



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

[How Should We Measure and Interpret Racial and Ethnic Disparities in Healthcare?](#)

"Researchers offer key recommendations for defining racial and ethnic disparities in healthcare, including having a clear description of the health disparity of interest, providing a conceptual framework, discussing data limitations, investigating contributing factors, and calculating the magnitude of the disparity defined, to help address disparities, guide and evaluate interventions, and set equity policy agendas." *Source: Robert Wood Johnson Foundation (US)*

[Indigenous Nation Building and the Political Determinants of Health and Wellbeing Discussion Paper](#)

“This discussion paper sets a framework for Aboriginal and Torres Strait Islander peoples to take control of their health and wellbeing through nation building. The key finding in the paper outlines that Indigenous nation building enables healthy futures for Aboriginal and Torres Strait Islander peoples because it comprehensively enacts self-determination and so addresses the broad social, cultural and political determinants of health and wellbeing.” *Source: Lowitja Institute (Australia)*

[Global report on health equity for persons with disabilities](#)

“An estimated 1.3 billion people – or 16% of global population worldwide – experience a significant disability today. Persons with disabilities have the right to the highest attainable standard of health as those without disabilities. However, the WHO Global report on health equity for persons with disabilities demonstrates that while some progress has been made in recent years, the world is still far from realizing this right for many persons with disabilities who continue to die earlier, have poorer health, and experience more limitations in everyday functioning than others. These poor health outcomes are due to unfair conditions faced by persons with disabilities in all facets of life, including in the health system itself.” *Source: World Health Organization*

[Digital apps and reducing ethnic health inequalities](#)

“This report focuses on the role digital can play in understanding and addressing ethnic health inequalities.” *Source: TPX Impact (UK)*

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Mental Health & Wellbeing

[Mental Health and the Cost-of-Living Crisis: Another pandemic in the making?](#)

“This policy briefing paper provides an overview of the current and likely effects of the so-called ‘Cost-of-Living Crisis’ on mental health.” *Source: Mental Health Foundation (UK)*

[Turning the tide on depression: A vision that starts with Australia’s youth](#)

[The authors] “look at how childhood, adolescence, and young adulthood have changed over the past two decades, and how social factors may be increasing young people’s risks for depression. [They] also examine the unique experiences of depression in young First Nations people.” *Source: Black Dog Institute (Australia)*

[What factors are associated with self-harm in childhood? Learning from review-level evidence](#)

“From a public mental health perspective, the evidence synthesised in this review suggests the need for self-harm prevention policies focused on supporting healthy familial and peer relationships for children. There is also a need to take action to overcome sexual diversity discrimination.” *Source: Public Health Scotland*

[Advancing Collaborative Mental Health Care in Primary Care Settings](#)

“This revised framework outlined in this report is designed to assist in organizing and delivering primary care mental health and addictions services.” *Source: Mental Health Commission of Canada*

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Public Health

['Ngā Kawekawe o Mate Korona | Impacts of COVID-19 in Aotearoa'](#)

“The aim was to investigate the short and longer-term impacts of the virus on the health and wellbeing of individuals, whānau and families, focusing particularly on key subgroups: Māori; Pacific Peoples; people with disabilities (including Long COVID); and people who developed COVID-19 through their employment.” *Source: Te Hikuwai Rangahau Hauora | Health Services Research Centre*

[“I feel it’s unsafe to walk”: Impacts of alcohol supply on public space in eight neighbourhoods, and residents’ input to alcohol licensing decision](#)

““I feel it's unsafe to walk”: Impacts of alcohol supply on public space in eight neighbourhoods, and residents’ input to alcohol licensing decisions is about the effects of alcohol in public spaces where we live. It focuses on bottle stores in residential areas around Aotearoa, and the ways people have tried to appeal against them.” *Source: SHORE & Whariki Research Centre (New Zealand)*

[The future of food: opportunities to improve health through reformulation](#)

“Our report uncovers the food categories that could be promising targets for reformulation and identifies the main barriers and opportunities of reformulation for industry and policymakers. We conducted mixed methods research that included interviews with industry and public health stakeholders alongside analysis of in-home food and drink purchases for over 29,000 households in Great Britain.” *Source: Nesta (UK)*

[Putting health at the heart of convenience](#)

The Good Food Wholesale and Retail Pilot was set up to improve access to healthier food options in the London Borough of Southwark, by increasing the range of healthier products sold in the borough’s local convenience stores. This report shares insights gathered during pilot activity which ran from January 2021 to April 2022, building on lessons learned from a 2020 small-scale pilot. The project brought together food industry retailers, wholesalers and suppliers. *Source: Impact on Urban Health (UK)*

[Countdown to 2023: WHO report on global trans-fat elimination 2022](#)

“This fourth annual report monitors global progress towards the 2023 target for global elimination of industrially produced trans-fatty acids (TFA), highlighting achievements during the past year (October 2021 – September 2022). Countries are responding to the World Health Organization (WHO) call to action by putting into place best-practice TFA policies. Mandatory TFA policies are currently in effect for 3.4 billion people in 60 countries (43% of the world population); of these, 43 countries have best-practice policies in effect, covering 2.8 billion people (36% of the world population).” *Source: World Health Organization*

[Smoke without fire: a new vision for vaping policy in the UK](#)

[This report] “sets out proposals on ways of encouraging smokers to switch to e-cigarettes without introducing non-smokers to nicotine.” *Source: Demos (UK)*

[Bridging the gap between ethics and decision-making in pandemics: report of the WHO Pandemic Ethics and Policy Summit](#)

“This document presents a summary report of the WHO Pandemic Ethics and Policy Summit organized by the World Health Organization (WHO).” *Source: World Health Organization*

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Long-Term Conditions

[Diabetes among Indigenous Peoples](#)

Indigenous Peoples account for 6.2% of the global population, with over 476 million Indigenous People in 90 countries and more than 5,000 distinct groups across the globe. Diabetes disproportionately impacts Indigenous populations. This report provides a summary of the prevalence of type 2 diabetes among Indigenous Peoples across all age groups. *Source: International Diabetes Federation*

[Diabetes and COVID-19](#)

“A systematic review was performed in 2022 to assess the likelihood of adverse COVID-19 outcomes in relation to glycaemic control, blood glucose levels on admission to hospital, and diabetes subtype.” *Source: International Diabetes Federation*

[All hands on deck: Co-developing the first international survey of people living with chronic conditions](#)

“The OECD's Patient-Reported Indicator Surveys (PaRIS) initiative aims to measure outcomes and experiences of healthcare as part of an effort to improve the value of health system investments. The PaRIS survey, a survey of people living with chronic conditions, is currently being implemented in twenty countries. The PaRIS survey has been developed together with government officials, patients, providers, and researchers. However, the extent of stakeholder involvement varies between countries. This paper reports on the stakeholder engagement in design, development and implementation of the PaRIS survey Field Trial in seventeen countries. Engagement strategies were analysed by target group (patients, providers, or other stakeholders), and engagement level (co-designing, involving, consulting, and informing). The results provide valuable lessons for the implementation of the full PaRIS survey in 2023 and illustrate how stakeholders could be more actively engaged in health services research and policymaking.” *Source: OECD*

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Health Systems, Costs, & Reforms

[Strategies to reduce waiting times for elective care](#)

[The authors] “explored of the approaches that have been used in England and elsewhere to reduce waits for elective care through an extensive review of published literature. Spanning the past 20 years across 15 countries, the literature afforded an enhanced understanding of the underlying features and overarching principles of waiting list and waiting time management as well as the specific approaches that have been used to reduce waiting times in a wide range of contexts.” *Source: King's Fund (UK)*

[Health in All Policies Training: Inventory, Analysis, and Avenues for Reflection](#)

“This document aims to provide an overview of existing Health in All Policies (HiAP) training and suggests avenues for reflection towards improvement, notably from a Canadian perspective. The report provides a brief quantitative analysis as well as a detailed qualitative analysis of many dimensions present in the body of trainings. The report will prove useful to public health or other sector actor interested by HiAP, and particularly, in the improvement of competencies and knowledge related to this approach. The document could notably contribute to the development of new HiAP training.” *Source: National Collaborating Centre for Healthy Public Policy (Canada)*

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Family Violence

[Improving the collection and use of administrative data on violence against women: global technical guidance](#)

“Countries are increasingly interested in using violence against women (VAW) administrative data to understand, prevent and respond to VAW and are seeking direction and support about how to collect and use such data effectively and ethically. This global technical guidance was developed to identify key steps and recommendations for intersectoral (e.g., national VAW commissions, statistical bodies) or sectoral (e.g., justice, police, health, social services) coordinating bodies to consider when working to improve the collection and use of VAW administrative data for statistical purposes at the subnational or national level.” *Source: World Health Organization*

[“I just felt like I was running around in a circle”: Listening to the voices of victims and perpetrators to transform responses to intimate partner violence](#)

“The findings from the research identified key points in the help-seeking journey, including that both victims and survivors and those who use violence seek help from friends and family before accessing professional services. The study calls for further education and training to build community capacity and equip friends and family with the resources to effectively respond and refer. The researchers also specifically recommend a focus on building community capacity to engage men.” *Source: ANROWS (Australia)*

[Voices from the frontline: Qualitative perspectives of the workforce on transforming responses to domestic, family and sexual violence](#)

“The project investigates the perspectives of victims and survivors, perpetrators and service providers across victims’ and survivors’ and perpetrators’ help-seeking journeys. The focus of this report is to provide insight into the workforce’s perspectives of existing responses to victims and perpetrators, and what is required for effective and sustainable responses and interventions. In the wake of the new National Plan to End Violence Against Women and Children 2022–2032 the findings of this report provide crucial insights to improving responses and interventions and enabling pathways towards recovery and healing.” *Source: ANROWS (Australia)*

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Workforce

[Strengthening the collection, analysis and use of health workforce data and information: a handbook](#)

“This handbook is an essential resource, which brings into focus key advances, challenges and lessons learned in strengthening human resources for health data and evidence as a strategic objective of implementing the Global Strategy on Human Resources for Health: Workforce 2030.”

Source: World Health Organization

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Health of Older People

[Health and place: How levelling up health can keep older workers working](#)

As part of its levelling up agenda, the UK Government set itself an ambitious target to add five additional healthy years to the average UK lifespan by 2035. It has also set a target of narrowing the gap in Healthy Life Expectancy (HLE)⁸ between the ‘healthiest’ and ‘unhealthiest’ local authority areas by 2030. It’s unclear how the Government intends to achieve these two goals, especially given the recent decision to abandon the promised white paper on health disparities. In addition, the fallout from the COVID-19 pandemic and the current cost of living crisis are likely to widen existing inequalities. If the UK had achieved the current levelling up agenda goal of reducing the HLE gap by five years between 2001 and 2011, older people’s participation in the labour market would have increased by 3.7% between 2001 and 2011. This is equivalent to 250,000 additional older people in paid employment. *Source: Health Foundation (UK)*

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