



Ministry of Health Library

Grey Matter

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

Issue 43, 2017, 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.

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

[Public Health](#)

[Integrated Care](#)

[Health of Older People](#)

[Child, Youth & Maternal Health](#)

[Social Care](#)

[Cancer](#)

[Primary Care](#)

[Inequalities](#)

[Mental Health](#)

[Health Systems, Costs & Reform](#)

[Nutrition, Physical Activity & Obesity](#)

[Oral Health](#)

[Health Information, Research & Technology](#)

[Health Workforce](#)

Public Health

[**Burning Injustice. Reducing tobacco-driven harm and inequality. Recommendations to the government, local authorities and the NHS**](#)

“Following an evidence session on Tuesday 10th January 2017, the All Party Parliamentary Group on Smoking and Health published the report *Burning Injustice – reducing tobacco driven harm and inequality*. The report provides recommendations to the government, local authorities and the NHS for effective action to further reduce smoking prevalence at a time of austerity.” *Source: All Party Parliamentary Group (APPG) on Smoking and Health; ASH*

[European Report on Alcohol Policy: A Review](#)

“European Alcohol Policy Alliance (Eurocare) together with partner organisations compiled existing data on alcohol policies across Europe. The aim was to present information in easy and accessible format. The report illustrates among others: trends in alcohol consumption, alcohol related harm, policies on availability and affordability, review of marketing restrictions, state of play on labelling and low risk drinking guidelines.” *Source: European Alcohol Policy Alliance*

[Housing and wellbeing: A rapid scoping review of reviews on the evidence on housing and its relationship to wellbeing](#)

“In response to the clear importance of housing to current wellbeing in the UK and the potential use of wellbeing evidence to support local level policy, housing was chosen as a topic for new research to be undertaken.” *Source: School for Health and Related Research (ScHARR)*

[Digital-first public health: Public Health England's digital strategy](#)

“This is a time of digital innovation. Technology is continually changing the way people live, interact, learn, play and work, offering new opportunities to change the way Public Health England (PHE) connects and interacts with people. Digital tools offer new ways to gather and analyse data, engage within PHE and with our stakeholders, and improve public health. This rapidly-changing world offers many opportunities but also some challenges to public health. It requires new thinking about public health provision models, data, governance, partnership and engagement.” *Source: Public Health England*

[Evolution of WHO air quality guidelines: Past, present, and future](#)

This document summarizes key WHO publications in the field of air quality and health since the 1950s, which led to the development of the series of WHO air quality guidelines. It outlines the evolution of the scientific evidence on the health effects of air pollution and of its interpretation, supporting policy and other decision-makers in setting outdoor and indoor air quality management strategies worldwide. Current WHO activities and their future directions in this field are also presented. *Source: WHO*

[The mission to stop Ebola: lessons for UN crisis response](#)

“The Ebola outbreak of 2014–2016 was a fast-moving, multidimensional emergency that presented unprecedented challenges for the multilateral system. In response to the outbreak in Guinea, Liberia, and Sierra Leone, the UN established the first-ever emergency health mission, the UN Mission for Ebola Emergency Response (UNMEER). UNMEER is an important case study of how the UN, with member-state support, can provide a whole-of-system response through coordination, partnership, and creative use of existing tools.” *Source: International Peace Institute*

[Back to top](#)

Health of Older People

[Falls in older people](#)

“This quality standard covers prevention of falls and assessment after a fall in older people (aged 65 and over) who are living in the community or staying in hospital. It describes high-quality care in priority areas for improvement.” *Source: National Institute for Health and Care Excellence (UK)*

[Physical Environments for Long-term Care: Ideas Worth Sharing](#)

“This book provides concrete examples of promising practices for physical environments in long-term residential care: everything from the location of a nursing home and the structure of gardens to the floor coverings, chair arms, and spaces for memorials. Physical environments are about more than setting the conditions for living and care provision. They also shape and reflect how care and life in nursing homes are understood. They construct limits and possibilities for residents, staff, families and volunteers.” *Source: Canadian Centre for Policy Alternatives*

[Dementia and Town Planning: Creating better environments for people living with dementia](#)

“This Royal Town Planning Institute (RTPI) practice advice publication highlights the vital role that town planning plays in dementia care in the UK, helping to reduce pressure on the NHS and controlling the costs for health and social care. It gives advice on how good planning can create better environments for people living with dementia, ensuring public spaces and buildings help them to live independently and well for longer.” *Source: Housing LIN*

[Economic Cost of Dementia in Australia 2016-2056](#)

“This report now shows that the cost of dementia in Australia in 2016 is \$14.25 billion, which equates to an average cost of \$35,550 per person with dementia. Not only does this report update the Access Economics 2002 estimate to 2016, it also projects likely future costs of dementia over the next 40 years. In doing so, it provides an overview of dementia in Australia, including increases in the prevalence and incidence of dementia over the next 40 years, describes some of the social and economic characteristics of people with dementia, and identifies the impact of dementia on mortality and burden of disease. The need for care and provision of care services is also reported on, including estimating the future need for both informal and formal carers in both the community and residential aged care sectors.” *Source: NATSEM*

[A summary of Age UK's Index of Wellbeing in Later Life](#)

“The Index of Wellbeing in Later Life provides a multi-faceted measure of older people's wellbeing across health, social, personal, financial and local environment domains. The report highlights the importance of maintaining meaningful engagement with the world for older people's wellbeing and recommends that work needs to be done in reducing barriers and increasing enablers to societal engagement for the UK's older people.” *Source: Age UK*

[Retirement on Hold: Supporting Older Carers](#)

“This report gives an insight into the experiences of older carers and highlights the need for greater support for these unpaid carers. Some of the key issues that are highlighted include

the health of older carers and the use of personal finances to support care needs.” *Source: Carers UK*

[Does living in a retirement village extend life expectancy? The case of Whiteley Village](#)

“Does living in a retirement village extend life expectancy? The case of Whiteley Village’ investigates the possible benefits of retirement village life with respect to life expectancy i.e. whether Villagers live longer on average than the general population, using Whiteley Village as a case study. This joint report is produced by the International Longevity Centre - UK and Cass Business School.” *Source: International Longevity Centre*

[The Brain and Social Connectedness: GCBH Recommendations on Social Engagement and Brain Health](#)

“Given the importance of the topic of social engagement for people of all cultures, the GCBH convened a meeting to discuss current scientific evidence underlying the question: how does social engagement affect our brain health as we age?” *Source: Global Council on Brain Health*

[Back to top](#)

Social Care

[Discussion paper 1: what is the evidence for the cost or cost-effectiveness of housing and support options for people with care or support needs?](#)

“The paper finds that limitations in quality and quantity mean that there is not sufficient, reliable evidence in which to inform housing and support decisions on the basis of cost. It concludes that there is therefore a strong argument that decisions about an individual’s housing and support should be based on other factors supported in current health and social care policy such as rights, inclusion, choice and control.” *Source: National Development Team for Inclusion*

[Back to top](#)

Primary Care

[What is social prescribing?](#)

“Social prescribing enables GPs, nurses and other primary care professionals to refer people to a range of local, non-clinical services. But does it work? And how does it fit in with wider health and care policy?” *Source: King’s Fund*

[Reducing hospital admissions by improving continuity of care in general practice](#)

“This briefing summarises research that analysed data from over 230,000 anonymised patient records for older people aged 62 - 82 years. They found there were fewer hospital admissions for certain conditions when patients saw the same GP more consistently. Patients seeing their usual GP two more times out of every 10 was associated with 6% fewer avoidable hospital admissions.” *Source: Health Foundation (UK)*

[Steps towards implementing self-care](#)

“This report aims to help London commissioners to take the first steps towards implementing social prescribing for their populations.” *Source: Healthy London Partnership*

[Back to top](#)

Mental Health

[Working together to address obesity in adult mental health secure units](#)

“This report presents a systematic review of the evidence on the prevalence and impact of obesity in secure settings, as well as investigating interventions that might prove effective. In addition, it draws out the implications for practice for commissioners and providers of adult mental health secure settings.” *Source: Public Health England*

[Implementing the Mental Health Forward View](#)

“The independent Mental Health Taskforce published its Five Year Forward View in February 2016 which set out the current state of mental health service provision in England and made recommendations in all service areas. NHS England accepted all the recommendations in the report for which it held responsibility and it was agreed with the Government that to support this transformation, mental health services will benefit from additional investment of £1bn per year by 2020/21.” *Source: NHS England*

[LGBT+ mental health](#)

“LGBT+ people are more likely to experience mental ill health than the wider population. Despite this, LGBT+ people are often overlooked in needs assessments and consequently in commissioning decisions – because of a lack of specific data and poor consultation.” *Source: London Assembly*

[The Other One in Four: How financial difficulty is neglected in mental health services](#)

“This report assesses the extent to which mental health services systematically recognise and respond to this relationship between financial difficulty and mental health problems. They explore where there are gaps in existing provision and where better coordination could improve services for people with mental health problems who are experiencing financial difficulty.” *Source: Money and Mental Health Policy Institute (UK)*

[Fatherhood: the impact of fathers on children's mental health](#)

“This briefing specifically explores the role of fathers and focuses on their positive potential to have an impact on the wellbeing of their children.” *Source: Centre for Mental Health (UK)*

[Preventing prison suicide: Staff perspectives](#)

“This briefing discusses the perspectives of staff working in prison as well as those reviewing clinical care post suicide. It focuses on staff views on what contributes to vulnerability and suicide risk, and makes recommendations based on staff members’ views and their examples of promising practice.” *Source: Centre for Mental Health (UK)*

[Back to top](#)

Nutrition, Physical Activity & Obesity

[Increasing Physical Activity and Decreasing Sedentary Behaviour in the Workplace](#)

This review “provides practitioners and decision-makers with information on choosing and implementing effective workplace physical activity and sedentary behaviour interventions.”

Source: Alberta Centre for Active Living

[Optimizing the Process for Establishing the Dietary Guidelines for Americans: The Selection Process](#)

This report assesses the process used to develop the guidelines; it does not evaluate the substance or use of the guidelines. As part of an overall, comprehensive review of the process to update the DGA, this first report seeks to discover how the advisory committee selection process can be improved to provide more transparency, eliminate bias, and include committee members with a range of viewpoints for the purpose of informing the 2020 cycle.

Source: National Academies Press

[Back to top](#)

Health Information, Research & Technology

[People-centred policy: through behavioural insights, design thinking and better use of data](#)

“The Policy Project collaborated with the Government Economics Network (GEN) committee to facilitate workshops following the 2016 GEN conference on ‘People and Policy – how to make better and smarter policies through behavioural insights, design thinking and better use of data.’” *Source: The Policy Project*

[Indigenous data sovereignty : towards an agenda](#)

“The concept of data sovereignty, which is elaborated in this book, is linked with indigenous peoples’ right to maintain, control, protect and develop their cultural heritage, traditional knowledge and traditional cultural expressions, as well as their right to maintain, control, protect and develop their intellectual property over these.” *Source: Australian National University*

[Are libraries effective settings for accessing health information?](#)

“This Sax Institute Evidence Check review examined evidence of the effectiveness of using public libraries as settings for health promotion and health education programs. Although very few such programs have been evaluated and reported in the literature, there is evidence that it is feasible to provide health education and health promotion programs in public libraries and that these programs receive public approval.” *Source: Sax Institute*

[Human Genome Editing: Science, Ethics, and Governance](#)

“Human Genome Editing considers important questions about the human application of genome editing including: balancing potential benefits with unintended risks, governing the use of genome editing, incorporating societal values into clinical applications and policy decisions, and respecting the inevitable differences across nations and cultures that will shape how and whether to use these new technologies. This report proposes criteria for heritable germline editing, provides conclusions on the crucial need for public education and engagement, and presents 7 general principles for the governance of human genome editing.” *Source: National Academies Press*

[Developing Multimodal Therapies for Brain Disorders: Proceedings of a Workshop](#)

“Multimodal therapy approaches that combine interventions aimed at different aspects of disease are emerging as potential—and perhaps essential—ways to enhance clinical outcomes for patients with psychiatric and neurological disorders. In order to examine the general principles underlying multimodal therapies and to explore challenges, potential barriers, and opportunities for their development, the National Academies of Sciences, Engineering, and Medicine convened a workshop in June 2016. Participants explored scientific, clinical, regulatory, and reimbursement issues related to multimodal approaches and potential opportunities to enhance clinical outcomes for individuals with nervous system disorders. This publication summarizes the presentations and discussions from the workshop.” *Source: National Academies Press*

[Real-World Evidence Generation and Evaluation of Therapeutics: Proceedings of a Workshop](#)

“In October 2016, the National Academies of Sciences, Engineering, and Medicine held a workshop to facilitate dialogue among stakeholders about the opportunities and challenges for incorporating real-world evidence into all stages in the process for the generation and evaluation of therapeutics. Participants explored unmet stakeholder needs and opportunities to generate new kinds of evidence that meet those needs. This publication summarizes the presentations and discussions from the workshop.” *Source: National Academies Press*

[Back to top](#)

Integrated Care

[Treat as One: Bridging the gap between mental and physical healthcare in general hospitals](#)

“The report is laid out in eight chapters and focuses on the presentation of 552 cases of patients who presented to general hospitals with an array of physical health issues and who also had a significant mental health problem. The study did not aim to look at the care given for a specific mental health condition, but sought to identify the common themes that emerged in the general hospital setting. *Source: National Confidential Enquiry into Patient Outcome and Death*

[Outcome-focused Integrated Care: lessons from experience](#)

“The need to integrate care has long been a key issue and people’s understanding of what it takes to successfully implement it has evolved over time. There has been a shift of focus from co-location and organisational structures towards working with teams to clarify and consolidate the professional roles and relationships which will make integration work in practice.” *Source: Oxford Brookes University*

[Back to top](#)

Child, Youth & Maternal Health

[Growing up: supporting young people to a successful adulthood](#)

“This report highlights the difficulties that many young people between the ages of 16 and 25 experience as part of moving into adulthood, and why it is important for the most vulnerable

to stay in touch with services. It draws on the new research involving a survey of more than 330 young people on their views on school, work, home life and growing up; and interviews with care leavers, disabled young people and young offenders. The research looked into what young people felt about the transitions they experience, what problems they encountered and what they thought might help them make the transition to adulthood successfully. The report focusses on: the impact of low parental aspirations and low self-esteem in young people, placement instability, issues facing young offenders, problems in securing permanent housing, and coping with mental health problems.” *Source: Action for Children*

[IMPRoving Outcomes for children exposed to domestic Violence \(IMPROVE\) : an evidence synthesis](#)

The objective of this report is “to synthesise evidence on the clinical effectiveness, cost-effectiveness and acceptability of interventions for children exposed to DVA, with the aim of making recommendations for further research.” *Source: National Institute for Health Research (UK)*

[An evaluation of the preventing violence against women and their children in culturally and linguistically diverse communities project](#)

“This project aimed to support culturally and linguistically diverse communities in the development of primary prevention strategies to address violence against women and children. A community development approach which involved high levels of participation from the priority communities was employed.” *Source: Centre for Social Impact, Swinburne University of Technology*

[Women’s health and well-being in Europe: beyond the mortality advantage](#)

“The World Health Organization (WHO), has produced this report on women's health. Women’s health is at a crossroads. Countries endorsed global efforts to advance women’s health by adopting the 2030 Agenda Sustainable Development and are taking them forward through the Sustainable Development Goals and the global strategy for women, children and adolescents’ health.” *Source: WHO*

[Investing in the Early Years: The Costs and Benefits of Investing in Early Childhood in New Hampshire](#)

“Recognizing the importance of the first five years of life, states have been expanding their investments in an array of early childhood interventions designed to address early life stressors and other factors that can compose healthy child development. Drawing on an extensive body of program evaluation and economic evaluation research, this report documents the ongoing need for early childhood investments in the state of New Hampshire, particularly for at-risk children; the evidence base for three strategies for promoting child development from birth to kindergarten entry — early home visiting, high-quality child care, and high-quality preschool.” *Source: Rand*

[Better beginnings: improving health for pregnancy](#)

“The Better Beginnings report focuses on improving health and wellbeing before, during, and after pregnancy and brings together information from recent and forthcoming studies funded by the National Institute for Health Research (NIHR). These include three from the Centre for

Maternal and Child Health Research Health in the School of Health Sciences.” *Source: National Institute for Health Research*

[Back to top](#)

Cancer

[Understanding GP attitudes to cancer preventing drugs](#)

“This report explores how much GPs know about two drugs that can reduce the risk of cancer – tamoxifen for women at high risk of breast cancer, and aspirin for people with Lynch Syndrome, a condition that increases the risk of several types of cancer.” *Source: Cancer Research UK*

[Guide to cancer early diagnosis](#)

“This WHO Guide to cancer early diagnosis aims to help policy-makers and programme managers facilitate timely diagnosis and improve access to cancer treatment for all.” *Source: WHO*

[Comprehensive Cervical Cancer Control: A guide to essential practice](#)

“This publication, Comprehensive cervical cancer control: a guide to essential practice (C4GEP), gives a broad vision of what a comprehensive approach to cervical cancer prevention and control means. In particular, it outlines the complementary strategies for comprehensive cervical cancer prevention and control, and highlights the need for collaboration across programmes, organizations and partners. This new guide updates the 2006 edition and includes the recent promising developments in technologies and strategies that can address the gaps between the needs for and availability of services for cervical cancer prevention and control.” *Source: WHO*

[Back to top](#)

Inequalities

[How poverty affects people's decision-making processes](#)

“This report summarises the most recent evidence on the relationship between socioeconomic status and the psychological, social and cultural processes that underpin decision-making.” *Source: Joseph Rowntree Foundation*

[The economics of health inequality in the English NHS: the long view](#)

“This paper provides a historical overview of health inequality policy in England and how government policy and academic research has evolved over time in response to shifts in socioeconomic inequalities.” *Source: Centre for Health Economics*

[A global snapshot of Indigenous and tribal peoples' health](#)

“The findings of the report show that, in the main, wherever they are, Indigenous peoples experience poorer health and social circumstances than the wider population, and that the relative wealth of their country makes little difference.” *Source: Lowitja Institute*

[International Benchmarking of Asian Health Outcomes for Waitemata and Auckland DHBs](#)

“This benchmarking report has been developed to profile and assess the health of Waitemata and Auckland districts' Asian population in an international context - considering their health status against our high level outcomes to maximise life expectancy and reduce inequalities in health outcomes. It is important to note that the Asian population is made up of many individual population groups and each of these groups has differing and specific health needs. Where possible, these difference are explored further in this report. The report has been developed alongside a supplementary Asian Health Benchmarking Technical Report.” *Source: Waitemata and Auckland DHBs*

[Back to top](#)

Health Systems, Costs & Reform

[Fast discovery: The imperative for high velocity learning by everyone, about everything, all of the time](#)

“In this thought paper, Steven Spear explores the gaps between the ‘theoretical limit’ (ie what could be achieved) and what organisations actually achieve in terms of taking the innate potential of the people they employ and the technology they use. He argues that much time is used unproductively and examines how this can be addressed. The paper draws on examples from a range of industries, from aluminium production to car manufacturing, to look at what separates the best performers from the rest. It argues that, if speed and excellence is the standard, with slowness and imperfection unacceptable, then learning is the only way to close the gap.” *Source: Health Foundation*

[Caring for Quality in Health: Lessons Learnt from 15 Reviews of Health Care Quality](#)

“This book summarises the main challenges and good practices to support improvements in health care quality, and to help ensure that the substantial resources devoted to health are being used effectively in supporting people to live healthier lives.” *Source: OECD*

[Advancing the right to health: the vital role of law](#)

“This report, published by the World Health Organization (WHO), aims to raise awareness about the role that the reform of public health laws can play in advancing the right to health and in creating the conditions for people to live healthy lives. By encouraging a better understanding of how public health law can be used to improve the health of the population, the report aims to encourage and assist governments to reform their public health laws in order to advance the right to health.” *Source: WHO*

[Engaging Health Care Volunteers to Pursue the Triple Aim](#)

“As hospitals, health systems and other providers navigate this evolution, health care volunteers stand out as key contributors in the success of pursuing the Triple Aim, a framework developed by the Institute for Healthcare Improvement that outlines an approach for maximizing the performance of the health care system.” *Source: American Hospital Association*

[Healthy lives for people in the UK](#)

“The aims of the strategy are to: change the conversation so the focus is on health as an asset, rather than ill health as a burden, promote national policies that support everyone’s opportunities for a healthy life, and support local action to address variations in people’s opportunities for a healthy life.” *Source: Health Foundation (UK)*

[Defining and measuring unmet need to guide healthcare funding: Identifying and filling the gaps](#)

“This article describes a literature review with an objective to understand the available evidence regarding unmet need. We developed a conceptual framework for what constitutes ideal evidence that; defines unmet need for a given population, indicates how that need can be met by health care, establishes the barriers to meeting need and provides relevant proxies based on observable measures. Our search focused on recent and empirical UK data and conceptual papers.” *Source: Centre for Health Economics (UK)*

[Back to top](#)

Oral Health

[A Framework for Addressing Social Determinants of Oral Health in the Community](#)

“This technical assistance brief describes a framework for assessing and creating partnerships to improve social determinants related to oral health. It outlines how United Way of Central Jersey — which participated in a CHCS-led learning collaborative on addressing social determinants of oral health — applied the framework in developing its Parent Promotoras model to improve oral health for low-income children.” *Source: Centre for Health Care Strategies, Inc.*

[First Do No Harm – The Impact of Financial Incentives on Dental X-rays](#)

“This paper assesses the impact of dentist remuneration on the incidence of potentially harmful dental x-rays.” *Source: Centre for Health Economics (UK)*

[Back to top](#)

Health Workforce

[Work in Progress. Towards a leaner, smarter public-sector workforce](#)

“This paper evaluates recent governments’ approaches to workforce design across the National Health Service (NHS), education, central and local government and the police. To do so, interviews with 17 experts from across government, public-sector bodies, academia and industry were conducted, alongside an analysis of public and private data, including Freedom of Information (FOI) requests. The aim is to outline a case for change in Part 1 of the paper, before suggesting high-level themes for reform in Part 2. This approach will pave the way for Reform to set out more detailed recommendations for specific sectors, including the NHS, education and policing, in subsequent papers.” *Source: Reform (UK)*

[Community Pharmacy Clinical Services Review](#)

“The review examines the evidence base of the clinical elements of the current Community Pharmacy Contractual Framework and other clinical services. It makes recommendations for commissioning models and clinical pharmacy services aimed at ensuring community

pharmacy is better integrated with primary care and making far greater use of community pharmacy and pharmacists.” *Source: NHS England*

[A rapid review of evidence regarding clinical services commissioned from community pharmacies](#)

“The aim of this literature review is to consider the evidence for both effectiveness and cost-effectiveness which underpins current ‘clinical services, and some both from within the UK and internationally.” *Source: NHS England*

[Back to top](#)

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