

Ka Whakarauoratia te Hunga e te Rangahau Hauora

Health Research Saves Lives!

Newsletter of New Zealanders for Health Research (NZHR)
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“New Zealand’s peak body representing the entire health and medical research pipeline”



**Greetings and tēnā
koutou from Chief
Executive Chris
Higgins**



Welcome to the Matariki issue of NZHR’s newsletter.

Matariki, which this year fell on 25th June, marks the start of the Māori New Year and is said to be a time to reflect on the past year, celebrate the present, and plan for the year ahead. It also occurs just a few days after the winter solstice on 21st June when the days become increasingly longer, albeit imperceptibly at first.

In the spirit of Matariki this issue of Health Research Saves Lives reflects on some of the recent big things that have significance for New Zealand’s health research sector including the health reforms, the 2022 Budget, and the final report of the Pharmac Review. We celebrate health research successes, and signal “where to” for both NZHR and health research in general.

This issue of Health Research Saves Lives:

- summarises what the Pae Ora (Healthy Futures) legislation means for health research p2
- comments on Budget 2022’s continuing underinvestment health research p3
- notes the advent of the consumer health forum p3
- celebrates the recent PHARMAC review p4
- includes our regular columns on:
- funding and development opportunities p5
- health research in New Zealand and around the world p8
- news from our sibling organisations internationally p10
- our call to action and the benefits of NZHR organisational membership p12
- NZHR’s funders and supporters p13



Pae Ora (Healthy Futures) Legislation: what now for health research?

The answer to this question depends on how Health New Zealand (HNZ) and the Māori Health Authority (MHA) decide - with advocacy input from NZHR - to respond to the opportunities and addresses the gaps that will be presented to them when the Pae Ora (Healthy Futures) legislation comes into being in a few days' time on 1st July.

NZHR's [submission](#) to the [Pae Ora Legislation Committee](#) is reflected in the final [version](#) of the legislation including provisions for HNZ and the MHA to “undertake and support research relating to health” and for the MHA to “evaluate the delivery and performance of services provided or funded by the Māori Health Authority” (a similar requirement for HNZ was retained from the original Bill). In developing the New Zealand Health Plan the legislation also requires HNZ and the MHA to take into account the role of the Health Research Council, among other entities. These are new and significant steps towards the embedding of health research as an essential component of New Zealand's health system which do not appear in the now soon-to-be-obsolete current legislation.

These steps are to be celebrated as important wins for NZHR's advocacy and set the stage for NZHR's engagement with HNZ and the MHA as we seek to ensure that meeting their health research obligations is reflected in the various strategies, plans, codes, charters and actions required by the new legislation.

However, despite our best efforts there remained - and continues to remain - a continuing absence of requirements for services, programmes etc to be evidenced based, and for there to be a health research strategy (which were key points in NZHR's submission to the Pae Ora Legislation Committee). In response, and before the second version of the Bill was to be presented to the Committee of the Whole House for its final debate, NZHR [wrote](#) to Health and Associate Health Ministers Little, Henare and Verrall, and to newly appointed Health Committee Chair Tangi Utikere seeking to address these issues before this final window of opportunity was closed.

Although we did not achieve further traction we did receive a [reply](#) from Minister Little stating among other things that nothing in the legislation precluded the Minister or HNZ or the MHA from implementing NZHR's recommendations - thus identifying the direction of, and setting the stage for, these components of our future advocacy programme.

NZHR believes that the health system needs to be informed by the results of health research now more than it ever did, and it's discouraging to see health research unsupported in those and other agencies' 2022 budget allocations (see below)

It's difficult to see how the health reforms will be successful in saving lives and improving health outcomes without properly funded health research being firmly embedded within the health system to ensure a best practice approach to both staying well and to being treated if and when we become sick.



Budget 2022 disappointing for health research - again

The Finance Minister may be happy with the 2022 Budget (photo credit RNZ), but NZHR isn't amused as New Zealanders are once again let down by Budget 2022's support for health research.

Health research and innovation is the single most important way in which we improve our health and healthcare - by identifying and implementing the best means to prevent, diagnose and treat conditions. Yet direct government investment in health research continues to track at only 0.8% of government health care costs - in contrast to both the very good evidence that the government should be investing at least 2.4% of its health system costs into health research, and the results of NZHR's post-budget 2022 Kantar opinion polling which reveals that only 9% of respondents believe that a level of investment of less than 1% is appropriate.

The additional \$10m per year allocated for RNA research, and new Ministry of Health funding of \$23m for "health science research, leadership, analysis and publishing quality evidence, data and insights", are both very welcome developments but we must invest a lot more to discover effective treatments and cures for the 7000 per year New Zealanders who are dying early from non-preventable causes, thus being denied the opportunity to experience the Budget's promised "secure future" and live well to a ripe old age.

As we said in our post-budget [media release](#) NZHR is particularly concerned that Health Research Council (HRC) funding has effectively remained unchanged for yet another year, and we once again call on the government to commit to investing an additional \$37m every year for the next ten years in the HRC and other health research channels to achieve a level of investment which enables New Zealand to deliver significantly better health outcomes.

We struggle to understand the logic of allocating significant additional funds to the reformed health system while at the same time starving it of the health research investment which will be key to giving the reforms a fighting chance to work.

It is to be hoped that newly promoted Research Science and Innovation Minister (and Associate Health Minister) Hon. Dr Ayesha Verrall will be more amenable than her predecessor was to addressing these concerns.



New consumer health forum Aotearoa

The latest update from Interim HNZ and the Interim MHA advises that a new consumer health forum Aotearoa will provide consumers and whānau a more meaningful say in the design and delivery of health services - "so we can deliver a people-and whānau-centred system based on the voices of all".

The forum, hosted by the Health Quality & Safety Commission (HQSC), provides a place for consumers, whānau and communities to connect, share their thoughts and provide valuable insights to help improve the health sector. The forum also connects whānau, consumers and

communities with opportunities to influence the health sector at a national, regional, and local level. Through the forum we hope to ensure that all perspectives are reflected in the design, delivery, and evaluation of services.

Meanwhile the Health Quality & Safety Commission's He Hoa Tiaki | Partners in Care team have advised that the revised and final version of the code of expectations for health entities' engagement with consumers and whānau is now pending approval and will take effect after the Pae Ora (Healthy Futures) Act commences. In total, 169 submissions were received including NZHR's.

NZHR seeks to represent the voice of consumers of health research through the results of our public opinion polls and through our networking with health consumer and advocacy organisations. We will therefore continue to seek to engage with HQSC to ensure that health consumers are involved in the design of health research that involves them, and that they experience programmes and services based on best available evidence.



Final report emphasises the importance of health research

In NZHR's [submission](#) to the Pharmac review we recommended that:

- PHARMAC takes steps to reduce the time it takes to assess, prioritise and fund new treatments so as to retain a sufficiently long on patent period to avoid disincentivising company investment in clinical research
- PHARMAC's decision making processes, its cost benefit model, and decisions themselves transparently take into account any impact on clinical research including clinical trials, and the flow on patient outcome improvements and cost savings that could result from such research
- PHARMAC be required to actively engage with and positively respond to both the imperatives of the New Zealand Health Research Strategy and the emerging expectations of the wider research, science and innovation ecosystem
- PHARMAC's analysis of therapies' costs and benefits to society is set out openly and transparently so that it can be held accountable for the quality of its decision making and enhance the prospects of more clinical research being translated into clinical practice

It is by now widely known that in its [final report](#) the review panel's recommendations call for better oversight, better processes and more voices to be heard in deciding which medicines will be funded and for whom. We note that the panel made a number of recommendations for aligning both how Pharmac should operate and the Pharmac components of the Pae Ora (Healthy Futures) Bill with the legislation as a whole. We think it is unfortunate that the report was released by the Health Minister so late in the piece that these recommendations were effectively muzzled. Opportunities for better translation of results of pharmacological research into pharmaceutical practice, and resulting health improvements, could well have been lost as a result.

Nevertheless we were pleased to see that on page 42 the report says *“One of Pharmac's functions is to engage in research to help meet its best health outcomes objective. We consider it should retain this function...in recent years, more than half of Pharmac's strategic research spending has come from a partnership with the Health Research Council of New Zealand [but]...this source of funding has been put on hold while the Council conducts a review of this partnership. It expects to have a new framework in place in 2022.*

Pharmac's individual business units also fund research in support of their individual priorities. Pharmac told us it had not collated the results and so could not give us a comprehensive list of all research funded in this way over the past three years without a substantial amount of work. Given all the research it has funded to date, we consider Pharmac has an opportunity here to share its knowledge base more widely within the health sector”.

“The Ministry has plans to establish its own research and innovation function and to partner with Health NZ, the Māori Health Authority and others to help create a strong, cohesive research and innovation sector that fills knowledge gaps in priority areas and translates research results into policy and practice. This, we note, would fit with the strategic priorities of the New Zealand Health Research Strategy 2017-2027, which are to ensure investments are aligned with areas of need, create a vibrant research environment in the health sector, build and strengthen pathways for translating research findings into policy and practice, and advance innovative ideas and commercial opportunities. Pharmac needs to be part of this process.”

NZHR was also pleased to see the report state “we remain concerned about Pharmac's ability to express in clear terms the basis for its decisions. We suggest it release its decisions once made, rather than waiting for Official Information Act requests. We also suggest this release take the form of a templated one page statement setting out the reasons for a decision, including, where applicable, a medicine's ranking on the options for investment list.”

Although disappointed that the review report does not address the issue of how Pharmac's purchasing and rationing decisions impact upon industry funded clinical trials in New Zealand, overall we commend the panel for a well written report, including recommendations that support the further embedding of health research within Pharmac's operating practices, and better translation of the results of pharmaceutical research into healthcare practice and improved health equity and health outcomes.

In his [response](#) to the report's recommendations Health Minister Little, on behalf of the government, puts considerable store on the ability of the health reforms legislation to require Pharmac to do things differently. But with no Pharmac accountability to either Health New Zealand or the Māori Health Authority, historically weak accountability to the Ministry of Health (as observed by the report itself) together with the now weakened Ministry, and the deliberate withholding of the report to the point where it was no longer feasible for its recommendations to be incorporated into the Pae Ora legislation, we at NZHR find it difficult to shrug off our scepticism.

Opportunities



Queenstown
Research Week.
August



HRC 2023
Project Grants.
July

New Zealand's pre-eminent health research event, Queenstown Research Week, is scheduled for August/September 2022. Deadline for submitting abstracts is Friday 1st July, and for early bird registration Monday 18th July. Details, including the programme, can be found [here](#). For the first time ever NZHR will be participating as a sponsor for the duration of the week - creating opportunities for

The dates for applying for HRC 2023 Project Grants are: registration 8th June - 26th July; EOI 8th June - 13th July; full application 4th October - 16th November. In the past the HRC has said that projects should address well-defined research questions with the aim of making significant improvements in, or developing knowledge contributing to, health outcomes. More information will be on the

Opportunities

delegates to meet face to face and learn more about us. Thanks are extended to the QRW organisers for making this possible



HRC's Standing Committee on Therapeutic Trials

Members are sought for the HRC's Standing Committee on Therapeutic Trials (SCOTT), which undertakes scientific assessment of applications to conduct trials for new medicines and makes recommendations to the Director-General of Health on whether or not trials should be approved.

The majority of applications reviewed by SCOTT are for clinical trials sponsored by the pharmaceutical industry.

Expressions of interest are sought from those with a clinical pharmacologist or pharmaceutical background who have an extensive background in clinical research.

For a confidential discussion on the role, please contact Richard Robson, SCOTT chairperson at richard.robson@nzcr.co.nz



New Zealand Association of Scientists 2022 Science Medals. July

Applications are invited for the four [NZAS 2022 Science Awards](#) including the [Hill Tinsley](#), [Shorland, Marsden](#), and [Cranwell Medals](#). Applicants can apply directly or can be nominated by a third party. Team applications are also eligible for the Shorland and Cranwell Medals.

Applications close 31st July 2022

[HRC Gateway](#) from 8th June.



Ngā Kanohi Kitea Community Advancement Fund. July

The HRC's revamped Ngā Kanohi Kitea Community Advancement Fund is now open, providing an opportunity for iwi, hapū, other Māori organisations, and Māori researchers or research teams to undertake self-identified health research that can make a direct and significant difference to the health and wellbeing of their communities. Available grants are:

- **Training Grant** for those looking to gain or develop skills, connections, or networks within a desired health research field.
- **Development Grant** to help prepare for undertaking a health research project or activity.
- **Project Grant** which provides funding to support community-led research initiatives that address community-identified health and wellbeing needs.
- **Knowledge Mobilisation Grant** which provides funding for iwi, hapū, other Māori community groups or organisations, Māori researchers or research teams who already have knowledge, evidence, or outcomes from research activities, to support further translation, dissemination, or uptake of research findings.

Click on the [HRC Gateway](#) for information about all grants and how to apply. All four grants close on 26 July at 1pm.

Opportunities



**Future-proofing
NZ clinical cancer
research at a
time of major
systems change.
September**

This year is a critical time for determining the future of clinical and translational cancer research in Aotearoa NZ. This includes both challenges and opportunities arising from major revisions to our healthcare system: the expectation that research becomes a core activity of Health NZ and the Māori Health Authority, the HRC/MOH project 'Enhancing New Zealand's Clinical Trials', the broadening role of Te Aho o te Kahu, and the recognition of the need for improved National data governance which embeds Māori data sovereignty.

To make the most of these changes, Cancer Trials NZ is holding a special meeting to bring together people interested in clinical and translational cancer research to discuss the role of cancer trials and cancer clinical research in Aotearoa NZ. How could these best operate in the new healthcare environment, and what infrastructure is needed to serve our needs for the next 20 years?

This focussed meeting of presentations followed by discussions and sharing of thoughts, will be in place of our usual Annual Scientific Meeting.

Date: Thursday 22 September 2022
Time: 10am to 12pm
Location: Te Pae Christchurch Convention Centre or virtual

[Register here](#)

Medicines
New Zealand

**Value of
Medicines
Awards 2022.
September**

The Award Scheme now includes two awards: the Innovation Jump Start Award designed to provide financial assistance for an early career researcher and the Award for Excellence in Innovative Medicines Research which recognises an already established researcher for the contribution they have made to biopharmaceutical research in New Zealand.

The Innovation Jumpstart Award Applications are open now with a closing date of 23 September. Click [here](#) for more information on both awards



**Health Tech
Week. June.
Auckland.**

Registrations are now open for HealthTech Week 2022, 27-30 June. Titled '**Aotearoa - A Revolution in Health**', this year's HealthTech Week will delve into all aspects of the New Zealand health reforms and what these changes mean for the health sector and health tech industries.

Highlights include: the '[Combined Stakeholder's Innovation Day](#)' showcasing New Zealand's innovation in medical technology and the ecosystem that can support the sector from research, development and commercialisation to market access; the '[MTANZ HealthTech Conference](#)'; the '[Te Titoki Mataora Forum](#)' - a new translational research initiative to advance New Zealand's capability in medtech translation, and accelerate clinical and commercial opportunities into sustainable ventures that contribute to New Zealand's health and economic growth; and a '[Women in HealthTech \(WiHT\) Breakfast](#)' meeting.

[Register here](#) and find out more by visiting the [HealthTech Week](#) website.

Health research in New Zealand and around the world



Cure Kids “State Of Child Health” Report Confirms The Worsening Impact Of High-burden Diseases

Cure Kids’ second annual State of Child Health Report released on 22nd June identifies four high-burden disease groups which are sending children in Aotearoa New Zealand to hospital at increasing rates.

The report benchmarks the health of New Zealand children in relation to data on rates of dental disease, respiratory conditions, and skin infections in 2020. The report also reviews the impact of acute rheumatic fever and rheumatic heart disease for the first time. These conditions have serious acute and long-term effects on children and young people, which create significant burdens for communities and health systems.

The report reveals that overall, the rates of all four diseases are too high relative to other resource-rich countries, and for dental disease and respiratory conditions, hospitalisation rates are continuing to increase.

“Our report aims to galvanise action to reduce these health issues. The statistics show what a daunting challenge we face: not only in the rates of disease, but also in the clear pattern of inequity. Reversing these trends will require collaborative efforts across New Zealand, and not just by the hardworking healthcare professionals who care for our children in hospitals and clinics around the country.” says Cure Kids CEO Frances Bengé.

Children’s Commissioner, Judge Frances Eivers commented that New Zealand is a long way from meeting the UN Convention on the Rights of the Child and its aspiration for every child to access the best healthcare possible. “On many measures, New Zealand is currently one of the worst places in the developed world to be a child. Many of our mokopuna start accumulating health issues from their very first days, and by the time they are young adults they are carrying a heavy burden of disease.”

Professor Stuart Dalziel (Paediatrician and Cure Kids Chair of Child Health Research) says that “there is an urgent need for New Zealand to prioritise implementation of evidence-based measures to detect, prevent, and treat disease as early as possible, and to improve care for children. For all conditions listed in the report there is the potential to dramatically reduce the health burden affecting our children. New Zealand needs social and health policies that prioritise children such that every child in this country has access to the same health outcomes regardless of location, socioeconomic status, and ethnicity.” For further details and the report itself click [here](#)



Celebrating health researchers’ achievements

It’s always great to be able to congratulate health and medical researchers on being recognised for their achievements and successes. Some that have come to our notice are:

Dame Margaret Brimble, a University of Auckland scientist known for her drug discoveries, has won a top international chemistry prize, the Pedler Award, for her brilliance in research and innovation. This prize acknowledges Dame Margaret’s pioneering work across natural product synthesis, peptide chemistry, and medicinal chemistry. More [here](#)

Janet Hoek, Professor of Public Health at the University of Otago, Wellington has received the 2022 Critic and Conscience of Society Award, recognising her research into ways to achieve a smokefree Aotearoa New Zealand. More [here](#)

The winners of the Prime Minister's Science Prize, **Te Puiaki Pūtaiao Matua a Te Pirimia**, for their decade-long work on Neonatal Glucose Studies, preventing brain damage in newborns, including University of Canterbury's clinically applied bioengineer Distinguished Professor **Geoff Chase**. More [here](#)

Professor **Frank Frizelle** on being inducted into the New Zealand Order of Merit in the Queen's birthday honours for services to health. This recognises Frank's work as a leader in his field nationally and internationally, with some of his achievements including research into bowel cancer; training and supervising medical students and researchers; developing national standards for bowel cancer diagnosis and treatment and the national bowel screening programme. More [here](#)



Pharmacy retail giant Walgreens looks to disrupt the clinical trials business

This [article](#) reports that Walgreens is expanding its reach into clinical trials by leveraging its vast trove of patient data, its technology assets and its retail locations.

Walgreens aims to revolutionize the “antiquated” clinical trials model with an eye toward using its community reach to increase patient enrolment as well as racial and ethnic diversity in sponsor-led drug development research. “We move into healthcare, and we’re focused on creating consumer healthcare solutions in our local communities; clinical trials are sort of a natural extension of that vision overall.”

“We can leverage our clinical trials business as an opportunity to change the paradigm for the patient experience of participating in clinical trials and create more connectivity with patients and care ... we have the ability to give our patients access to these trials in a way that they perhaps have never been tapped into before. One of our goals is to really help move the needle in trial participation.”



Scientists harness light therapy to target and kill cancer cells

The Guardian [reports](#) that a European team of engineers, physicists, neurosurgeons, biologists and immunologists from the UK, Poland and Sweden have joined forces to design the new form of photoimmunotherapy, described as a revolutionary cancer treatment that lights up and wipes out microscopic cancer cells.

The light-activated therapy forces cancer cells to glow in the dark, helping surgeons remove more of the tumours compared with existing techniques - and then kills off remaining cells within minutes once the surgery is complete. In a world-first trial in mice with glioblastoma, one of the most common and aggressive types of brain cancer, scans revealed the novel treatment lit up even the tiniest cancer cells to help surgeons remove them - and then wiped out those left over.

Trials of the new form of photoimmunotherapy, led by the Institute of [Cancer](#) Research, London, also showed the treatment triggered an immune response that could prime the immune system to target cancer cells in future, suggesting it could prevent glioblastoma

coming back after surgery. Researchers are now also studying the new treatment for the childhood cancer neuroblastoma.

“Experts believe it is destined to become the world’s fifth major cancer treatment after surgery, chemotherapy, radiotherapy and immunotherapy”.



Earlier multiple sclerosis Intervention will benefit people with MS and the New Zealand economy

A recently released [report](#) by the New Zealand Institute of Economic Research (NZIER), commissioned by the Multiple Sclerosis Society of New Zealand (MSNZ) shows that earlier intervention of Multiple Sclerosis (MS) will not only save New Zealand’s health system millions of dollars per year, it will also contribute millions back into the economy through individual income related earnings.

In 2021 the total estimated employment related loss for individuals with Multiple Sclerosis (MS) was \$82 million. Additionally, the total social cost associated with the prevalence of MS was estimated to be \$266.3 million in the same period.

The report describes how the progression of the disease to the severe disability level can be delayed by between 6 to 10 years with early intervention and the present value of such a delay could be between \$500,000 and \$1 million per case over the delay period.



Barriers to optimal stroke service care and solutions in New Zealand

A recent NZMJ [article](#) reports on a study which aimed to explore the perspectives of people with stroke and their whānau on barriers to accessing best practice care across Aotearoa, and to brainstorm potential solutions.

Ten focus groups were conducted nationwide and completed a thematic analysis. Analysis of the data collected from the focus groups identified five themes: (1) inconsistencies in stroke care; (2) importance of effective communication; (3) the role of whānau support; (4) the need for more person rather than stroke centred processes; and (5) experienced inequities. Participants also identified potential solutions.

Key recommendations include the need for improved access to stroke unit care for rural residents, improved post-discharge support and care coordination involving the whānau, improved communication across the patient journey, and a concerted effort to improve culturally safe care.

News from NZHR’s global family



Welcome to the Albanese government

Research Australia looks forward to working with the Australia’s new Federal Government to strengthen Australian health and medical research and innovation to meet future health challenges.

Welcoming the appointment of the Hon. Mark Butler MP as Minister for Health and Aged Care, Research Australia [notes](#) that “Minister Butler has a wealth of experience in leading health reform in Australia in his previous roles as Parliamentary Secretary for Health, Minister for Mental Health and Ageing and Minister Assisting the Prime Minister on Mental Health Reform”

“The health and medical research sector looks forward to working with Minister Butler to progress the National Health and Medical Research Strategy. We must develop a more cohesive health and medical research ecosystem better positioned to respond to national health challenges and improve translation of research into best practice care and new economic opportunities in health innovation...this must include a national health and medical research workforce plan to ensure Australia has the skills it needs to deliver healthcare of the future and to address challenges faced by many health and medical researchers, in particular early and mid-career researchers,” said Research Australia.



Health research essential for addressing Covid, gun violence and other epidemics

Research America’s latest [weekly letter](#) highlights a [powerful and timely opinion piece](#) written by Senator Tom Daschle and former Pennsylvania Governor Tom Ridge stressing the need to out-innovate the next COVID-19 variant and to prepare for the next pandemic. Importantly, the authors note, “preparedness requires significant and sustained investment in research and development” and they also urged Congress to follow the recommendations of the Bipartisan Commission on Biodefense’s April 2022 report, the [Athena Agenda: Advancing the Apollo Program for Biodefense](#). Among its recommendations, the report makes the case for developing “at least one vaccine candidate for each of the 26 viral families that infect humans.”

The weekly letter also notes that the Senate voted twice to advance the first substantive gun control legislative package in 10 years. Research!America joined other science organizations, led by the American Psychological Association and the American Association for Dental, Oral, and Craniofacial Research, in signing a letter to the Senate stating: “Gun violence should be considered a public health issue, not a political one—an epidemic that needs to be addressed with research and evidence-based strategies that will reduce morbidity and mortality.”



National Indigenous Peoples Day

Research Canada has acknowledged on June 21st as a day to celebrate the diverse cultures and histories of First Nations, Inuit and Métis peoples and communities across Canada. “While we recognize and celebrate the vast contributions of Indigenous knowledge, experience and scholarship to health research and innovation, we must also acknowledge the injustices experienced by, and the lasting impacts of colonization on the health and wellbeing of Indigenous peoples and communities”.

Research Canada has been proud to profile many Indigenous researchers through the Parliamentary Health Research Caucus over the years and looks forward to continuing to do so in the years to come. “As members of the health research and innovation community, we remain committed to supporting and encouraging Indigenous-led health research and innovation, as well as the decolonization efforts being made by and in partnership with the health research and innovation community across the country”.

Research Sweden has recently completed a significant [report](#) on precision health, affirming both that thanks to research and development in precision health, we can get better prevention and diagnostics, more effective treatments, fewer care injuries, increased survival and shorter hospital stays, and that precision medicine, in short, involves the development of tailor-made diagnostics, treatment and follow-up based on the individual's unique needs and conditions.

“We in Research! Sweden and the member organization "Agenda for Health and Prosperity" have for several years discussed these issues [and have identified that] one of the main issues was access to, as well as the management and analysis of, the data required for the development of precision medicine. Sources of, and the amount of, data are increasing and in parallel there is a rapid development of tools for interpreting data. Research and development in precision medicine and medically applied artificial intelligence is advancing sharply. Through a combination of these two areas, we can achieve precision health. Being able to go from curing or alleviating, to preventing disease at best, is, in our opinion, a goal worthy of the name. More precise preventive measures have great potential to improve people's health and living conditions, provided that we are willing to act on the information”.

“We are in the midst of a paradigm shift for health care”



New Zealanders for
HEALTH RESEARCH
*Ngā Tāngata o Aotearoa mō
te Rangahau Hauora*

Support the NZHR cause

[Join](#) or encourage other organisations to join NZHR's alliance to be part of lifting New Zealand's investment in health and medical research and to advocate for:

- increased government investment in health research
- embedding health research as an essential component of the health system, creating clear pathways for results to impact on New Zealanders' health outcomes
- an environment which encourages the opportunity for industry organisations' health and medical research initiatives to flourish and grow
- a well informed society which highly values health and medical research



Membership benefits

In addition to enhanced organisational profile through publicly supporting a great cause and a brighter future for kiwis through increased investment in health and medical research, NZHR membership benefits include:

Lobbying and advocacy

- Peak body lobbying support for your organization's pan-sector issues
- Opportunity to benefit from increased investment in health research
- Opportunity to contribute to and have brand acknowledgement on NZHR advocacy and lobbying position papers

NZHR Influence

- Contribute to NZHR strategic and work plans
- Participation in NZHR governance including Board representation and general meeting voting rights

NZHR Kantar annual public opinion polls

- Request poll questions
- Customised poll data
- Free attendance at presentation events

NZHR communications

- Enhanced members only versions of newsletters and publications
- Contributions to newsletter and website content
- Newsletter, publication and website advertising, profiling and branding
- NZHR promotional collateral branding

Workshops and conferences

- Complementary registrations
- Speaker nominations
- Collateral and activity/event branding
- Prior access to delegate lists

Membership is open to any organisation with an interest in health or medical research and its outcomes. Potential new members can email Chris Higgins, ceo@nz4healthresearch.org.nz for more information and a membership application form. Logos of current members and supporters are displayed below.

We hope you appreciate reading our newsletters, and we welcome any suggestions both for topics to cover and for improving how we do things. Feedback can be given to us by clicking [here](#)

Visit our website www.nz4healthresearch.org.nz to find out more about what we do and like and follow us on [Facebook](#), [LinkedIn](#) and Twitter

Mānawatia a Matariki, ngā mihi, stay well and until next time

Chris Higgins
Chief Executive

Our partners and supporters

