to safety and has harmful consequences for individuals and societies. This guideline provides evidence-informed recommendations on pharmaceuticals with an identified or emergent clinical application the active principles of which are listed in international drug control conventions and the manufacture, possession and use of which are regulated by national law." *Source: WHO*

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Public Health

The prevalence and impact of Long COVID in the primary care population: Findings from the OECD PaRIS survey
"Long COVID is a condition developing after initial COVID-19 that results in a range of persistent symptoms, impacting physical and mental health, causing disability and reducing productivity. The OECD Patient-Reported Indicator Surveys (PaRIS) collected data from 2023 to 2024 from 107 011 primary care patients aged 45 years and older in 19 countries, and included questions related to Long COVID. According to PaRIS data, approximately 7% of primary care patients aged 45 years and older reported ever having Long COVID, while an estimated 5% reported living with persisting Long COVID symptoms at the time of survey. Patients living with Long COVID reported lower self-rated physical and mental health and poorer healthcare experiences compared to those without. Implementation of standard care pathways for the diagnosis, management and co ordination of Long COVID care is needed to improve patient healthcare experiences. The long-term health and social impact of Long COVID remains uncertain, requiring continued surveillance and research to estimate the socio-economic costs of the disease burden, in order to better inform health policy."
Source: OECD

Restricting alcohol availability in practice: evidence from selected countries
"Alcoholic beverages contain ethanol, an established carcinogen and psychoactive and toxic substance that can cause dependence, and they are associated with public health challenges. Policy measures that restrict alcohol availability have proven effective in reducing alcohol consumption, shaping consumption patterns and mitigating harm. This brief zooms into the policy measures

applied in 30 countries. Results show that categorization of alcohol licensing is based on the types of outlets and alcohol sold. Countries commonly prohibit alcohol sales at some locations, such as educational premises, health facilities, houses of worship and sports sites. Fewer countries establish a minimum required distance between alcohol outlets and sensitive locations. Required distances ranged between 100 and 500 metres. Only one-third of countries regulate the days of sale, but more than 50% restrict the hours of sale. Licensing renewals were commonly set at one-year intervals. The most common minimum legal purchase age was 18 years. Alcohol remote sale and delivery were largely unregulated, with only a few countries requiring age verification at the point of sale or delivery. Fines were the penalty implemented most often. The brief shows how policy measures that restrict the availability of alcohol were applied to address public health concerns in specific contexts such as Botswana, Burundi, Malawi, Lithuania, Thailand, Uganda and Viet Nam. In all cases, coordinated, multisectoral approaches are needed to address the challenges of restricting alcohol availability." *Source: WHO*

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