

Cancer Society New Zealand

Research and Innovation

Strategy 2026–2031

Our guiding principles

The Cancer Society New Zealand’s Strategic Plan 2026–2031 sets out the principles guiding our decisions and partnerships. The Research and Innovation Strategy builds on this foundation, ensuring our efforts are impactful, efficient and aligned with the wider cancer research and innovation system.

Enhancement over duplication: We prioritise strengthening and building on existing efforts rather than replicating them.

Collaboration over competition: We seek to enable partnerships and foster sector wide alignment to achieve shared goals.

Our aim: Dream without limits and catalyse transformation

Tēnā koutou katoa,

Too many of our friends and whānau are affected by cancer and they deserve better health outcomes. The only way we will achieve this is through the generation and implementation of new knowledge, delivered through research and innovation, alongside systems change.

The urgency is real. One in three people in Aotearoa will be affected by cancer during their lifetime. For Māori, the impact is even more severe. Māori are twice as likely to die from cancer compared to non-Māori. At the same time, cancer cases are rising and our health system is already under significant pressure.

In 2024, the Cancer Society made a pivotal decision to prioritise research as the first task for national collaboration across our organisation. By bringing together our strategies and resources into one cohesive function, we aim to amplify impact and accelerate progress in research and innovation for whānau.

This strategy connects directly to the Cancer Society’s vision ‘*working together, towards a future free from cancer*’ and sets out how research and innovation will help us get there. It is an outward facing strategy, focused on sector leadership and collaboration. Our ambition is bold, to begin laying the research foundations for a national comprehensive cancer network. This is a big dream and this plan represents the first five years of making it real.

We cannot do this alone. Collaboration is at the heart of our approach, and we invite partners, researchers, not for profits and communities to join us. Together, we can create a cancer research and innovation system that is inclusive, connected and focused on equity, so that every person and whānau, has the best possible chance against cancer.

Christelle Jolly
Director of Research and Innovation
Cancer Society of New Zealand

Our approach

Our approach was grounded in Te Tiriti o Waitangi, ensuring Māori perspectives, leadership and aspirations shaped the development of the strategy from the outset. We began with a comprehensive current state assessment, engaging Cancer Society leadership and system leaders to understand challenges and identify our greatest opportunities for progress. Insights from previous whānau voice projects helped frame and guide our kaupapa, ensuring lived experience, particularly for Māori, informed our direction. To ensure the sector could meaningfully shape the strategy, we convened a working group with representation across research domains, not for profit organisations, Māori communities, regional voices, universities, and public and private health services. Participants who held multiple roles were encouraged to contribute from each perspective, enriching the discussion and strengthening the strategy's relevance. Multiple workshops were held to shape priorities, followed by a consultation process to refine and finalise the strategy.

The outlook

Cancer research and innovation across Aotearoa faces both significant challenges and transformative opportunities. To deliver impact, our strategy must address inequities produced by structural racism, colonisation and system design, while aligning with global best practice.

Cancer research operates within a rapidly changing environment

Science system reforms are consolidating Crown Research Institutes into new Public Research Organisations and introducing a centralised funding model, reshaping priorities and access to resources.¹ University sector changes including a new tertiary strategy and funding model will alter research incentives and collaboration.² At the same time, legislative changes for not for profits increase governance and reporting obligations.³

Persistent inequities in health outcomes

Underserved populations, particularly Māori, Pacific and rural communities, continue to experience poorer health outcomes.⁴ If we don't prioritise these populations to address these inequities, they will worsen. Research must be responsive to the needs of these populations and actively contribute to closing the gap in health outcomes, which in turn, will benefit the whole population.

Fragmentation across the sector

The cancer research and not for profit landscape is fragmented, with pockets of excellence but limited connectivity. Weak integration between mainstream and Māori health and research systems adds to this fragmentation. As a result, visibility, access to expertise and opportunities are reduced, duplication occurs, inefficiencies persist and gaps remain.⁵

Workforce development and sustainability

Systemic precarity of the cancer research workforce hinders the ability to develop and sustain careers and expertise to deliver impactful research and innovation.

Variance across not for profits

Numerous organisations operate with different capacities, priorities and inconsistent messaging.

Limited integration of lived experience

Lived experiences are underutilised in shaping research and innovation activities, particularly for Māori whānau, risking disconnect from real world needs.

“[There were] comments from whānau about the need for more holistic and whānau-centred research that ‘elevates lived experience as evidence’”⁶

Barriers to clinical trial access

Access to clinical trials across the motu is inequitable, with underserved communities facing the greatest barriers.⁷ Addressing these barriers is essential to improve outcomes, embed equity in care and ensure research benefits those most affected.

The big dream

We build the research foundations for a national comprehensive cancer network (network) that connects people, knowledge and resources, to enable coordinated research activity, for increased access and equitable health outcomes. This network will be equity-led, uphold Te Tiriti o Waitangi and embed Māori leadership.

Why this matters

Research is an essential component of a comprehensive cancer care model.⁸ Aotearoa does not have a single comprehensive cancer centre, but you don’t necessarily need a large building to achieve the same impact. What matters is a coordinated model of care with integrated research and equitable access to services delivered as close to home as possible. This coordination must include both mainstream and kaupapa Māori services, recognising that equitable care cannot be achieved through mainstream provision alone. Our cancer care system has grown in fragments and in the current fiscal environment, efforts are focused on developing regional models of care to minimise the effects of the postcode lottery.

Globally, comprehensive cancer networks are driving system wide transformation by integrating health services, research and education to improve health outcomes.^{9,10} A virtual network can achieve this here, linking universities, health services, industry, not for profits and patients and whānau. This transformative move will address fragmentation, improve access and embed equity, shifting the dial for cancer care.

Our role in building the research components of this future system is to nurture the conditions that allow a national comprehensive cancer network to emerge over time. As a philanthropic organisation, we can fund early initiatives, bring in co-funders and advocate so proven work can transition into long term government support. Throughout this journey, our enduring contribution will be to convene sector leaders and catalyse efforts that build momentum towards more integrated, equitable and sustainable cancer care.

Priority populations

Cancer does not affect everyone equally. Māori, Pacific peoples and those living in rural areas experience the greatest inequities in cancer outcomes across Aotearoa. Our strategy prioritises these populations to ensure research addresses their needs and systemic barriers, helping to eliminate these health gaps. For Māori, this means not only being identified as a priority population but also recognised as partners with decision making authority, actively shaping governance, research priorities and system design.

Strategic priorities

We fund world class research, innovation activities and infrastructure that advances our ambition of a future free from cancer. While our strategy describes the long term future we are working towards, it also sets out the priorities we will invest in over the 2026–2031 period to deliberately shape the system, enable collaboration and catalyse system change, rather than simply funding activity. In acknowledgement of the research funding environment becoming increasingly constrained, our priorities are responsive to the needs and realities of the sector. Our efforts and investment will be focused on three priority areas:

Strengthening the cancer research workforce

We will build capability and sustainability by:

- growing the Māori Cancer Researcher Awards.
- providing targeted support for early-career researchers to retain talent.
- funding professional development training for clinical researchers.
- supporting medical and allied health students to engage in research.

Elevating lived experience in research and innovation

We will ensure research reflects real world needs by:

- supporting people with lived experience of cancer to partner with researchers where there is likely to be benefit.
- ensuring whānau centred approaches are embedded in research and innovation where appropriate.
- raising public awareness of the value of cancer research, particularly clinical trials.

Increasing access to clinical trials

We will expand opportunities by:

- supporting multisite investigator initiated clinical trials.
- bringing together discovery and clinical researchers.
- funding bench to bedside activities that integrate research into care.

Enablers

To move closer to the big dream and achieve our strategic priorities, we will:

- Partner with other not for profits and align priorities to reduce duplication and amplify collective impact.
- Build and nurture partnerships across the sector including universities, health services, industry and communities to align efforts.
- Foster a culture of research impact through requirements for impact planning and support for dissemination of findings and relationships with communities.
- A new research funding strategy to fuel and sustain our efforts.

Our leadership role

We deliver unique and complementary value as part of the network through three key roles:

A national driver of cancer research priorities

As a substantial cancer research funder, we drive cancer research priorities with input from the sector, and partner with others to ensure alignment and impact.

Sector connectors and influencers

As a neutral, trusted convenor, we bridge silos and align efforts to maximise collective impact, sometimes leading and sometimes supporting partners to take the lead.

Elevator of lived experience

As the largest cancer consumer organisation, we elevate lived experiences to enable research and innovation to be more responsive to the needs of patients and whānau.

Across these roles, the Cancer Society places a strong emphasis on cultivating the conditions for research and innovation to lead to real world change.

Portfolio design and delivery

We will develop a balanced, diverse portfolio that enables both long term system change and short to medium term impact.

Each initiative will be assessed for:

- alignment with our leadership roles, strategic priorities and existing investments.
- contribution to equity, our priority populations and Te Tiriti obligations.
- synergy with existing efforts.
- potential for translation into policy, practice or system change.

Our portfolio will be delivered through contestable funding and strategic investments such as infrastructure and group support.

Outcomes by 2031

By the end of this five-year strategy, we will have laid strong foundations for long term impact. Our portfolio will reflect initiatives aligned with our priorities:

- Early career grant recipients are successful in gaining further funding and/or securing permanent employment positions. Increased numbers of Māori researchers enter the workforce and are retained.
- Support for multisite clinical trial infrastructure and collaborative grant structures enable trials to open across more locations, including regional settings. This is a springboard for partnerships and co-investment, to continue increasing access to clinical trials, including increased representation of priority populations.
- A national platform for lived experience engagement to support training and partnerships between researchers and people affected by cancer.
- Impact planning and reporting requirements embedded in all funded projects to support a culture of accountability and visibility.
- Collaborative frameworks and joint initiatives among not for profits and sector partners to reduce duplication and amplify impact.
- Policies and systems that capture and communicate impact stories to ensure transparency and build trust.

Key terms used

The following section provides definitions for a selection of key terms used throughout the *Research and Innovation Strategy*. These definitions are intended to support understanding of the strategy and its implementation. They are not exhaustive and do not represent a glossary of all terms referred to in the document.

Cancer Research¹¹

The study of cancer to create new knowledge to improve health outcomes across prevention, early detection, treatment, survivorship, and end of life care. Cancer research spans biomedical, clinical, health services, public health, behavioural, Māori health and Pacific health research.

Clinical trials¹²

Clinical trials are a type of research that studies new tests and treatments and evaluates their effects on human health outcomes. People volunteer to take part in clinical trials to test medical interventions including drugs, cells and other biological products, surgical procedures, radiological procedures, devices, behavioural treatments and preventive care.

Comprehensive cancer centre^{13,14}

A Comprehensive Cancer Centre (CCC) is an organisation that integrates cancer care, research, and education within a single coordinated framework. It provides a wide range of high-quality diagnostic and treatment services across major cancers, delivers multidisciplinary and patient-centred care, and demonstrates excellence in discovery, translational, clinical, and population research. CCCs maintain strong academic and international research partnerships, support clinical trials and robust data collection, and offer educational programmes for clinicians, researchers, and patients.

Comprehensive cancer network¹⁵

An integrated network that aims to address cancer disparities by connecting cancer services and research all across Aotearoa. Research that is undertaken by academic institutions, clinical research groups, and other partners forms a core component of the network, informing best practice and enabling continual improvement.

Discovery Research¹⁶

Cancer discovery research is foundational scientific investigation that builds our understanding of the biological mechanisms underlying cancer. It uses experimental and computational approaches to generate new knowledge that drives innovation and better outcomes in cancer prevention, detection, treatment and survivorship.

Innovation¹⁷

The implementation of a new or improved product or process.

Research Impact¹⁸

A change in individual, societal, economic or environmental wellbeing, beyond contributions to knowledge and skills.

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Our vision

**Working together
towards a future
free from cancer**

**Te mahi tahi mō te anamata
mate pukupuku kore**