



Ministry of Health Library

Knowledge for health

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

Issue 19, 2015, March

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.

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Public & Global Health

[Tackling a global health crisis: initial steps](#)

"The Review has today set out its initial recommendations in the paper Tackling a global health crisis: Initial steps. We use this paper to set out our assessment of the international AMR research funding landscape, and make our first recommendations for global action to address the challenges of rising drug resistance. This includes the establishment of a global AMR Innovation Fund; steps to help maintain the effectiveness of existing antibiotics; and action to address an emerging skills shortage in this crucial field of research." *Source: Review on Antimicrobial Resistance*

[Health and wellbeing: a guide to community-centred approaches](#)

“This guide outlines a ‘family of approaches’ for evidence-based community-centred approaches to health and wellbeing.” *Source: Public Health England*

[Australian burden of disease study: fatal burden of disease 2010](#)

This is the first report in the Australian Burden of Disease Study series. It provides estimates of fatal burden for 2010 showing the contribution of each disease group by age and sex. The three leading disease groups were Cancer (35%), Cardiovascular diseases (23%) and Injuries (13%), and these contributed more than 70% of total fatal burden. *Source: Australian Institute of Health and Welfare*

[Recommendations for Accelerating the Development of Ebola Vaccines](#)

“The report represents careful, in-depth synthesis and advice from an international panel of 26 experts in public health, medicine, bioethics, pharmaceutical manufacturing, and humanitarian relief convened by the Wellcome Trust and CIDRAP. The recommendations will help guide global efforts to expedite the availability of effective and safe Ebola vaccines to help bring an end to the current epidemic in West Africa, in addition to providing a framework to ensure the world is better prepared for inevitable future outbreaks of Ebola and other deadly infectious diseases.” *Source: Center for Infectious Diseases Research and Policy*

[Information paper: evidence on wind farms and human health](#)

“This Information Paper provides Australians with a summary of the evidence on possible health effects of wind farms in humans and explains how NHMRC developed its summary based on the findings of independent reviews of the evidence. It is intended for use by any person or group interested in wind farms.” *Source: National Health and Medical Research Council*

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Health & Communication

[Communicating Health Messages: A Framework To Increase The Effectiveness of Health Communication Globally](#)

“To help guide communicators’ choices, this paper provides a framework for effective communication and suggests three policy-related enablers to improve health communication and its associated effects.” *Source: World Innovation Summit for Health*

[Social Media in Public Health](#)

Before public health units adopt social media, there are questions to consider, including What is the effectiveness of social media for public health messaging? What is the impact of social media on different populations? and Does the use of social media address health inequalities? Based on a systematic review done in 2010 and updated by the author, this briefing note summarizes the evidence on these questions. *Site: National Collaborating Centre for Healthy Public Policy*

[Building Health Literate Organizations: A Guidebook to Achieving Organizational Change](#)

“There are many tools to help you engage in organizational change to become a health literate health care organization. The challenge is to use them effectively and reliably, yet

choose your own path—one that works for your organization. This guidebook includes background, resources, examples, and lessons learned to help you build a health literate health care organization.” *Site: Unity Point*

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Child, Youth, & Maternal Health

Improving young people’s health and wellbeing: A framework for public health

This framework “highlights the importance of ensuring that every young person has the right level of support to help them to maximise their full potential. It recognises the crucial role that parents, carers and families have in providing supportive, nurturing environments. And it draws on the evidence which shows that when local services work together to meet needs in a holistic way, they are more effective.” *Source: Public Health England*

Putting Mothers And Newborns First: Integrating Policies, Programs and Services

“This policy briefing aims to build a case for integrating policies, programs and services in ways that improve the quality and accessibility of care for mothers and newborns. Service integration is a key strategy to sustain the current momentum. We examine the social and health burdens caused by ineffective care, the opportunities to provide more integrated care, and the actions that various key players can take to achieve a common goal: improving the health and wellbeing of all women and newborns.” *Source: World Innovation Summit for Health*

The state of play in Australian place-based approaches for children

Increasingly, governments, philanthropy, practitioners and communities in Australia have recognised place-based approaches as a means to tackle disadvantage and address the complex problems faced by children and families in today’s society. However, there is a perceived lack of cohesion in describing place-based approaches as well as limited coordination across policy, practice and research in designing, executing and supporting place-based initiatives. *Site: Centre for Community Child Health*

The evidence: what we know about place-based approaches to support children’s wellbeing

“The evidence summary begins by considering the importance of place. This leads to a discussion of why different approaches to services and service delivery are required, including a brief description of recent changes in the conditions in which families are raising young children and the complex social problems we face. Consideration is given to defining place-based approaches and their evolution in Australia, citing examples from the United States (US), United Kingdom (UK), Canada and Australia.” *Source: Centre for Community Child Health*

The hidden harm: alcohol’s impact on children and families

“The hidden harm draws on two national surveys of alcohol’s harm to others, service system data and qualitative interviews with families, providing for the first time a detailed and valuable insight into the magnitude of the problem and the large numbers of Australian children who are being put at risk.” *Source: Foundation for Alcohol Research and Education*

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Integration

[Population health systems: Going beyond integrated care](#)

“This paper aims to challenge those involved in integrated care and public health to ‘join up the dots’, seeing integrated care as part of a broader shift away from fragmentation towards an approach focused on improving population health.” *Source: King’s Fund*

[Redesigning health and social care: challenges and opportunities from an IT and digital perspective](#)

“Better integrated ways of working and deploying resources across health and social care, that will make savings but also improve the quality of care and the experience of service users, depend to a significant extent on the application and take-up of IT and digital technologies.” *Source: SOCITM*

[A Problem Shared? Essays on the integration of health and social care](#)

“This essay collection explores how we can evolve a health and social care system that captures and responds to the needs of a patient in the round and can sustain itself into the future.” *Source: Social Market Foundation*

[Promoting better integration of health information systems: best practices and challenges](#)

“The results from the interviews stress the need (i) for ongoing work on some “basics”, such as data availability and quality, inventories of data and registries, standardization, legislation, physical infrastructure and workforce capacities; (ii) to continue with the work on more “concept-driven” indicator sets; (iii) to define what better integration means and to demonstrate concrete benefits of integration; (iv) to build leadership for capacity building in further integration of HISs; and (v) for a further international exchange about ongoing activities in this area.” *Source: WHO*

[Improving practice in safeguarding at the interface between hospital services and children’s social care: a mixed-methods case study](#)

“This research seeks to better understand the processes involved in correctly identifying children at risk when they or their families present at hospitals. It examines in detail the way information is used and how it flows between different organisations. It evaluates methods to support safe decision-making using simple and sustainable tools, designed by clinicians themselves, with help from families who have experienced the system.” *Source: National Institute for Health Research*

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Nutrition, Physical Activity, & Obesity

[Wider economic and social costs of obesity to New Zealand](#)

This report identifies the broad range of social and economic costs of obesity for New Zealand, excluding the direct health costs relating to obesity. *Source: SuPERU*

[How effective are interventions at reducing socioeconomic inequalities in obesity among children and adults? Two systematic reviews](#)

“This evidence suggested that interventions that aim to prevent, reduce or manage obesity do not increase inequalities and that some interventions reduced the social gradient in obesity or decreased obesity among more deprived groups. For children, school-delivered and environmental interventions, as well as interventions that use community empowerment mechanisms, were potentially effective in reducing obesity in more deprived areas. For adults, primary care-delivered tailored weight loss programmes and community-based weight loss interventions were the most effective, although only in the short term and mainly for low-income women.” *Source: National Institute for Health Research*

[Exercise: The miracle cure and the role of the doctor in promoting it](#)

“This report calls on doctors to promote the benefits of regular physical activity to their patients and to communities in their wider roles as ‘advocates for health’. We have some tips, but the message is simple. Exercise is a miracle cure too often overlooked by doctors and the people they care for. This report sets out what doctors can do on a one-to-one basis and in a broader way with communities and organisations, including their own as many doctors are themselves employers.” *Source: Academy of Royal Medical Colleges*

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Health of Older People

[A Call To Action: The Global Response To Dementia Through Policy Innovation](#)

“This report is intended to provide an overview of the global dementia landscape and to propose a way forward to an improved future, where accessible care and treatment will contribute to reducing the global burden of dementia.” *Source: World Innovation Summit for Health*

[Living and dying with dementia in Wales](#)

“We hope that this report makes a contribution to how we address the challenge of improving care and support available to people with dementia at the end of life as well as their families. By focusing on the barriers we can begin to improve that care and ensure all those who might benefit from it receive it.” *Source: Marie Curie Cancer Care*

[Living and dying with dementia in Scotland: Barriers to care](#)

“Progress has been made with the Scottish Government’s two national dementia strategies, standards of care, post diagnostic support and a commitment to further work. However, more still needs to be done to ensure those with dementia at the end of life get the care that they need. We hope that this report makes a contribution to how we address the challenge of improving care and support available to people with dementia at the end of life as well as their families. By focusing on the barriers we can begin to improve that care and ensure all those who might benefit from it receive it.” *Source: Marie Curie Cancer Care*

[Public Reporting in health and long-term care to facilitate provider choice](#)

“The policy summary is targeted at policy-makers, care providers and information developers. The evidence will be helpful for them in creating reports more likely to be used and valued by patients and users when choosing health or care providers.” *Source: European Observatory on Health Systems and Policies*

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Prevention & Long-Term Conditions

[Primary health care and preventive care](#)

“Preventive care refers to interventions which aim to prevent progression of a condition. They may be applied at individual or population levels and at various stages of disease development. For the primary health care (PHC) sector, preventive care is a priority and a challenge. This RESEARCH ROUNDup reviews preventive care in the PHC setting including consideration of time, resources and strategies in an Australian context.” *Source: Primary Health Care Research & Information Service*

[Rising To The Challenge: Preventing and Managing Type 2 Diabetes](#)

“Our aim in this report is to help policymakers rise to the challenge. We describe three policy goals that together will reduce incidence of diabetes through behavior change, curb complications with better disease management and support those at risk through screening and interventions. Each policy goal is supported by case studies of innovative approaches, providing policymakers with practical tools. *Source: World Innovation Summit for Health*

[Assessing chronic disease management in European health systems: concepts and approaches](#)

Assessing chronic disease management in European health systems presents the current state of thinking across Europe on this matter. Exploring experiences in 12 European countries, it identifies a range of approaches and new models for chronic care and evaluates their innovative potential and likelihood of success. *Source: European Observatory on Health Systems and Policies*

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Mental Health

[Healthy Young Minds: Transforming The Mental Health Of Children](#)

“Mental health problems need to be tackled when they first appear. They need to be recognized by parents, doctors and teachers, and our whole society needs to become much more open and matter-of-fact about what is a common part of life. Our schools need to adopt children’s wellbeing as one of their major objectives – both in their ethos and their teaching. Life skills can and should be taught as professionally as mathematics or literature. There are solutions to these problems. This report, written with outstanding support from the Forum members, sets out major changes which need to be made worldwide.” *Source: World Innovation Summit for Health*

[Investing in children’s mental health](#)

“This report summarises the available evidence on the effectiveness and value for money of interventions for child and adolescent mental health problems.” *Source: Centre for Mental Health*

[Lessons for life: the experiences of people who attempt suicide](#)

“It is crucial that we better understand what helps or hinders people who attempt suicide in order to reduce the suicide rate. Although the field of suicidology is expanding, research and suicide prevention initiatives to date have focused predominantly on expert opinion

(academic and clinical) and rely heavily on quantitative studies or data from other countries. There is a gap in the current literature regarding the exploration of the lived experience of Australians who attempt suicide.” *Source: SANE Australia*

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Cancer & End of Life Care

[Delivering Affordable Cancer Care: A Value Challenge to Health Systems](#)

“Issues of affordability are not unique to cancer. Cancer, however, often strikes unpredictably and with devastating consequences, and treatment and testing, where available, is expensive and can be required over many years. In many countries, it is one of the highest areas of health spending, and for many people, a diagnosis of cancer leads to personal bankruptcy. Addressing this problem means navigating through great complexity across a variety of health settings. Affordability is inextricably linked to value, but also tied to issues of quality, efficiency, equity and accessibility.” *Source: World Innovation Summit for Health*

[Improving the Delivery of Complex Cancer Surgeries in Canada](#)

“This brief was prepared to support the discussions of three citizen panels about improving the delivery of complex cancer surgeries in Canada. The input from the citizen panels will be widely shared in order to inform the efforts of policymakers, managers and professional leaders who make decisions about our health systems.” *Source: McMaster Health Forum*

[Delivering High-Quality Cancer Care: Charting a New Course for a System in Crisis](#)

“Rising costs are making cancer care less affordable for patients and their families and are creating disparities in patients' access to high-quality cancer care. There also are growing shortages of health professionals skilled in providing cancer care, and the number of adults age 65 and older--the group most susceptible to cancer--is expected to double by 2030, contributing to a 45 percent increase in the number of people developing cancer. The current care delivery system is poorly prepared to address the care needs of this population, which are complex due to altered physiology, functional and cognitive impairment, multiple coexisting diseases, increased side effects from treatment, and greater need for social support.” *Source: Institute of Medicine – sign up for free account to download*

[Choice in end of life care](#)

“This report identifies the issues people approaching the end of life are currently facing and offers a blueprint for how greater choice in end of life care can be achieved.” *Source: Choice in End of Life Care Programme Board*

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Health Systems, Costs, & Reform

[International Profiles of Health Care Systems, 2014: Australia, Canada, Denmark, England, France, Germany, Italy, Japan, The Netherlands, New Zealand, Norway, Singapore, Sweden, Switzerland, and the United States](#)

“This publication presents overviews of the health care systems of Australia, Canada, Denmark, England, France, Germany, Italy, Japan, the Netherlands, New Zealand, Norway,

Singapore, Sweden, Switzerland, and the United States. Each overview covers health insurance, public and private financing, health system organization and governance, health care quality and coordination, disparities, efficiency and integration, use of information technology and evidence-based practice, cost containment, and recent reforms and innovations.” *Source: Commonwealth Fund*

[The Future is Now: The Innovations of Today Point to Better Health Care Tomorrow](#)

“In 2012, we set up Time to Think Differently, an ambitious programme to generate new thinking about innovative ways of delivering high-quality care. Now we want to share examples of an exciting future in health care – a future that already exists in some places.”
Source: King’s Fund

[Culture change in the NHS: applying the lessons of the Francis Inquiries](#)

“This document sets out the progress that has been made in applying the lessons learned from the tragic and inexcusable failings at Mid Staffordshire NHS Foundation Trust.” *Source: UK Department of Health*

[Recommendations to Achieve a More Transparent Health Care System for Consumers](#)

“As policy makers, researchers and field experts increasingly consider health care data transparency as a way to drive overall health system improvement, it is necessary to start thinking about how to render health care information more meaningful for consumers.”
Source: Brookings Institute

[Rationing in healthcare](#)

“Rationing healthcare in some form is inevitable, even in wealthy countries, because resources are scarce and demand for healthcare is always likely to exceed supply. This means that decision-makers must make choices about which health programs and initiatives should receive public funding and which ones should not.” *Source: Deeble Institute*

[Implementing the NHS five year forward view: aligning policies with the plan](#)

“In writing the paper, our aim has been not only to describe why changes are required but also to make practical proposals on what should now be done to remove barriers to the development of new care models and how implementation of these models can be supported.” *Source: King’s Fund*

[Rationing in the NHS](#)

This briefing “provides an overview of the current difficulties in making decisions about rationing healthcare in England, and sets out some of the challenges faced by policy makers in the future.” *Source: Nuffield Trust*

[Delivering Universal Health Coverage: A Guide For Policymakers](#)

“This paper aims to synthesize the research evidence on Universal Health Care and present policy recommendations in an accessible way to politicians and policymakers who might not have a technical background in health. In doing so, we hope to make our contribution to improving the condition of people across the world who still lack access to quality healthcare services.” *Source: World Innovation Summit for Health*

[Partnerships and collaborative advantage in primary care reform](#)

“The evidence about mechanisms for effective partnerships is sound. However, outcomes in terms of individual or population health are difficult to measure because of the multiple factors involved in partnerships and in how better health outcomes are achieved. Because it is difficult to show causal relationships between partnerships and outcomes, it is critical that partnerships are established on evidence-based approaches to ensure that they produce desired results.” *Source: Deeble Institute*

Staff engagement: Six building blocks for harnessing the creativity and enthusiasm of NHS staff

“Developing engaged staff is a longterm endeavour and requires sustained effort throughout an organisation. But board members and other leaders can start making a tangible difference immediately, simply by focusing on the following six building blocks for success.”
Source: King’s Fund

Constructive comfort: accelerating change in the NHS

“This report asks how best to design national policy on the NHS to accelerate improvements to health care?” *Source: Health Foundation*

Joining the dots – making healthcare work better for the local economy

“This collection of papers provides a series of reflections on the critical relationship between health and the economy. Against a background of fiscal restraint, the debate has narrowed to one of the economics of healthcare and specifically whether the UK can afford the quality of health service that is demanded.” *Source: The Smith Institute*

Leadership and leadership development in health care: the evidence base

“The summary describes key messages from the review in relation to leadership at different levels of analysis: it includes a description of the leadership task and the most effective leadership behaviours at individual, team, board and national levels.” *Source: King’s Fund*

Building the foundations for improvement

“The report draws out some key lessons from the trusts’ improvement journeys which will be useful for organisations that are considering building improvement capability at scale. It also provides a useful checklist of points for organisations to consider before planning, designing and delivering an improvement capability building programme.” *Source: Health Foundation*

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Quality & Safety

Transforming Patient Safety: A Sector-Wide Systems Approach

“If healthcare is to significantly reduce patient harm, a holistic perspective is necessary to capture the requirements and needs related to the culture, workflow, and technology associated with caring for patients. In this paper, we relate the problem to other industries and how these industries have addressed safety. We identify the current gaps in today’s healthcare approach and describe the actions that can be taken, and the change in mental models that must be made by the global healthcare community, to continuously improve patient safety.” *Source: World Innovation Summit for Health*

[An independent review into creating an open and honest reporting culture in the NHS](#)

“The aim of the Review was to provide advice and recommendations to ensure that NHS staff in England feel it is safe to raise concerns, confident that they will be listened to and the concerns will be acted upon.” *Source: Freedom to Speak Up*

[Shining a light: Safer health care through transparency](#)

“This report offers sweeping recommendations to bring greater transparency in four domains: between clinicians and patients; among clinicians within an organization; between organizations; and between organizations and the public. It makes the case that true transparency will result in improved outcomes, fewer medical errors, more satisfied patients, and lowered costs of care.” *Source: National Patient Safety Foundation*

[Acute Coronary Standards Clinical Care Standard](#)

“The Acute Coronary Syndromes Clinical Care Standard aims to ensure that a patient with an acute coronary syndrome receives optimal treatment from the onset of symptoms through to discharge from hospital. This includes recognition of an acute coronary syndrome, rapid assessment, early management and early initiation of a tailored rehabilitation plan.” *Source: Australian Commission on Quality and Safety in Health Care*

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Inequalities

[Preventing and addressing intimate partner violence against migrant and ethnic minority women: the role of the health sector](#)

“This policy brief aims to provide input into the role of the health sector in preventing and addressing intimate partner violence among migrant women and those of ethnic minorities. It describes the scope of the problem, presenting key evidence, and makes recommendations for health policy and health systems, health facilities and health service providers.” *Source: WHO*

[Close the gap: progress and priorities report 2015](#)

“This report, released annually, presents the Close the Gap Campaign Steering Committee's assessment of the Australian Government's progress towards achieving Aboriginal and Torres Strait Islander health equality under the Closing the gap strategy.” *Source: Close the Gap Campaign Steering Committee*

[Fetal alcohol spectrum disorders: a review of interventions for prevention and management in Indigenous communities](#)

“This resource sheet defines fetal alcohol spectrum disorders (FASD) and provides currently available estimates of their prevalence in the overall Australian population and in the Indigenous population. It reviews the Australian and international literature published since 1990 on the effectiveness of programs that aim to prevent FASD or to alleviate its effects. Evidence on the effectiveness of Australian and Indigenous specific programs is also assessed, including those programs that have been developed and implemented in partnership with Indigenous Australians.” *Source: Australian Institute of Health and Welfare*

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