



New Zealanders for
HEALTH RESEARCH

*Ngā Tāngata o Aotearoa mō
te Rangahau Hauora*

“New Zealand’s peak body representing the entire health and medical research pipeline”

Health Research Saves Lives

Ka Whakarauoratia te Hunga e te Rangahau Hauora



Kiwi family Isabella Powell (back right) with sisters Maggie and Harriet and mum Alley. Demonstrating the life transforming impact of health research on living with Isabella’s cystic fibrosis.



Malaghan Institute of Medical Research translational immunology researchers Olivier Gasser and Anna Mooney

Annual Report

30th June 2021

Chair and Chief Executive Report

Health research is the single most important way in which we improve our health and healthcare - by identifying the best means to prevent, diagnose and treat conditions. Yet New Zealand's investment in health research is significantly less than what it should be, and our health system falls short when it comes to translating the results of health research into practice, policy and better health outcomes.

New Zealanders for Health Research (NZHR) is committed to bringing about best possible health for all New Zealanders, and we're on a mission to increase investment in health research as an essential and embedded component of all parts of New Zealand's health system, responsive to New Zealanders' unique health imperatives. Our values comprise inclusion, constructive engagement, independence, being evidence based, and assertiveness.

To this end we are pleased to report on NZHR's achievements for the year ending 30th June 2021.

Annual opinion polling

NZHR's fifth annual opinion polling [report](#) was published in August 2020, with the poll itself having been undertaken by Kantar in May 2020, comprising a sample of 1000 New Zealanders aged eighteen years and over.

The report once again demonstrated that New Zealanders place a high value on health and medical research, that they support increased investment from government especially, as well as industry and philanthropy, that they believe in the safety and effectiveness of a selection of health research validated measures for improving health outcomes, and that there was a high degree of willingness to participate in health research through clinical trials and sharing of personal information.

The poll was carried out shortly after the impact of the Covid 19 started to be felt in New Zealand. Interestingly, even though a vaccination was at the time still months away, 78% nevertheless agreed that it would be a safe and effective way of preventing people from catching Covid 19, while 13% disagreed and 9% didn't know.

The report, subtitled "*health research system fails the team of 5 million*" and "*health research saves lives*", was sent to key government Ministers, ministry officials, the Prime Minister's Chief Science Advisor and health related departmental science advisors, and conveyed to members and stakeholders through a series of on-line presentation events and a [media release](#).

Advocacy and lobbying

Throughout the year, as in previous years, NZHR consistently advocated for government investment in health research to be increased from under 0.7% of health care costs to 2.4%. At the beginning of the year we were saying that this should occur within the time frame of the Health Research Strategy, but it became increasingly clear that this had become an untenable position and we subsequently

modified our position, advocating for the 2.4% target to be achieved within ten years. As it is this would require year on year increases of 21% per annum, and we remain disappointed that neither the government nor any opposition parties have seen fit to commit to a health research investment trajectory which would see this (or any) target achieved. The historical trajectory is set out in the accompanying Statement of Service Performance (SSP).

Nevertheless we were delighted with the government's August 2020 announcement of a \$10 million contribution to Vaccine Alliance Aotearoa New Zealand for local vaccine research and development. We were further delighted when the government subsequently announced a \$36m three year investment of new money for a new Infectious Diseases Research Platform. New Zealand's increased market share, for the second year running, of the commercially funded Australasian clinical trials sector was also a welcome development (see the SSP).

NZHR has also argued for health research to be embedded as an essential component of the health system in order to save lives and improve health outcomes, including equity of outcomes. We've drawn attention to the 13,000+ (and increasing) New Zealanders who are dying prematurely, comprising approximately 6000+ New Zealanders per year who are dying prematurely and unnecessarily, and 7000+ kiwis who are dying prematurely because we haven't done the research to know how to effectively treat them. This is in addition to the huge underlying iceberg of antecedent morbidity (and human suffering) of which these mortality figures are just the tip, and mortality rates for Māori and Pacific people which are double those of non-Māori.

NZHR believes that a properly functioning health system would be investing in and actively applying the results of health research to ameliorate these statistics and we have set out our trend analyses in the SSP.

Specific advocacy and lobbying activities included:

[2020 General Election campaign](#)

In the lead-up to the 2020 General Election NZHR wrote to all then current parliamentary parties stating that we believed that it was time for health research to be an election issue, and seeking to ascertain each party's policies on increasing government investment in health research and including health research within the health system as a key enabler of improved health outcomes.

Responses received from [Labour](#), [National](#) and [Green](#) Party spokespersons were published on the NZHR website and promulgated to the wider New Zealand public through social and other media channels. We then produced and promulgated a [report card](#) rating all of the then current parliamentary parties, noting that four "scraped in" with pass marks while the fifth scored a D-.

We followed this up with a social media and web based [campaign](#) giving the New Zealand voting public an opportunity to [write](#) to their local MP and a randomly selected list MP asking their party to adopt and vote for policies that would see the government's health research allocation increase to 2.4% of health care costs, and to promise that their party will recognise health research as a core part of the health system, leading to better outcomes for all New Zealanders.

Briefing to incoming Ministers of Research Science and Innovation and Health

Following the election NZHR sent a [briefing paper](#) to the incoming Ministers and Associate Ministers of Health and Research, Science and Innovation, with copies to Opposition party spokespeople, the Chief Executives of the Health Research Council and Ministry of Health, and the Prime Minister's, MBIE's and MoH's Chief Science Advisors. The paper continued our assertive advocacy for health research to be embedded as an essential component of the health system, for increased government investment in health research, and for significantly better incentives and systems for lifting commercial investment.

The paper resulted in an invitation to the Chair and Chief Executive to what was a positive meeting with Associate Health Minister Hon. Dr Ayesha Verrall.

Productivity Commission "Frontier Firms" report

NZHR's [submission](#) to the Productivity Commission on its draft "Frontier Firms" report recommended, among other things, that final report should: draw comparisons between the New Zealand and UK health systems (where health research is an essential, normal and funded component of clinical practice); include an analysis of the government's Health Research Strategy and its implementation track record; and, recommend that the Health Transition Unit embeds health innovation R&D within the health system as part of the process of responding to the Health and Disability System Review report.

In a significant win for NZHR the Commission's [final report](#) responded positively to all of these submissions and in particular recommended that "the Government should use its intended major health system reform to improve the mandate, funding and incentives for DHBs to participate in the healthtech innovation ecosystem".

This will greatly assist NZHR in the future as it continues to influence what the reformed health system will look like in respect of embracing health research as a key enabler of improved health outcomes.

2021 Budget Policy Statement

Late March saw NZHR's Chief Executive Chris Higgins appearing before Parliament's Finance and Expenditure Committee to present NZHR's submission on the Government's Budget Policy Statement (BPS) 2021.

In our oral and written [submissions](#) we expressed cynicism that the 2021 budget appeared to be a predetermined "done deal"; observed that the 2021 wellbeing framework has regressed from and is a diluted version of the one that was set out in the 2020 BPS; implored committee members to escalate to Cabinet before it's too late the need for health research to be embedded as a core component of the health system when considering recommendations for implementing the findings of the Health and Disability System Review; pointed out that the BPS fails to highlight the importance of R&D investment as a key contributor to New Zealand's recovery and future economic growth and said that this was acting as a handbrake to increased health research investment.

In a post-budget [media release](#) we said that New Zealanders had been badly let down by Budget 2021's diminishing support for health research, noted that \$117.5m had been allocated for health research compared to an estimated expenditure of \$130.6m for 2020, and said that direct government investment in health research had fallen from 0.64% of direct health care costs to 0.57% percent. We added that "given that New Zealanders have seen the life-saving value of health research in the country's science led response to the Covid 19 pandemic, it beggars belief that the government has chosen to reduce its health research allocation in its latest purportedly "wellbeing" budget".

Health Research as a Public Health Imperative

Based on the logic that international scrutiny can sometimes amplify domestic advocacy NZHR had a poster [presentation](#) accepted by the 2020 Rome World Congress on Public Health. This became the source document for a Research Australia [INSPIRE magazine](#) article which included contributions from all five global sibling health research advocacy organisations including Research!America; Research!Canada; Research!Sweden; ourselves; and Research Australia.

We said that New Zealand's total investment in health R&D from all sources of 1.2% of the total government, business and society costs of living with and responding to ill health "places New Zealand as the worst family of five performer, which is all the more concerning given that all of us are dissatisfied with our respective countries' investment levels. Moreover, the figures also suggest that as a contributor to the global health research effort New Zealand should be doing more to ensure that it is pulling its weight internationally"

Health Research Saves Lives

We continued to publish a regular newsletter - *Ka Whakarauoratia te Hunga e te Rangahau Hauora!* - to keep approximately 900 stakeholders and NZHR members both informed as to NZHR's influence and successes and apprised of national and international developments relevant to health research in New Zealand.

Membership

We gratefully acknowledge the support of members University of Otago, AUT, Cure Kids, Malaghan Institute for Medical Research, Victoria University of Wellington, Merck Sharpe and Dohme (MSD) NZ, Roche Products NZ, AbbVie NZ, Douglas Pharmaceuticals, Multiple Sclerosis New Zealand, the Multiple Sclerosis Research Trust, Kantar, Research Australia, the New Zealand Association of Clinical Researchers (NZACRes) and Middlemore Clinical Trials.

Thanks too for the support of the NZHR Board who represent a cross section of NZHR members, and we also acknowledge the continuing support of NZHR's inaugural patron Bruce Scoggins.

Finances

NZHR remains in a financially solvent position with the SSP indicating continuing revenue stability. However, we anticipate that things will need to be carefully managed over the next twelve months. During the year Victoria University,

NZACRes and Middlemore Clinical Trials have discontinued their paid memberships and Covid 19 has made recruitment of new paying members particularly challenging. Nevertheless we will continue to attempt to grow and diversify our sources of income, with discussions with potential new members underway, and expect that our successful application during the year to be formally registered as a charity will also create new opportunities.



Graham
Malaghan,
Chairperson



Chris
Higgins,
Chief
Executive

Statement of Service Performance 2020/21

Vision: improved health and prosperity of New Zealanders through health research

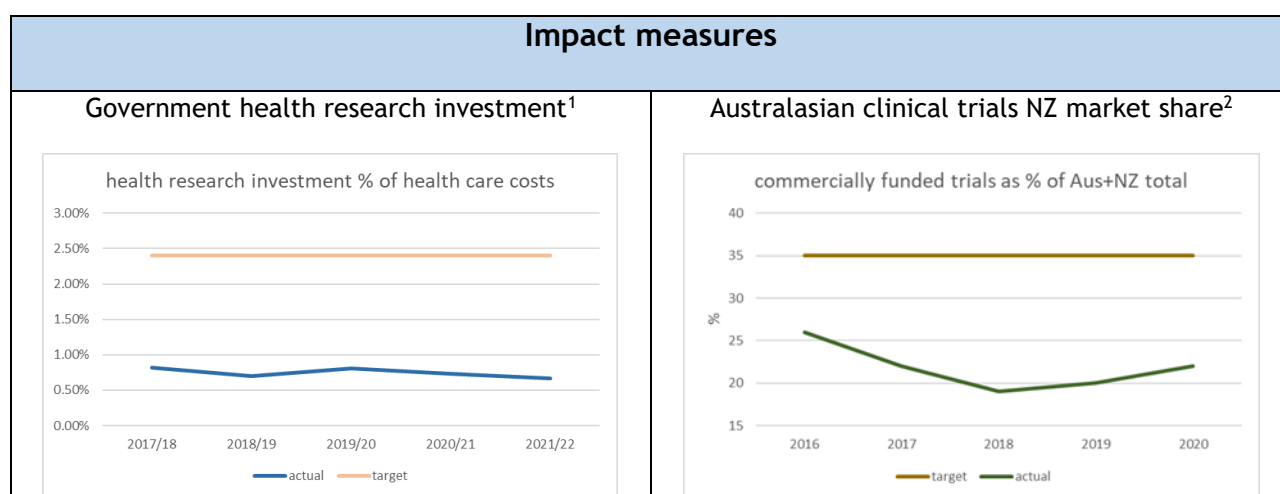
Goal: increased investment in health research as an essential and embedded component of all parts of New Zealand’s health system

NZHR has identified a set of success measures and targets to assist in identifying its impact in terms of working towards realisation of its vision and goal.

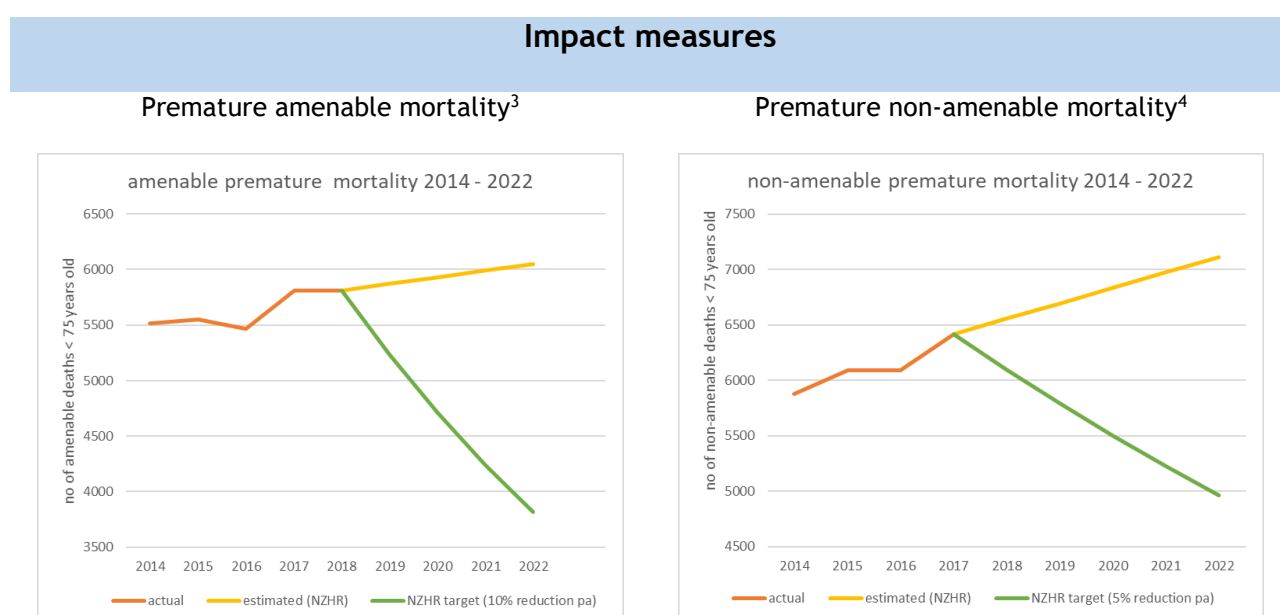
Measures for which data is available are presented on the following tables. The NZHR opinion poll was not undertaken in the reporting period with the result that a number of impact measures were unable to be reported.

This statement of service performance should be read in conjunction with the NZHRs Chair/Chief Executive report for the year.

Strategy: Increase health research investment



Strategy: Embed health research as an essential component of New Zealand’s health system



¹ NZ Treasury Budget estimates 2016 - 2020

² Commercially funded trials in NZ as percentage of Australia + NZ total. ANZCTR online database

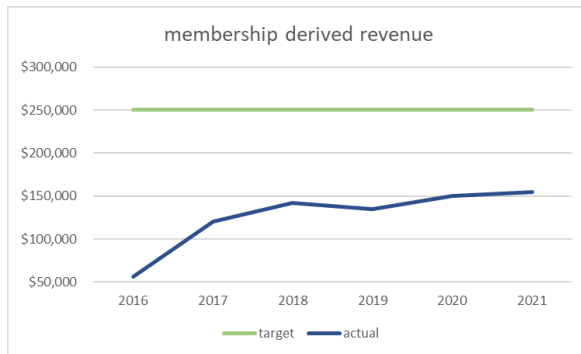
³ [amenablemortality_2016_dhb_ethnicity_years_rates_summary_202106.xlsx \(live.com\)](https://www.health.govt.nz/publication/mortality-2017-data-tables)

⁴ <https://www.health.govt.nz/publication/mortality-2017-data-tables> and earlier tables

Strategy: Build a sustainable and effective organisation

Impact measure

Membership derived revenue



New Zealanders for Health Research Board



Graham Malaghan

Chair (from 14th December 2015; reappointed 25th November 2016; and 10th October 2019)



Frances Bengel

CEO - Cure Kids (from 14th December 2015; reappointed 12th October 2017; and 15th October 2020)



Paul Smith

Country Director - Merck, Sharp & Dohme NZ (from 14th December 2015; reappointed 11th October 2018; resigned 1st April 2021)



Scott Bannan

Senior Clinical Operations Manager Merck, Sharp & Dohme NZ (from 1st April - 1st September 2021)



Nadia Levin

CEO - Research Australia (from 14th December 2015; reappointed 25th November 2016; and 10th October 2019)



Prof Lindsey White

Associate Dean (Research and Enterprise), Faculty of Health and Environmental Sciences, AUT (from 11th July 2019 to 27th January 2021)



Prof Nicola Kayes

Professor of Rehabilitation and Associate Dean/ Research Director, Centre for Person Centred Research, Faculty of Health and Environmental Sciences - AUT (from 28th January 2021)



Dr Martin Gagnon

Director of Research and Enterprise - University of Otago (from 11th October 2018)



Prof David Harper

Dean of Science Wellington Faculty of Science Victoria University of Wellington (from 27th February 2019 to 11th February 2021)



Peter Surman

Chief Scientific Officer, Douglas Pharmaceuticals (from 10th October 2019)



Derek Siegers

Head of Asia Pacific Global Clinical Trial Operations, Merck, Sharp & Dohme (from 1st September 2021)



Patron

Bruce Scoggins
(from 10th October 2019)

Partners and supporters

Platinum



Gold



Silver



Bronze



Chrome



Foundation



Pro bono legal services

