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

Issue 135, 2025, July

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

Community-led solutions: a pathway to collective wellbeing
"This report provides an overview of AbSec's May 2025 sector forum which brought together stakeholders to deliberate and shape the future of the Aboriginal and Torres Strait Islander child and family sector in New South Wales. Key topics included early intervention, inter-jurisdictional learnings, Aboriginal identification, and trends in child protection and out-of-home care." *Source: AbSec - NSW Child, Family and Community Peak Aboriginal Corporation*

System-wide approach to Aboriginal and Torres Strait Islander social and emotional wellbeing, mental health, and suicide prevention

"For more than a decade, national strategies, reviews, and intergovernmental agreements have consistently recognised the urgent need to improve Aboriginal and Torres Strait Islander social and emotional wellbeing, mental health, and suicide prevention. Yet, despite these repeated commitments to the Gayaa Dhuwi (Proud Spirit) Declaration (2015) under the Fifth National Mental Health and Suicide Prevention Plan (2017), the Productivity Commission's Inquiry into Mental Health (2020), the National Suicide Prevention Adviser Final Advice (2021), and the National Mental Health and Suicide Prevention Agreement (2022), implementation remains inadequate. Aboriginal and Torres Strait Islander-led reform is not a supplementary consideration in mental health and suicide prevention, it is foundational. Gayaa Dhuwi (Proud Spirit) Australia is the only national community-controlled organisation established specifically to lead Aboriginal and Torres Strait Islander mental health, social and emotional wellbeing, and suicide prevention policy across the entire mental health system. It is uniquely positioned to partner with governments to deliver system-wide reform and ensure community-led solutions are embedded at the national level." *Source: Gayaa Dhuwi (Proud Spirit) Australia*

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Health Systems, Costs, & Transformation

From ideas to reality: An introduction to generating and implementing innovation in health systems

"With all the old and new challenges facing our health systems today, innovation seems the only way to address health needs and strengthen the overall wellbeing of our societies. However, while innovations in medicine and health service delivery have revolutionized health care, they have also put increasing strain on our health budgets. What's more, a number of new technologies that promised to improve health outcomes have proven to be harmful, or ineffective and wasteful. Often, the focus of incentives provided by health systems seems to be on certain types of innovation only, such as the development of new medicines or the possible uses of artificial intelligence (AI), while the potential for new, patient-centred approaches in the way we provide services remains untapped. Therefore, it is crucial to consider what we mean when we talk about innovation in health, so we can focus our efforts in the areas that are bound to help us the most." *Source: European Observatory on Health Systems and Policies*

Framework to implement a life course approach in practice

"The WHO Framework to implement a life course approach in practice summarizes current evidence to reorient health systems to produce health and well-being, draws on global examples of implementation, and proposes next steps. A life course approach acknowledges that health and well-being depend on the interaction of multiple protective and risk factors, particularly during sensitive and critical periods throughout people's lives and across generations. It strengthens equity by recognizing how critical periods, transitions and cumulative exposures shape health trajectories. This framework targets a wide audience including governments, civil society, and other non-state actors committed to applying a life course approach and informs discussions on redesigning primary health care programmes to improve life course health trajectories." *Source: World Health Organization*

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Mental Health & Wellbeing

New Zealand Clinical Principles Framework for Attention Deficit Hyperactivity Disorder

"The New Zealand Clinical Principles Framework for Attention Deficit Hyperactivity Disorder (the framework) describes the expected clinical standards for quality assessment, diagnosis and treatment of ADHD in New Zealand based on existing international clinical guidelines. The framework also includes further considerations that may represent clinical best practice or areas that have limited evidence.

The framework has been developed in partnership with a Clinical Reference Group, with members including people with lived experience of ADHD, family and whānau of individuals with ADHD, and New Zealand clinicians with expertise and experience in assessing and treating ADHD." *Source: Ministry of Health*

Adult ADHD assessments and diagnosis: data and service provision

"Attention deficit hyperactivity disorder (ADHD) is suspected to affect 3–4% of adults in the UK. In recent years, various sources have highlighted significant waits for adult ADHD assessments. However, there is no official list of ADHD services, no agreed measure for calculating waiting times for assessments and no duty to report this data, so the full picture of ADHD assessment and diagnosis is unclear.

Addressing variation in adult ADHD data collection and use will be fundamental to developing high-quality, comparable data that can be used nationally to understand, plan and improve services. Having an accurate understanding of the data is a vital first step to understanding where improvements might be made for people waiting for ADHD assessments." *Source: The King's Fund*

Enhancing community clinician confidence in child and adolescent mental health

"The COVID-19 pandemic intensified the mental health crisis among children and adolescents, straining access to specialist care. Community clinicians, often the first point of contact, faced increased responsibility without adequate training or support. In response, the Royal Children's Hospital and the North Western Melbourne Primary Health Network co-developed an innovative model designed to improve community-based care, as well as reduce unnecessary referrals and bolster clinical decision-making and complex case management. Authors of the latest Deeble Institute for Health Policy Research Perspectives Brief, Enhancing Community Clinician Confidence in Child and Adolescent Mental Health: Insights from the COMPASS Collaborative Model, provides a holistic overview of the COMPASS model's implementation and outcomes. It further proposes to scale the applications of the model nationally, as its current successes aligns with state and national mental health strategies, including recommendations from the Royal Commission into Victoria's Mental Health System Final Report." *Source: Deeble Institute for Health Policy Research*

Integrating Mental Health Support into Rural Libraries

"Residents in rural communities across the United States face significant barriers to accessing mental health care. In the rural areas of Texas, this need is critical: In 2022, the suicide rate among rural Texans was 20.88 per 100,000, nearly double the rate among residents in Texas' metropolitan communities. Although these communities may lack access to mental health providers, they do have robust community libraries: Trusted hubs that could be transformed, with the necessary resources and supports, into a new access point for care.

This report presents findings from an initiative focused on embedding nonclinical adult mental health supports into rural libraries. The findings derive from RAND researchers' three-year implementation evaluation of Libraries for Health (L4H), a pilot program funded by St. David's Foundation (SDF) in which ten libraries in rural Central Texas worked to integrate mental health supports. This report summarizes how libraries implemented L4H, libraries' primary barriers and facilitators of implementation, and the efforts and adaptations they made to build and sustain L4H." *Source: RAND*

Implementing the global framework on well-being at the country level: Policy pathways
"As part of implementing Resolution WHA75.19, and building on the WHO Global framework on well-being adopted by Member States at the Seventy-sixth World Health Assembly, Implementing the global framework on well-being at country level: policy pathways provides practical guidance to ministries of health on how to translate the vision of well-being societies into concrete action through five key policy pathways. Shifting toward well-being societies requires a new way of measuring progress—one that moves beyond gross domestic product (GDP) and prioritizes health, inclusion, and sustainability." *Source: World Health Organization*

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Research, Technology, & Innovation

Advancing AI integration in hospitals: an appendicitis case-study approach
"Artificial intelligence (AI) is transforming healthcare with a promise to improve clinical decision-making, patient outcomes and hospital systems' efficiency. Yet, challenges related to patient safety and model bias, validation and integration into existing systems remain. This brief offers specific actions that will contribute to a national strategy to develop an AI ecosystem suited to Australia's health system. " *Source: Deeble Institute for Health Policy Research*

In vitro gametogenesis: A review of ethical and policy questions
"This report was produced as part of a two-year collaboration between the Wellcome-funded Future of Human Reproduction Project (222858/Z/21/Z) and the Nuffield Council on Bioethics (NCOB). The collaboration explored ethical and policy considerations raised by possible future uses of in vitro derived gametes in human reproduction. It has been informed, in particular, by discussions at two events: a workshop focussed on the UK context in London, July 2023, and an international symposium held in Leiden, the Netherlands, in June 2024." *Source: Nuffield Council on Bioethics*

Safe and Responsible Artificial Intelligence in Health Care – Legislation and Regulation Review: Final Report
"This document forms the final report for the Safe and Responsible Artificial Intelligence (AI) in Health Care Legislation and Regulation Review (the review). The Australian Government is taking a whole of economy approach to capturing the benefits of AI while building trust in the Australian community. To build trust and boost AI adoption, government is taking an integrated approach with five pillars of action: delivering regulatory clarity; supporting and promoting best-practice governance; supporting AI capability; positioning government as an exemplar; and engaging internationally." *Source: Department of Health, Disability, and Ageing*

Mapping the application of artificial intelligence in traditional medicine: technical brief
"Artificial Intelligence (AI) refers to the capability of algorithms integrated into systems and tools to learn from data so that they can perform automated tasks without explicit programming of every step by a human. This technical brief offers insight into the rapidly evolving AI for health landscape and how it might be utilized in Traditional Medicine (TM). Regional and global examples are presented to show how AI is currently being used in TM to support evidence-informed decision-making and policy-making to improve health systems and universal health coverage (UHC). The document was developed by leveraging the findings of a literature review and supplementing this with knowledge and inputs captured during the conceptualization process with experts from the Topic Group on AI and Traditional Medicine (TG-TM) under the ITU-WHO Focus Group on Artificial Intelligence for Health (FG-AI4H)." *Source: World Health Organization*

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Health Policy

What Can Organizations Do to Enhance their Capacity to Promote Healthy Public Policies?
"This document aims to provide decision makers and public health professionals with practical strategies and tools to strengthen organizational capacities for promoting healthy public policies (HPPs). It highlights a variety of strategies, tools, and implementation examples drawn from the scientific literature. Decision makers and public health professionals can adapt these proposed strategies and tools to their specific contexts, using them to guide and structure their actions to enhance their organizational capacities to act on HPPs." *Source: National Collaborating Centre for Healthy Public Policy*

Personalized medicine for healthier populations: Key considerations for policy-makers
"Personalized medicine has the potential to revolutionize the way we deliver care, but there are numerous considerations Personalized medicine (PM), also known as precision medicine, is an innovative approach that tailors medical interventions to individuals based on their unique genetic, molecular, lifestyle and environmental factors. This model has the potential to revolutionize health care when implemented across the entire health continuum, from health promotion and primary prevention, to prediction, diagnosis, treatment and rehabilitation. To deliver on this potential, numerous considerations need to be addressed, including ethical and social issues, infrastructural and operational requirements, evidence generation and funding, and aligning the regulatory landscape." *Source: European Observatory on Health Systems and Policies*

Co-design versus faux-design of Aboriginal and Torres Strait Islander health policy: a critical review
"Australia's health policy landscape operates within a settler-colonial system that continues to perpetuate systemic discrimination. The ongoing failure of health policies to effectively support Aboriginal and Torres Strait Islander peoples is further deepening the inequities brought about by colonisation. Valuing and centring Aboriginal and Torres Strait Islander knowledges, perspectives, and priorities is critical to developing more effective policies. A co-design approach that centres Aboriginal and Torres Strait Islander peoples, knowledges, values, and practices offers a policy development solution that more effectively addresses prevailing systemic discrimination and inequities. However, while co-design terminology is increasing in Australian health policymaking, many cases apply only tokenistic or superficial co-design practices; an approach called 'faux-design'. This paper critically reviews current approaches to co-designing and faux-designing health policy for Aboriginal and Torres Strait Islander peoples." *Source: Lowitja Institute*

Policy considerations for strengthening preparedness and response to arbovirus epidemics and pandemics
"The increasing incidence of arboviral outbreaks, such as dengue, chikungunya, and Zika, highlights the need for urgent and stronger preparedness and response systems. These diseases not only strain healthcare systems but also disproportionately affect vulnerable populations, causing significant morbidity, mortality, and economic loss. With factors like climate change, urbanization, and increased international travel amplifying the spread of these viruses, an integrated approach to preparedness and response is essential. This document outlines key policy actions to support countries in preventing, preparing for, and responding effectively to arboviral threats. By strengthening capacities in emergency coordination, collaborative surveillance, community protection, access to countermeasures, and clinical care, countries can significantly improve their preparedness and resilience to current and future arboviral threats." *Source: World Health Organization*

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Workforce

Poverty, pay and the case for change in social care
"1.6 million people work in social care in England alone – around 1 in 20 of all workers. They provide vital care and support to older people and disabled people. But our analysis finds persistently high levels of poverty and deprivation among the residential care workforce.
Residential care workers and their families are nearly twice as likely to live in poverty as the average UK worker. They are also more likely to experience food insecurity, use a food bank, go without basic items and services and rely on Universal Credit. This has not improved compared to before the pandemic. There are also concerning inequalities affecting migrant workers in social care. More than 1 in 3 residential care workers born outside the UK lived in poverty, compared with 1 in 10 born in the UK. The case for workforce reform in social care is strong. Poor pay, terms and conditions contribute to chronic staffing gaps, impacting people's care. They also affect the lives of people working in care and their families. Our analysis provides an up-to-date picture of poverty and deprivation among the residential care workforce in the UK. It does so to help inform the government's approach to social care workforce policy and tackling poverty." *Source: The Health Foundation*

Independent review of the physician associate and anaesthesia associate roles: final report
"Physician associates (PAs) and anaesthesia associates (AAs) were introduced into the NHS in the early 2000s. The initial introduction of the roles was relatively smooth and appeared to be well received by the medical profession. However, expansion in numbers over the past 10 years began to generate challenge from the medical profession, the public and the media. This was exacerbated by workforce pressures and reduced morale following the COVID-19 pandemic and heightened by industrial action. Concerns were raised about safety and lack of clarity of the roles, and about impact on training and employment of resident doctors.
In autumn 2024, in the light of an increasingly intense debate focused on PAs and AAs, the Secretary of State for Health and Social Care (DHSC) established an independent review to help inform a refreshed workforce plan. Perhaps most importantly, the review aimed to provide a period of engagement and reflection, and an opportunity to reset the debate and to enable all staff groups to accept the recommendations and work collaboratively. The principal aim of the review was to determine whether the roles of PA and AA were safe and effective as members of an MDT. Secondary questions were consideration of what modifications might be required to improve confidence in the roles, and whether the rollout in England has supported safe and effective deployment of the roles." *Source: Department of Health and Social Care*

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Disability

The lived experience of disabled people in the UK: a review of evidence
"This report discusses the systematic review of lived experience evidence commissioned by the Cabinet Office's Disability Unit. The review was carried out by the Centre for Disability Studies at the University of Leeds and Disability Rights UK. Its aim was to establish evidence on the lived experience of disabled people in the UK published between 2010 and 2021. It addressed the following research question: What evidence exists about the barriers and opportunities facing disabled people in the UK, arising specifically from their first-hand knowledge and experience (lived experience), in areas of current policy concern?" *Source: Centre for Disability Studies, University of Leeds and Disability Rights UK*

It's more than fun and games: the online gaming experiences of young people with disability
"The world of online gaming is a place where children and young people with disability go to have fun, relax, connect and use their imaginations.
It's a space where they have the freedom to explore and the agency to choose how to define themselves. Yet it's also a place where young gamers with disability are more likely to face bullying behaviours – in particular exclusion – and encounter content and ideas associated with harm.
This eSafety research explores the online gaming experiences of children and young people with disability, examining their perspectives on online gaming, the risks and benefits they experience, and the safety practices they adopt." *Source: Government of Australia*

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Public Health

The economic and productivity costs of obesity and excess weight in the UK
"To better understand the economic impacts of obesity and excess weight, Nesta commissioned Frontier Economics to quantify the economic cost of these conditions and the potential economic gains from addressing them.
UK obesity rates have doubled over the past 30 years. Today, nearly one in three adults lives with obesity. This not only has profound implications for individuals and the NHS, but also for the economy." *Source: Nesta*

Reactions and Attitudes Towards the August 2021 'Snap Lockdown' in Aotearoa New Zealand
"The CARUL Collective is an interdisciplinary team of academics whose research explores the impacts of pandemic control measures on social life in Aotearoa New Zealand and the UK. Our work is based on a mixture of quantitative and qualitative survey research and semi-structured interviews. Having conducted four surveys during 2020, we distributed a follow-up survey in August 2021, just as a new lockdown occasioned by the detection of the Delta variant was being introduced. This report summarises some of the main points that emerged from that survey that have not yet been reported in any published CARUL work." *Source: London School of Economics*

Comparing the Covid-19 response and major outcomes in island nations
This briefing details findings on whether a vigorous, proactive response to the Covid-19 pandemic was associated with better or worse key health and macroeconomic outcomes.
It finds that among the high-income (OECD) island nations, those which used a more proactive strategic response to Covid-19 (such as in Australia and Aotearoa New Zealand who proactively used exclusion and elimination strategies), generally experienced better health and macroeconomic outcomes compared to those which relied on suppression/mitigation strategies. Therefore, when faced with the threat of a severe pandemic, island nations should consider such exclusion and elimination strategies. *Source: PHCC*

Clinical management of COVID-19: living guideline, June 2025
"The COVID-19 Clinical management: living guidance contains the most up-to-date WHO recommendations for the clinical management of people with COVID-19. Providing guidance that is comprehensive and holistic for the optimal care of COVID-19 patients throughout their entire illness is important. There are two new recommendations about the use of antibiotics which follow from recent meta-analysis of outcomes of patients treated with antibiotics for COVID-19." *Source: World Health Organization*

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Environment and Health

Monitoring exposure to future climate-related hazards: Forward-looking indicator results and methods using climate scenarios
"Understanding how climate-related hazards will evolve due to climate change is crucial to guide adaptation decisions. Building on OECD indicators monitoring historical exposure to climate-related hazards, this paper develops forward-looking indicators to monitor exposure of people and agriculture (cropland and livestock) to three major climate-related hazard types (extreme temperature, extreme precipitation, and drought). The methodology relies on climate multi-model ensembles covering a range of emission scenarios, from very low to very high. Results indicate that exposure to extreme temperature, precipitation, and drought is projected to worsen over the century in many countries, with considerable variation within and between countries. The presentation of indicator results in this paper focusses on 50 OECD member and partner countries but results for all countries globally are available online." *Source: OECD*

Health system strengthening interventions to improve the health of displaced and migrant populations in the context of climate change
"This is the seventh report in the Global Evidence Review on Health and Migration (GEHM) series. The publication examines how health systems are responding to the health needs of migrant and displaced populations in the context of climate change. Drawing on a review of 95 health system interventions across WHO's six health system building blocks, it highlights current approaches, evidence gaps, and opportunities for strengthening migrant-inclusive and climate-resilient health systems." *Source: World Health Organization*

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