



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.

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Equity

[GLP-1 drug prescriptions for obesity; Who is turning to private weight-loss treatment?](#)

"In recent years a new class of weight-loss medications, 'GLP-1 receptor agonists' (GLP-1RAs), have been shown to be effective in reducing people's body weight and improving health outcomes. Two GLP-1 drugs are currently licensed in the UK for weight loss: tirzepatide (available as Mounjaro) and semaglutide (available as Wegovy). It is estimated that 2.4 million people in the UK are accessing these medications. But funding and eligibility via the NHS is constrained, meaning the private sector

is currently the main way of accessing them. Within the private market, there is not a clear picture of who is accessing treatment.

This analysis looks at the uptake of private GLP-1 treatments and the demographic and socioeconomic characteristics of those accessing them. It aims to help us understand demand among different groups accessing treatment and the potential impact on inequalities." *Source: The Health Foundation*

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Health Systems, Costs, & Transformation

[Commissioning: lessons from the last 30 years and implications for the new role of ICBs](#)

"Since its introduction in 1990, the commissioning layer of the NHS has been the most reorganised part of the health service, and it is changing once again. This article reviews the lessons to learn from the past and describes what needs to happen for Integrated Care Board-led strategic commissioning to succeed where previous models have fallen short." *Source: Nuffield Trust*

[How can co-ordination improve long-term care delivery?](#)

"This paper discusses different policies to improve the co-ordination of health and care services across different parts of government, providers and organisations to help individuals perform everyday activities (long-term care, LTC). It builds primarily on four case studies: Canada (Québec), Costa Rica, France and Japan, which represent diverse LTC models at different stages of implementation. It discusses four key policy dimensions: governance, funding, workforce and mechanisms for data sharing in the LTC sector. It finds that co-ordination mechanisms are important to have adequate care provision across different sectors (horizontal coordination) and ensure alignment across different levels of governments (vertical coordination). Pooling of funds from the health and the social care sectors to the LTC system and financial incentives to reduce duplications and encourage joined-up work are also used across countries to promote care co-ordination. Countries also rely on a variety of workforce strategies to support care co-ordination, ranging from assigning care managers or co-ordinators, providing training for multidisciplinary care and setting up more structured care pathways or single-entry points for recipients to receive services or be entitled to public support for care. Ensuring shared data and interoperability of operation systems from different providers also facilitate care co-ordination and quality standards, albeit they are challenging to develop." *Source: OECD*

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Mental Health & Addiction

[Addressing Australia's illicit tobacco market](#)

"This report presents evidence on how the excise system has evolved, examines the impacts of the illicit market on public policy objectives and the legal retail sector, reviews relevant international experience, and models the impact of excise reform combined with strengthened enforcement to estimate how different policy approaches may affect legal consumption, illicit consumption, and government revenue. The report draws on five complementary evidence streams, anchored by a national volumetric conjoint survey that directly captures consumers' attitudes toward the illicit tobacco market and their likely switching behaviour in response to changes in the price of legal cigarettes, providing the behavioural foundation for modelling the impact on illicit market consumption. This is complemented by novel, real-world datasets from retailers and a large manufacturer, including Ritchies sales evidence of the impacts of a growing illicit market on compliant legal retailers, and data from a large chain retailer capturing enforcement and store-

closure effects in New South Wales, South Australia, and Queensland, which are essential for grounding the analysis in observed market outcomes and helping shape nationally relevant policy options. These Australia-specific inputs are supported by Treasury/FTI/ATO market sizing and forecasting, alongside international benchmarking and case studies to place findings in a global policy context." *Source: Oxford Economics Australia*

Drowning in a sea of diagnoses. How medicalising distress is overwhelming Australia's mental health system and failing those most in need

"At the centre of Australia's mental health system lies a paradox. Government spending has soared, doubling and redoubling over the past three decades. Support programs such as the Better Access initiative and the National Disability Insurance Scheme have dramatically expanded access to therapy, medication, and support. Yet, for all this investment, the nation's mental health has conspicuously failed to improve. Suicide rates have barely budged. Psychiatric drug use is at record levels. And each year, the number of Australians classified as mentally ill continues to rise. The goal of reform is not to deny suffering or dismantle care, but to restore proportion and clarity to Australia's response to psychosocial distress. A mental health system should be judged not by how many people it enrolls, but by how many people no longer need it. A humane system does not shrink compassion; it sharpens it by distinguishing those who truly need lifelong care from those who need understanding, structure, and the opportunity to recover. Only by recognising when helping turns into harm can we build a system that genuinely promotes recovery, resilience, and human flourishing." *Source: Centre for Independent Studies*

Now We Are 15: Navigating life in mid-adolescence

"Now We Are 15 shares new findings from Aotearoa New Zealand's largest longitudinal study as our young people move through middle adolescence. The information for this part of the study was collected in 2025 from more than 4,000 young people and their main caregivers, when they were around 15 years old and in Year 11 at school.

The 15-Year Checkpoint findings are presented across three snapshot reports exploring young people's experiences of education, their mental health and wellbeing, and experiences of self-harm and thoughts of suicide. These snapshots offer valuable insights into life at age 15 and highlight the factors that shape learning, resilience, and connection during this important stage of development." *Source: Growing Up In New Zealand*

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Research, Technology, & Innovation

Demystifying artificial intelligence in health: What health policy-makers need to know

"This is a practical guide for anyone working in or alongside the health sector who needs to engage with the fast-evolving topic of artificial intelligence (AI). It aims to provide a balanced foundation for informed decision-making, helping readers ask the right questions and shape a future where AI serves public health goals. For newcomers, it offers an accessible introduction; for experienced professionals, it aims to broaden perspectives and uncover new opportunities.

Starting with the fundamentals of what AI really is (beyond the hype), it explores diverse approaches, from traditional machine learning to generative models, and how they are transforming (or could transform) clinical care, public health, scientific research and operational efficiency. It reveals both promise and pitfalls: improved outcomes and efficiency on the one hand, and risks such as bias, safety concerns and governance challenges on the other. Written for readers with varying technical backgrounds, it aims to deliver clear insights into ethical use, trust-building and regulatory frameworks, making it essential reading for health professionals, managers, policy-makers and researchers." *Source: European Observatory on Health Systems and Policies*

Making Rare Diseases Count: How Better Data Can Unlock a Multitrillion-Dollar Opportunity

"Rare diseases affect more than 300 million people worldwide and remain one of the largest areas of unmet need in global health. They have also catalysed innovations with far-reaching impact, including diagnostic platforms, treatments, digital health tools and data-driven care models. Strengthening rare disease data systems represents the next frontier by creating new infrastructure that enables scientific progress and improves coordination and efficiency across health systems, both for rare diseases and for other more common conditions such as heart disease, cancer and broader metabolic health disorders.

Making Rare Diseases Count: How Better Data Can Unlock a Multitrillion-Dollar Opportunity outlines a practical roadmap for improving how data is collected, shared and analysed. The paper provides policy-ready guidance to help governments, healthcare leaders, employers, investors, payers and the health industry to translate the growing recognition of rare diseases into coordinated action."

Source: World Economic Forum

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Health Policy

Dealing with the challenges in urgent and emergency care: What are the policy options?

"Urgent and emergency care is a key part of the health care system. These services are highly visible to the public and their performance is critical to delivering high-quality outcomes as well as maintaining public support and confidence in the health care system. Urgent care is the care provided for illnesses or injuries that require prompt attention but are typically not sufficiently serious to need more specialist emergency care services. Emergency care is time-critical and more serious. Urgent and emergency care covers a continuum of services from the community to health centres to primary care clinics to hospitals, and integrated planning and implementation of these services can lead to greater efficiency and effectiveness, delivering economies of scope and scale across disease- and population-specific programmes. " *Source: European Observatory on Health Systems and Policies*

Strengthening Brain Health: Policy Recommendations to Tackle the Rising Burden of Neurological Diseases

"Brain health depends on genetic, lifestyle, environmental and social determinants, and its decline reduces independence and quality of life, requiring a coordinated EU-level response. Neurological diseases are one of Europe's most urgent and rapidly expanding health, social and economic challenges. As the population ages, neurodegenerative conditions, such as dementia (including Alzheimer's disease), Parkinson's disease and ALS, will rise sharply, increasing pressure on healthcare systems, social support structures and informal caregivers. The overall economic burden of these neurological disorders in Europe was estimated at EUR 368 billion per year in 2019. More than half of these costs are attributable to informal care, reflecting the significant responsibilities placed on families and communities. An ambitious coordinated, European health plan dedicated to neurological health linking prevention, early diagnosis, research, innovation to enable effective therapies, care and social support is essential to mitigate the growing impact of neurodegenerative diseases and strengthen Europe's long-term resilience and well-being." *Source: European Parliament Think Tank*

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Pharmacy and Medicines

[The selection and use of essential medicines: report of the WHO Expert Committee on Selection and Use of Essential Medicines, 2025](#)

"The 25th meeting of the WHO Expert Committee on Selection and Use of Essential Medicines was held in Geneva, Switzerland, from 5 to 9 May 2025. The Committee considered a total of 59 applications, including 31 proposals for the addition of new medicines or medicine classes, 10 proposals for new indications for currently listed medicines, three proposals for the addition of new formulations of currently listed medicines, one proposal for the removal of a currently listed medicine, and 14 other applications relevant to the Model Lists and the WHO AWaRe classification of antibiotics. This report summarizes the evidence considered and the recommendations made by the Expert Committee in updating the WHO Model Lists of Essential Medicines." *Source: World Health Organization*

[Strengthening medicine procurement and supply chain management for neglected tropical diseases in 2025: achievements, challenges and way forward](#)

"In 2025, global efforts to control and eliminate neglected tropical diseases (NTDs) through large-scale medicine donation and procurement entered a critical phase. Since 2011, more than 31 billion tablets and vials have been distributed worldwide, including almost 1.5 billion in 2025 alone. The unprecedented scale of these operations has expanded the logistical, financial and technical complexity of NTD medicine management. This report provides an overview of strategic objectives, key achievements, operational challenges and emerging priorities in NTD medicine procurement and supply chain management. It highlights evolving mechanisms led by WHO and its partners to strengthen national ownership, enhance forecasting accuracy, integrate digital systems and mitigate supply risks, in alignment with the 2030 NTD road map targets." *Source: World Health Organization*

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Cancer

[Delivering High Value Cancer Care: European Cancer Inequalities Registry Analytical Report](#)

"The global burden of cancer continues to rise, with an increasing number of cancer cases over the past two decades – particularly among younger women – placing sustained pressure on healthcare services and affecting well-being and economic outcomes. This report provides new, cross-country evidence and policy insights on how to deliver cancer care that ensures value for patients and healthcare systems. Drawing on quantitative and qualitative analyses – including new internationally comparable indicators and a policy survey – the report examines three pressing priorities to deliver high value cancer care: faster access to care, evidence-based and efficient care that ensures the best health outcomes; and people-centred approaches that reflect individuals' needs and preferences." *Source: OECD*

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Workforce

[Flexible Learning Pathways into Healthcare Occupations](#)

"Persistent skill shortages in healthcare are leaving many care needs unmet. This report examines how flexible training and well-defined career pathways can help adults transition into entry-level healthcare roles. Produced jointly by the OECD and the ILO, it examines practices from high, middle and low-income countries and highlights innovative approaches such as modular learning, online education, recognition of prior learning and strong partnerships between training providers and healthcare employers. The report shows that despite the fact that many occupations in the health and care sector are regulated, there is a significant opportunity to take advantage of flexibility in

adult learning opportunities and facilitate the entry of a broader range of candidates to the health and care sector. By making adult learning more accessible and responsive, countries can better meet growing healthcare demands, improve care quality and create decent employment opportunities." *Source: OECD*

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Environment and Health

[Air quality monitoring for enhanced understanding of health impacts and beyond](#)

"Monitoring air quality (for example collecting continuous and quality data) is integral and critical to detecting air pollutants and to ensuring information sharing with the public, policy-makers, and regulatory compliance. Air quality monitoring is also one of the first and necessary steps for quantifying the health impacts from air pollution and monitoring progress towards reducing air pollution. The main pollutants (e.g. particulate matter [PM], nitrogen dioxide, and tropospheric ozone) should be monitored continuously and consistently. Sharing these high-quality and standardized data publicly is essential to raise awareness and encourage decision-makers to take action. Air quality monitoring for enhanced understanding of health impacts and beyond highlights the importance of monitoring air quality data to assess its health impacts. The technical brief summarizes the different types of air quality data that can be used to assess health impacts, barriers and enablers to using this data and the different stakeholders and sectors that contribute to monitoring the health impacts of air pollution." *Source: World Health Organization*

[WHO water, sanitation, hygiene and waste strategy 2026-2035](#)

"Unsafe water, sanitation and hygiene (WASH) still drive at least 1.4 million preventable deaths each year, while climate shocks, outbreaks, migration and aging infrastructure present additional challenges. Despite gains since 2015, 1 in 4 – or 2.1 billion people globally – still lack access to safely managed drinking water, including 106 million who drink directly from untreated surface sources; 3.4 billion people still lack safely managed sanitation, including 354 million who practice open defecation.

The WHO water, sanitation, hygiene and waste strategy 2026–2035 offers an opportunity to strengthen WHO's contribution to improving health through WASH actions within and beyond WHO; to reinforce and strengthen WHO's relationship with WASH partners; to mobilize investment; to strengthen alignment with the Sustainable Development Goals (SDGs), the UN system-wide strategy on water and sanitation, and relevant regional policy frameworks; and to build on synergies between the SDGs, health and WASH." *Source: World Health Organization*

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Primary and Community Care

[Mainstreaming antimicrobial resistance into primary health care: international workshop report](#)

"The Asia-Europe Foundation (ASEF) and the World Health Organization (WHO) organized an international workshop from 18 to 20 March 2025 in Bangkok, Thailand, in close collaboration with the Government of Thailand on mainstreaming antimicrobial resistance (AMR) into primary health care (PHC), to discuss the growing challenge of AMR and targeting core AMR interventions to strengthen PHC-oriented health systems. Funding for the workshop was kindly provided by the Government of Japan through ASEF." *Source: World Health Organization*

[Not my priority: how the public sees social care \(and what can be done about it\)](#)

"Without adult social care support, a full life would be impossible for many people. It helps people carry out basic tasks such as washing, dressing and eating but also, for some people, allows them to go out in their communities, meet friends and families, or go to work. Yet, issues with access to support, quality, the workforce, local variation and market instability has led to wide acknowledgement that reform is essential. So why has this reform not happened?

In this report we explore why public opinion and attitudes towards social care are a key barrier to change. Why is it that social care rarely figures as a key issue during elections, and why is it all too easy for politicians to duck reform and yet not be penalised at the ballot box? How can it be that satisfaction with social care is lower than any NHS service and yet there is little-to-no clamour for change from the electorate?" *Source: The King's Fund*

[Unpaid care: the realities of caring in the UK](#)

"Caring is often rewarding but without support to balance it with other responsibilities, it can come at a personal and financial cost. Overall, there is little state support available to unpaid carers in the UK and limited national policy changes to improve this in recent years. This lack of support results in many carers feeling isolated. Around a third (37%) of those surveyed by Carers UK said they felt overwhelmed due to insufficient support from social care services, with a similar proportion citing this was due to inadequate support from health services. This analysis builds on our previous work looking at support for unpaid carers, and research funded by the Health Foundation on balancing work and caring and the way we talk about care. Here, we look at how caring varies across groups and intersects with work and health, as well as unpaid carers' support needs and access to support. To help us understand whether caring is changing as the UK's population and policy changes, we use data from 2018–20 to 2023–25 from the Understanding Society survey, a nationally representative survey that tracks UK households over time." *Source: The Health Foundation*

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