

# Ka Whakarauoratia te Hunga e te Rangahau Hauora Health Research Saves Lives!

Newsletter of New Zealanders for Health Research (NZHR)  
May 2023; No. 55

*“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 long overdue first issue of NZHR’s newsletter for 2023 in which we echo the title of Bob Dylan’s 1964 song *The Times They Are A-Changin’*. They’re a-changin’ for New Zealanders for Health Research (NZHR), and they really ought to be a-changin’ for the value that our government ascribes to its investment in health research.

This issue of *Health Research Saves Lives!* covers the following topics:

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## NZHR Leadership Changes

On 31<sup>st</sup> May and after over six and a half years in the position Chris Higgins will step away from his role as NZHR's Chief Executive, while NZHR's founding Chair Graham Malaghan has similarly concluded his tenure after nearly eight years in the role, with effect from 30<sup>th</sup> June. Graham intends to remain on the Board as a Trustee representing the Malaghan Institute while the Board continues its succession planning processes.



## Advocating for greater government investment in health research

NZHR regularly engages with the opportunity for public consultation on the government's annual budget policy statements. This is purported to be the public's opportunity to influence what the resulting Budget will look like, but the reality is that budget allocation decisions will have already been made well before the release of the relevant budget policy statement, and we suspect even more so this time round given that there will be an election budget this year in 2023.

NZHR therefore attempted to influence the content of the 2023 Budget Policy Statement (BPS) (and therefore the 2023 Budget) before the BPS's release for public consultation by way of a [position statement](#) which we released in November 2022 together with requests to meet, to Treasury and the Finance, Health and Research, Science and Innovation (RSI) Ministers.

- Finance Minister Robertson responded by referring our case to RSI Minister Verrall for a response
- Health Minister Little responded by referring our case to Ministry of Health officials, who noted the issues we'd raised
- Neither RSI Minister Verrall nor Treasury responded at all

The Government's Budget is developed in the context of the BPS, and the BPS is in turn developed by Treasury in the context of its Living Standards Framework (LSF). The gist of our position statement is that LSF deficiencies are resulting in BPS deficiencies, which in turn are resulting in a Budget which fails to allocate resources to areas which really matter to New Zealanders' health and well being, including their right to live well for as long as possible.

Two fundamental measures of how well we're doing in this latter respect, and which are absent from the LSF and BPS analyses, are premature amenable and

premature non-amenable mortality. If these two measures were to be included then, noting New Zealand's increasingly poor and inequitable performance regarding both, it could be expected that Budget allocations would focus on implementing evidence based health system enhancements to improve amenable mortality figures on the one hand; and increasing government investment in health research on the other hand to address non-amenable mortality through discovery and implementation of new therapies for conditions for which we don't yet have effective treatments and cures.

We're disappointed to report that we did not receive a considered response to our position statement before the Budget 2023 BPS was released for public consultation, and that it perhaps unsurprisingly failed therefore to address any of NZHR's concerns.

In response NZHR made a [written submission](#) on the 2023 BPS to Parliament's Finance and Expenditure (F&E) Committee in which we recommended that the BPS:

1. Be amended so that the health section of the New Zealand's Wellbeing Outlook includes premature mortality as a fundamental of indicator of wellbeing
2. Includes investment in R&D as one of the components of its fiscal strategy, including the government's commitment to achieving its 2% of GDP target by 2030
3. Be amended so that the overarching goal of laying the foundations for the future includes improved health outcomes as a key issue which needs to be addressed
4. Includes "increasing levels of amenable and non-amenable premature mortality" as one of the issues that should be addressed in pursuit of wellbeing objective 2: supporting improved health outcomes for all New Zealanders
5. Recognises that sustained increased investment in health research is essential for the achievement of improved health outcomes including reducing the incidence of premature mortality, thereby providing a policy framework which will enable the 2023 budget to:
  - Commit to a ten-year 2.4% of government healthcare costs health research investment trajectory, representing increases of at least 15.24% per year
  - Allocate an additional \$27m of specific and exclusive new health research investment in the 2023/24 budget, with an emphasis on mental health and cancer research, comprising a total government investment allocation of \$202m
  - Commit to a further three year investment trajectory comprising further year on year increases in specific and exclusive new health research funding of an additional \$31m in 2024/25, a further additional \$35.5m in 2025/26, and a further \$41m again in 2026/27

As always we took the opportunity to amplify our voice with a complementary oral submission to the F&E Committee which can be read [here](#). Among other things we noted that 2023 is Election year and pointed out that 66% of our 2022 Kantar [opinion poll](#) respondents said that the 2022/23 budgeted allocation of \$173m for

health research was too low, only 9% said that an allocation of less than 1% of health care costs (ie the status quo) was an appropriate level of health research investment, and 39% said it should be more than 2%.

What is especially sad about what's happening is the dispiritedness and tiredness of those health researchers who are at the receiving end of government inaction, and the pressure they are under to produce results in the face declining investment levels in real terms as inflation continues to bite. This cannot - must not - continue.

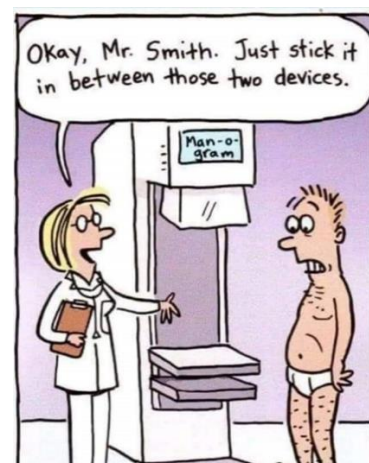


## Therapeutic Products Bill

NZHR has made a submission on the Therapeutic Products Bill. Because products used in clinical trials are yet to be confirmed or otherwise as being therapeutic they need to be unambiguously exempted from many of the Bill's provisions. It is also important that the new legislation does not impose additional burdens on the carrying out of clinical trials, and we have canvassed both of these issues in our submission which can be read [here](#).

In our follow up [oral submission](#) to the Health Committee we reiterated our original arguments with reference to submissions from NZHR member organisations MSD (Merck), Douglas Pharmaceuticals and the Malaghan Institute, thus amplifying both their voices and our own.

The Therapeutics Products Bill also covers both natural products and medical devices, and although NZHR did not comment on either of these issues others have as illustrated here for our amusement.



## Achieving Pae Ora (Healthy Futures)

This Manatū Hauora [portal](#) (Tātou - Manatū Hauora's Digital Engagement Platform) creates an opportunity for anybody who wishes to share ideas in an open forum.

NZHR's idea is that government should invest more into and apply the results of health research. Specifically we said that the government should commit to

increasing its specific investment in health research from the current 0.8% of health care costs to at least 2.4% over the next ten years. Te Aka Whai Ora, Te Whata Ora and Manatu Hauora should also have commissioning and other processes in place to apply the results of health research so that health service delivery, programmes and policies are based on the best contemporary evidence.

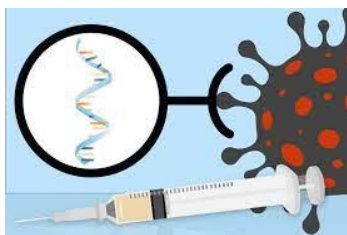
We said that this is important because about 13,000 per year are dying prematurely - a figure that has been increasing over time. This is an often overlooked key indicator of the effectiveness/ineffectiveness of New Zealand's health system. An effective system would see these figures decreasing so that more New Zealanders get to live well to a ripe old age. Currently about half of NZ's premature mortality is described as "amenable", which points to the historical ineffectiveness of our health system, and the other half is non-amenable which points to the fact we haven't invested sufficiently in the health research which would identify treatments, cures and prevention strategies.

Furthermore rates of Māori premature amenable and non-amenable mortality are twice those of non-Māori. Greater investment in health research and better translation of the results of health research will be significant drivers to improve outcomes equity.

The idea is also important because it is supported by a majority of New Zealanders, as indicated by NZHR's Kantar 2022 Opinion Poll Report "health research system at crossroads" which can be read at <https://nz4healthresearch.org.nz/wp-content/uploads/2022/12/NZHR-Report-2022-Online-final.pdf>

If you're struggling to get traction on your good idea you could try posting it on this platform.

## Health Research in New Zealand and around the world



**\$70M over seven years for research into RNA vaccines and other treatments**

Te Herenga Waka - Victoria University of Wellington and Waipapa Taumata Rau - the University of Auckland have been tasked to develop a plan for a government-funded Ribonucleic Acid (RNA) Development Platform, with support from the Te Whare Wānanga o Ōtākou - the University of Otago and the Malaghan Institute of Medical Research.

MBIE says that the impact of this emerging technology was clear when RNA vaccines were rapidly developed for the COVID-19 pandemic. Now, this technology could help produce new vaccines, treatments and diagnostics that improve health outcomes in areas such as cancer and autoimmune diseases.

“The RNA Development Platform will increase capabilities across New Zealand’s growing biotechnology sector, from research and development through to regulations and production. The Platform will allow researchers and businesses to

turn ground-breaking ideas and early-stage research into beneficial products and services. It will also support developments in manufacturing, such as by creating new delivery systems for RNA vaccines or advancing smaller scale labs to be able to efficiently produce RNA therapeutics”.

Victoria University of Wellington and the University of Auckland have initial funding of \$500,000 to develop a 7-year plan for the Platform under the co-host arrangement. Their proposal intends to bring people, facilities, information and knowledge together to focus on various RNA research and innovation projects. Once the plan is approved, a further investment of \$69.5 million over seven years will fund research and innovation within the RNA Development Platform.



## Prime Minister's Science Prizes

Huge congratulations to the winner of the Prime Minister's Te Puiaki Pūtaiao Matua a Te Pirimia Science Prize 2022 for a transformative impact, the National Institute for Stroke and Applied Neurosciences (NISAN), led by Professor Valery Feigin (pictured left) FRSNZ, Professor of Epidemiology and Neurology at Auckland University of Technology with co-investigators Professor Rita Krishnamurthi, Dr Alexander Merkin and Balakrishnan Nair.

Their work has led to the insight that stroke has become the second leading cause of death and of disability in the world. New Zealand has an unexpectedly high level of stroke incidence (fourth highest in the OECD) and Māori and Pacific people have two or three times greater risk compared with New Zealand Europeans.

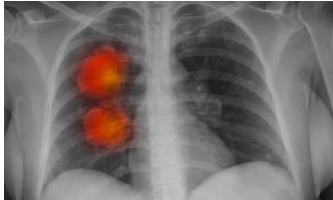
The team has developed two world-first digital tools to assist people to lower stroke risk. The mobile app Stroke Riskometer calculates a person's stroke risk and guides them how to reduce it, and PreventS-MD, provides the same information via desktop computer software for clinicians to use during consultations, and is soon to be adopted by Te Whatu Ora - Health NZ Waitematā and then across New Zealand.

Congratulations also to Dr Dianne Sika-Paotonu (pictured right), Associate Professor of Biomedical & Health Sciences-Immunology, and Associate Dean, Pacific, at the University of Otago, Wellington, who has won the Prime Minister's Te Puiaki Whakapā Pūtaiao Science Communicator prize.

A leading voice during the Covid-19 pandemic explaining the technical aspects of immunology, vaccines, the SARS-CoV-2 virus and infectious diseases, Dianne contributed to more than 220 broadcast media stories and 1500 online and print media stories. She provided expert advisory to public health discussions on misinformation, and the importance of evidenced-based information.

Dianne has achieved breakthrough work on rheumatic fever and rheumatic heart disease, which disproportionately affect Pacific and Māori communities, and improved health outcomes in the Pacific region by engaging and educating communities and assembling multidisciplinary teams to address these health conditions.

More [here](#)



## New artificial intelligence tool to more accurately identify cancer

This Guardian [article](#) reports on an algorithm which study authors from the Royal Marsden NHS Foundation Trust, the Institute of Cancer Research, London, and Imperial College London claim performs more efficiently and effectively than current methods.

The study used a measure called area under the curve (AUC) to see how effective the algorithm was at predicting cancer. An AUC of 1 indicates a perfect model, while 0.5 would be expected if the model was randomly guessing. The results showed the AI model could identify each nodule's risk of cancer with an AUC of 0.87. The performance improved on the Brock score, a test currently used in clinic, which scored 0.67. The model also performed comparably with the Herder score - another test - which had an AUC of 0.83.

“According to these initial results, our model appears to identify cancerous large lung nodules accurately,” said one of the study authors.

Given that New Zealand's non-amenable premature mortality from cancer is a significant contributor to both poor health outcome figures and resulting forgone productivity gains, if the health sector improves its focus on and urgency re translating health research results into policy and practice this could be an encouraging development.

**NIHR** | National Institute for Health and Care Research

“Funding and support for rare diseases research will drive progress for patients”

The UK's NIHR is to launch several [new initiatives](#) as part of the government's newly released second [Rare Diseases Action Plan for England](#), launched today.

The new funding includes:

- [£790m for the NIHR Biomedical Research Centres](#), which includes support for research into a diverse range of rare conditions including immunodeficiencies and haemophilia.
- £12m funding call alongside the Medical Research Council to form a [new UK Rare Disease Research Platform](#) to drive collaboration in research.

The Rare Diseases Action Plan has been developed alongside partners across the health system and in collaboration with people living with rare conditions. Its aim is to report on progress in improving the lives of people living with a rare disease, and to outline plans for further research in 2023.

"The impacts of rare diseases on individuals and their families are wide-ranging. Our research plays an important underpinning role in furthering the understanding, diagnosis, treatment and care for people living with rare diseases.

"The action plan highlights significant advances in rare disease research supported through our funding. There is always more to do and our commitments will be supported by the recently announced funding for ground-breaking research into the NIHR Biomedical Research Centres and the Medical Research Council (MRC)-NIHR UK Rare Disease Research Platform".

"This research will continue to drive progress and foster collaboration to translate scientific breakthroughs into clinical advances."

With New Zealand's first ever rare disorders strategy currently under active development as one of the government's responses to the Pharmac review, it is hoped that there will be a similar commitment to rare disorders health research investment here in our own country.



## International Day of Immunology, 29<sup>th</sup> April

To mark International Immunology Day Malaghan Institute's Professor Graham LeGros writes notes that the day is a celebration of the immune system and its immense power and potential to improve human health. "It's a good opportunity to reflect on the state of this exciting and ever-changing field of research and what is needed for the future."

"Immunology now seems poised to hold the answers to so many age-old challenges to human health and survival in a hostile world. Knowledge of the immune system and fine-tuning the way immune cells can be activated and targeted to antigens on tumour cells has paved the way for curing formerly untreatable forms of cancer".

"And it's not just cancer. Allergies, infectious diseases and inflammatory diseases - almost every disease we can think of - has an immunological foundation and so holds the potential to be overcome through harnessing the power of the immune system".

"Immunology is a complex and multi-disciplinary field of research, combining biochemistry, cellular biology, physiology and genetics. What is needed now are individuals who have sufficient grasp of the immune system and how to use the new molecular and informatics tools to create new types of personalised therapeutic approaches. We need committed scientists who can unravel the complex interplay of cytokines and cell types that regulate immune system behaviour".





Two researchers committed to maximising Māori health gains are receiving funding for their research into improving cancer treatment. Te Kāhui Matepukupuku o Aotearoa (the Cancer Society of New Zealand) and Hei Āhuru Mōwai (Māori Cancer Research Leadership Aotearoa) partnered to award Māori cancer researchers to address health inequities.

One of the researchers is Danielle Sword (University of Otago, based at the Malaghan Institute) who will look into improving the mechanisms of CAR T-cells in the laboratory and investigate te ao Māori perspectives on CAR T-cell therapy from patients, their whānau, and the researcher.

“I would like to see our whānau have a better chance at fighting against cancer. This Māori Cancer Researcher Award means I can pursue a PhD that will utilise both Western Science and Mātauranga Māori to explore the emerging cancer treatment CAR T-cell therapy and its potential impact on Māori,” says Danielle Sword.

Grace Young (University of Otago) is seeking to develop better treatment for triple-negative breast cancer, which is fatal to many patients. This type of cancer is prevalent among young women in New Zealand, and in particular Māori women.

Dr Jonathon Koea, Māngai for Hei Āhuru Mōwai, says “These awards demonstrate what can be achieved by mainstream and Kaupapa Māori NGOs working together to grow the Māori research workforce and answer research questions of relevance to all New Zealanders.”

Tumu Whakarae of Te Kāhui Matepukupuku o Aotearoa Lucy Elwood adds: “The Māori Cancer Researcher Awards demonstrate our commitment to advance Māori aspirations in cancer research. We hope that with these awards, we can change the underrepresentation of Māori researchers in the cancer space and reduce health inequities.”



### Tech from wine industry adapted to save lives

This Sun Media [article](#) reports on how New Zealand researchers are developing a wine industry derived device which they hope will prevent deaths from surgical complications.

Postoperative complications are the chief cause of death around surgery and, of these, 1.5 million deaths per year could be prevented globally if they were picked up and treated earlier.

Professor Windsor (pictured), University of Auckland explains that the technology has its roots in the electrochemistry that's used in the wine industry to determine whether the wine has gone off. "What we have done is to take that technology and apply it to surgical patients. We have found in pilot clinical studies that we can accurately [and quickly and repeatedly over time] measure oxidative stress, which is a common feature of many diseases," Professor Windsor says.

"Mitochondrial dysfunction is a feature of ... post-operative complications. This technology gives us a measure of what's happening at the mitochondrial level to give us new insight into a patient's recovery."

The project has just received a share of \$50 million funding from Wellcome Leap, which is going to 13 groups working to improve the safety of surgery. "It is very prestigious to get this funding, which goes towards disruptive innovations to solve global problems," says Professor Windsor.



### First Pacific health research centre

For the first time in its 140-year history, the University of Auckland has opened a research centre dedicated to Pasifika health - Te Poutoko Ora a Kiwa - Centre for Pacific and Global Health.

Pacific health expert and doctor, Sir Collin Tukuitonga (pictured), is one of three health researchers named as directors for the new centre, which is part of the institution's Faculty of Medical and Health Sciences. More [here](#).



### A new search engine for discovering undocumented links in medical research

Alexander Bikeyev, Director, Cloudcell Limited recently introduced NZHR to its developing search engine for medical researchers. The engine is hosted at <https://soma.science> with the goal of helping medical researchers uncover new connections and insights by identifying undocumented links between medical concepts.

Alexander says that in the past month he's made significant progress on the AI driven search algorithm, has been improving the user interface of the search engine to make it more intuitive and user-friendly, and is in the process of conducting user testing to get feedback on the latest version.

He's eager to hear from users and get feedback on the search engine, so feel free to take a look and let Alexander know what you think via [info@cloudcell.nz](mailto:info@cloudcell.nz).

## Opportunities



Te Tāhū Hauora Health Quality & Safety Commission New Zealand invites submissions for posters and presentations for their 8th quality improvement scientific symposium, on **8 November 2023 in Auckland**. Guidelines, important dates, abstract forms and a link to the submission portal are available on the HQSC website [here](#)



**Evidence and Implementation Summit 2023**  
**9-11 October**

The Evidence and Implementation Summit to be held in Melbourne is billed as one of the leading evidence and implementation sector events on the global calendar. The event hosted by CEI, BISI and Monash University, focuses on the intersection of research, policy and practice, with a focus on the synthesis, generation, translation, and implementation of evidence to improve lives. Organisers are [seeking abstracts](#) by 4<sup>th</sup> June for presentations, panels and lightning talks, across 12 areas of interest - spanning health and mental health, family and social services, First Nations perspectives, international development and climate change. More details at <https://www.eisummit.org/>.



**Closing Date: 20 July**

[Catalyst Leaders](#) and [Catalyst Seeding April 2023 open call](#) April 2023 open calls

Catalyst: Seeding facilitates new small and medium pre-research strategic partnerships with international collaborators that cannot be supported through other means, and with a view to developing full collaborations that could be supported through Catalyst: Strategic over time.

Catalyst: Leaders supports incoming and outgoing targeted international fellowships for exceptional individuals that cannot be supported through other means.

For detailed information refer to the [Catalyst: Seeding Guidelines](#), and the [Catalyst: Leaders Guidelines](#).



The National Melanoma Working Group (NMWG), with support from MelNet is reviewing the 'Quality Statements to Guide Melanoma Diagnosis and Treatment in New Zealand - second edition' to ensure the document continues to reflect latest research and best practice.

Melnet is seeking feedback on potential amendments based on new evidence and literature that has been published since the last review.

To provide feedback, please submit in writing by **5.00 pm Friday 30 June 2023** to [melnet@melnet.org.nz](mailto:melnet@melnet.org.nz).



**Closing date: 30<sup>th</sup> June**

Billed the most important networking event for clinical researchers in Aotearoa, NZACRes take great pleasure in welcoming everybody to this long overdue reunion of our research community.

"The clinical data gathered in New Zealand is of the highest quality in both industry-sponsored and investigator-led trials. Support for our 2023 conference by representatives from all facets of

in the industry including Sponsors, CROs and sites is critical, and an endorsement of this fact. With your support we can grow the industry in New Zealand and its place on the international stage, building on our performance and reputation that has been established over many years”

Register at <https://www.nzacres2023.nz/>

## News from NZHR’s global family



### Research central to Universities Accord

Research Australia’s submission to the Australian Universities Accord Discussion paper responds to two key issues. The first relates to the career prospects and professional development of early and mid-career researchers. Research Australia proposes that this be a shared responsibility of research funders, universities, researcher managers and researchers. We also welcome further consideration of programs to support exposure to roles in industry and government during the completion of a higher degree by research.

The second relates to the funding for indirect research costs. Research Australia proposes a new structure for the future funding of direct and indirect research costs and two distinct principles to guide the structure. We also propose that funding for national research infrastructure be included in these deliberations.

In each proposal Research Australia outlines the case for how and why these issues should be addressed by an Accord between universities and the Commonwealth Government. Research Australia’s submission is available [here](#)

NZHR made a broadly similar [submission](#) to MBIE’s 2022 RSI Green Paper, and supports the translation of Research Australia’s well made points into the New Zealand context



### 2023 opinion poll results

Highlights from Research!America’s 2023 opinion poll results are:

- More than 3 in 4 Americans (85% of Democrats, 71% of Republicans, 73% of independents) say investing in research and development is creating employment opportunities for people in the United States.
- Most Americans (91%) say it is important for the U.S. to be a global leader in science and technology and 77% are concerned that China will surpass the U.S. as the world’s leading S&T power.
- Cost of health care was cited as the single most important health issue facing the nation, with COVID-19, cancer, and mental health close behind. (COVID-19 was by far the top-cited issue in last year’s Poll Data Summary.)
- Regardless of party affiliation, Americans are concerned about the impact of misinformation/disinformation on public health (88%), climate change (79%), and stable democracy (85%).

- More than half of Americans feel curious, hopeful, and optimistic about brain health research and a strong majority, across party lines, are in favor of increased federal funding for brain health research

The full report can be read [here](#)



## Pre-Budget 2023 Fall-Winter Advocacy Campaign

Research Canada's key [Messages and Asks](#) for the Health Research and Innovation Ecosystem are:

- Canada's health care system is in crisis and needs the best available science to facilitate highly effective responses now. All levels of government need to work collaboratively and listen to the voices of our health care experts and scientists to address the immediate crisis and ensure the long-term sustainability of the health system.
- Underinvestment in health research is not an option. The Government of Canada needs to double research funding to the Tri-Agency and commit to an annual increase that will keep pace with inflation and global benchmarks. This increase in funding must maintain a balance with investments in infrastructure and people.
- A well-supported research workforce that reflects the fullness of humanity and human potential is the foundation of a vibrant, innovative and sustainable research system. The Government of Canada needs to better support and enable a flourishing and diversified talent base in Canada, with a focus on Indigenous researchers, Black and people of colour researchers, early-career researchers, and other underrepresented and equity-deserving groups.
- Realizing the full health, social and economic potential of Canada's health research and innovation ecosystem and ensuring a more prepared, resilient and sustainable ecosystem in the future requires a strong, active and engaged life sciences industry. The Government of Canada needs to work with life sciences companies and other stakeholders to cultivate an ambitious, futureproofed policy and investment environment that supports our ecosystem as a whole and positions Canada for sustainability, growth and leadership.



## Influencing the new government's agenda

Research Sweden report that they have kick-started the year with very constructive workshops with the members of the "Agenda for Health and Prosperity". With a new government in place, Research Sweden wants to contribute both with a joint analysis of the current situation and prioritised proposals for measures for the current term of office. We are very pleased with the positive response from the government, which will be attended by two ministers and a state secretary at their seminar on 10 May.



## 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. For more information and a membership application form potential new members can email Chris Higgins, [ceo@nz4healthresearch.org.nz](mailto:ceo@nz4healthresearch.org.nz). 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](http://www.nz4healthresearch.org.nz) to find out more about what we do and like and follow us on [Facebook](#), [LinkedIn](#) and Twitter

Ngā mihi, stay well and until next time

Chris Higgins  
Chief Executive

## Our partners and supporters

### Platinum



### Gold



### Silver



### Bronze



### Foundation

