our vision
the leading organisation
dedicated to reducing
the incidence of cancer
and ensuring the
best cancer care for
everyone in New Zealand

our mission
improving community
well-being by reducing the
incidence and impact of
cancer through the provision
of health promotion,
support services,
information and research
I am pleased to present the 2015 Annual Report for the Cancer Society of New Zealand Inc (CSNZ). The result was in line with expectations.

For the organisation at a governance and operational level, it has been a year of new beginnings with a change in the National President and the National Office CEO.

For my part, I took over as Acting President from Murray MacCormick, our elected National President, when he stepped down in February 2015. I would like to acknowledge his contribution to the Society. Murray served as National President for two-and-a-half years and was on the National Board for six. Murray had also been active within his local Auckland Division and served here for many years. His service to the organisation as a whole has been outstanding.

During the same year CEO Dalton Kelly tendered his resignation, which led to the recruitment and appointment of Claire Austin. While she has only been in the position a short time, Claire has already brought a sense of drive and of purpose that is indicative of the impressive background she has gained operating within health administration on both sides of the Tasman.

The National Board set for itself the task of reviewing the role of the National Office and re-establishing strong focus on the strategic direction of the Society. A national conference being a key initiative to ensure a united and cohesive national federation. In the meantime, Claire and her team have been tasked with ensuring that the Society grows its research programme, advocacy voice and profile to further its objectives: preventing and reducing the impact of cancer, as well as fostering the sustainability of Divisions and their services.

Greater alignment reinforces the values of openness and transparency across all of our activities, and further strengthens our position, nationwide, as a respected expert in the field of cancer policy, research and care.

I would like to thank the staff at National Office, many of whom have only joined us in recent times for a solid year’s work under trying circumstances. While some of the faces may have changed, the unwavering commitment to the cause has remained. This is evidenced by the growth of existing fundraising schemes and the initiation of several new ones.

This has in turn allowed the Society to increase funding for areas such as research, as well as in the supportive care process across every step of the cancer journey.

As with the National Office, so too must my thanks go to the tens of thousands of volunteers across the country who have given up their valuable time to help provide hope for those in need.

An organisation such as ours is only as good as its volunteers.

Ultimately, the level of public standing that the Society has been held in for so long is witness to the inspirational contributions that are being made each year by everyday Kiwis. The financial support of our donors and sponsors is critical to our work and deeply appreciated.

The Medical Director Dr Chris Atkinson resigned from his position this year. I would like to acknowledge the significant contribution that Chris has made to the Society over many decades. He has always made himself available, despite his tremendous workload, to comment on key medical issues as and when they arose. Chris played a pivotal role in the annual research grant round. I would like to personally thank Chris for his contribution and to wish him well for the future.

Finally, I would like to thank my colleagues on the National Board for their support and encouragement.

While change is not without its challenges, I believe we can look forward to the future with confidence.

Peter Hutchison, ACTING PRESIDENT
Kia ora tatou

George Bernard Shaw said that progress is impossible without change, and the CSNZ has seen a great deal of change in the last 12 months. We have farewelled a number of staff and directors, and welcomed new faces to the fold, built new partnerships and refreshed our vision for the future.

Our mission remains ever constant: “Improving community well-being by reducing the incidence and impact of cancer”. Over the last year we have taken a fresh look at ourselves: our strengths and our weaknesses, and found additional opportunities to work together to increase the impact of what we do, whether that is in grassroots communities or on the national stage. This year, we made a strong commitment to increase our efforts to address health inequalities, build upon our partnerships, and improve engagement with Māori and Pasifika peoples to ensure that we achieve the best outcomes we can for the people we serve.

The CSNZ’s National Office now has a dedicated research and policy unit - to guarantee growth in our evidence base and our advocacy. It will also ensure that we make the best use of the important, ground-breaking research that we fund every year.

Our organisation is entrusted with supporting the capability and sustainability of CSNZ Divisions and their services throughout New Zealand. As the national, independent, voice advocating on behalf of those affected by cancer, we continue to help shape public policy and advise decision-makers. We recognise the importance of staying connected to what’s real and what makes a difference in the community. We value the importance of strong relationships within the CSNZ. We have worked together and reviewed both our strategy and our structure to ensure that we remain a relevant, inclusive, sustainable and innovative organisation.

All of us are touched in one way or another by cancer. The CSNZ is the only organisation in New Zealand that works across the whole spectrum of prevention, research, health promotion, support and survivorship for all people and all cancers. However, we rely upon many people and organisations to do what we do.

We would not be able to do much at all without the help of our sponsors, our partners and the thousands of Kiwis from all walks of life who dip into their own pockets or give their time to our work. So thank you.

There are so many people to thank, but I would like to make a special mention of the ANZ bank and staff for their ongoing generosity and support for Daffodil Day. They continue to help raise public awareness of our work, including through our television campaign. This year, ANZ also played an important role with the ICC Cricket World Cup tournament. With the ICC and ANZ we were able to promote SunSmart messages, thank some hard-working staff and volunteers, and provide cancer survivors and their whānau with some well-needed respite from challenging times while watching some fantastic games of cricket!

I feel very privileged to have taken up the role of Chief Executive of the Cancer Society and very proud of the work we do. This report provides a few highlights of our achievements and work for the year. Finally, I would like to thank the CSNZ’s National Board, the country’s six Divisions and all staff and volunteers for their vision, support and guidance throughout this year, and for the years to come.

Ngā Mihi,

Claire Austin, CHIEF EXECUTIVE
National Board of the Cancer Society of New Zealand

The National Board (l to r): Garry Forgeson, Murray Loewenthal, Peter Hutchison (Acting President), Roy Cowley, Nigel Brown, Kathy Conlan, Claire Austin, Mike Kernaghan.

Not pictured: Stuart Bauld.

National Executives Committee

Chief Executives (l to r): Elizabeth Chesterman (Canterbury-West Coast), Mike Kernaghan (Otago and Southland), Judy Gould (Waikato/Bay of Plenty), Clare Crawley (Central Districts), John Loof (Auckland), Claire Austin (National) and Mike Smith (Wellington).
Health Promotion

Health promotion is both a discipline and a process. It focuses on empowering people and communities to take control of their health and well-being. Ranging from action at a community level to developing policies, it is founded on the principle that health and well-being begins in the settings of everyday life. In line with the Cancer Society Strategic Plan, Te Tiriti O Waitangi, te whare tapa whā and the World Health Organization Ottawa Charter for Health Promotion (WHO 1986), the team at National Office advocates for policy change and the creation of supportive environments. It supports Division and Centre staff to advocate on local issues and it advocates for policy change. It also provides information and supports communities to improve their local environments so that the healthy choice is the easier choice.

To support its work, the CSNZ works closely with many other agencies, in New Zealand and Australia, on tobacco control, skin cancer control, physical activity, alcohol- and nutrition-related cancers, and the wide range of topics covered under screening and early detection.

Tobacco Control

During 2014/15 we worked closely with a number of New Zealand agencies to effect policy change. CSNZ has representation on the National Smokefree Working Group (NSFWG), and the Smokefree Cars, Smokefree National Action Plan (SNAP) and Tobacco Tax sub-committees. The work of SNAP produced the NSFWG 2015-2018 National Action Plan, which has been circulated to all agencies involved in tobacco control.

Skin Cancer Control

Skin Cancer Control Strategy 2014-2017

As a member of the New Zealand Skin Cancer Primary Prevention and Early Detection Steering Committee, the CSNZ was involved in the development of the skin cancer control strategy 2014-2017.

The New Zealand Skin Cancer Primary Prevention and Early Detection Strategy is a three-year strategy that helps shape programmes and activities undertaken by key agencies. Its purpose is to reduce the incidence and impact of skin cancer in New Zealand.

The strategy identifies five intervention pathways: primary prevention; early detection; diagnosis and treatment; rehabilitation, support and palliative care; and research, evaluation and surveillance. The focus of the strategy is on primary prevention and, to a lesser extent, early detection.

Key medium-term outcomes are “increases in individual behaviours that protect people from excessive UVR exposure and increases in the number of effective sun safe settings”.
SunSmart Schools

The CSNZ SunSmart Schools Accreditation Programme (SSAP) continued to grow steadily in 2014/15. An additional 157 schools achieved accreditation bringing the total number of accredited schools to 795, or 35.2 percent of all schools. Another 10 percent are working towards accreditation. Since 2012 the number of schools joining the programme has increased by an average of 11 percent per year.

Keeping connected within the Education sector

The SunSmart Schools programme fits in the broader framework of Health Promoting Schools and alongside other education providers, so fostering these connections continues to be important.

Life Education Trust reaches 245,000 primary students annually and their newly developed website will include the SunSmart Schools programme and website link. The New Zealand School Trustees Association, New Zealand Principals Federation, TKI, Scouts New Zealand and the New Zealand Catholic Education Office have also been enlisted to help promote the programme and the new resources.

The CSNZ advised on the relevant Science Learning Hub pages about skin cancer and UV. SunSmart Schools has also become part of the Royal Society of New Zealand’s CREST programme - an award scheme that encourages school students in science and technology.

Curriculum Resources

The CSNZ was very excited to launch the new curriculum resources in July 2014. These cross-curricula resources were designed by educational experts and aligned with National Standards. They allow teachers to access lessons that are content-focused, hands-on and inquiry-based, for all four levels of the New Zealand Curriculum.

The resources received a ‘soft’ launch and were promoted in a variety of print and digital publications as well as webinars. CSNZ health promotion staff continue to promote the new resources through their networks, by presenting it to school cluster groups and on their visits to schools.

Feedback from teachers using the resources has been extremely positive - teachers find them flexible, easy to access and use, and they link well to their assessment needs.

With the curriculum resources now available as PDFs that can be freely downloaded, traffic to the site has been very strong. 11,500 users have visited the site in the last year, and the resources themselves are downloaded at an average rate of 12 times a day.

The high use of the resources really validates their aim. Even if a school is not becoming fully accredited in the SunSmart Schools programme, the fact that so many are using these resources means a growing number of students are learning the key messages of why and how we need to be SunSmart.

Visitors to the SunSmart Schools website can now also see a video of the resources in action at Sylvia Park School, Auckland. This was filmed with a Year 5 teacher and her class, with background information given by one of the resource authors and CSNZ staff.
The CSNZ is a non-profit organisation, and National Office receives no direct financial support from the Government. This ensures we can independently inform and lobby for the best services for people affected by cancer and influence policy that reduces cancer risks.

Our aim is to reduce the number of people affected by cancer by reducing cancer risks and increasing the health, well-being and quality of life for people living with cancer. Advocacy is an essential and powerful tool in all areas of the work we do. We fund research that identifies new treatments and quality of life issues, lobby for patient rights and healthy public policy such as tobacco control and sunbed legislation.

We communicate regularly with patients and their whānau/friends, medical professionals, volunteers, the media, representatives of Government, local community leaders, and many other organisations and individuals to improve the situation for those affected by cancer.

We also work in collaboration with many organisations and groups that focus on public health and health promotion initiatives that aim to reduce chronic diseases and cancer risks.

Tobacco is the biggest contributor to cancer-related deaths and as such we are very active in the area of tobacco control. We have made submissions to the New Zealand Health Select Committee on standardised (plain) tobacco packaging, and our current work includes advocating for ongoing increases in taxation, smokefree cars and public places.

CSNZ Divisions have been busy advocating for smokefree areas and engaging with regulatory and environmental change at a local government level.

We engaged with politicians to advance sunbed legislation and submitted to the New Zealand Health Select Committee. CSNZ advocated for a New Zealand ban of commercial sunbeds as they are dangerous, unnecessary and we have the highest skin cancer rate in the world.

Over the last year, CSNZ provided submissions on:

- The Smokefree Environments (Tobacco Plain Packaging) Amendment Bill, in support of plain packaging.
- The Health (Protection) Amendment Bill to ban the use of commercial solaria (sunbeds) in New Zealand.
- New Zealand and the Protocol to Eliminate Illicit Trade in Tobacco Products. CSNZ wrote in support of the Protocol.
- Alcohol advertising and sponsorship. The presentation was made to the Alcohol Advertising and Sponsorship Forum. The CSNZ recommended that policies should be implemented that reduce the availability and promotion of alcohol in New Zealand communities.
- The Exposure Standard for diesel particulate matter to Worksafe. The CSNZ supported the Massey University Centre for Public Health Research (CPHR) submission and recommended that WorkSafe work with CPHR to determine a diesel workplace exposure standard (WES),...
underpinned by the best available evidence and will (as best as possible) protect workers from the risk of lung cancer.

- The Policing (Cost Recovery) Amendment Bill. CSNZ recommended that Not-For-Profits are exempted from being charged for vetting of volunteers and that it should be enshrined in the legislation.

- The Health and Safety Reform Bill. CSNZ recommended that equal attention should be given in legislation to paid and volunteer staff. It also recommended that attention should be given to immediate and longer-term causes of workplace injury, disability and death, such as those from exposure to workplace carcinogens.

- Food Standards Australia New Zealand on Proposal P1030. Health Claims - Formulated Supplementary Sports Foods and Electrolyte Drinks. CSNZ did not support Proposal P1030 on the grounds that electrolyte drinks (like any other beverage/food) should meet the Nutrient Profiling Scoring Criteria (NPSC) if they were to make a health claim. CSNZ supported increased pricing and tighter marketing of sugary sweetened beverages as part of the P1030 proposal.

CANGO (Cancer Non-Governmental Organisations) is an alliance of nine prominent New Zealand cancer charities - Beat Bowel Cancer Aotearoa, Child Cancer Foundation, Hospice New Zealand, Leukaemia & Blood Cancer, New Zealand Gynaecological Cancer Foundation, Prostate Cancer Foundation, Melanoma Foundation, Breast Cancer Foundation and CSNZ.

The group was formed in 2007 in an effort to increase collaboration among cancer charities. Chief Executives of member organisations meet quarterly to discuss key issues facing the sector; to meet and share information with representatives from the Ministry of Health, and others working in cancer-related areas; and to work together on specific initiatives that reflect the shared goal of all members to reduce the incidence and impact of cancer on the country.

We worked with the CANGO group to promote the following goals:

- Reducing modifiable risk factors for cancer.
- Achieving equity for all New Zealanders across the cancer care continuum.
- Advocating for a roll out of the bowel cancer screening programme.
- The development of a cancer workforce plan.
- Improved information management and investment in enhanced and connected clinical cancer registries and IT systems.
- Increased access and investment in clinical trials by District Health Boards.
- Ensure investment to meet the population's needs for palliative and end of life care.
DID YOU KNOW THAT RIGHT ACROSS NEW ZEALAND WE WORK WITH 3,758 COMMITTED VOLUNTEERS WHO REGULARLY ASSIST US WITH THEIR DEDICATION, SKILLS AND EXPERTISE?
One of the CSNZ’s biggest challenges is ensuring that every New Zealander has access to the cancer information and the support and care that they need no matter where they live.

CSNZ Divisions achieve this through the dedicated efforts of 130 professional staff and hundreds of volunteers based in centres across urban and rural New Zealand. In 2015 we supported over 7,300 people living with cancer. And through our support, education programmes and Cancer Connect, we put 2,000 people in contact with others who are going through a similar experience to their own.

Our Cancer Information Helpline staff spoke with almost 10,000 callers, many of whom asked for information about their cancer diagnosis and treatment. They also asked for advice on how to access services and the practical help that people need. About 20 percent needed emotional support and counselling.

CSNZ accommodation services in Auckland, Hamilton, Wellington, Christchurch and Dunedin became a home away from home for many people attending treatment in Regional Cancer Treatment Centres. CSNZ Divisions provided 47,000 bed nights across our five accommodation services during the year – that’s the equivalent of 125 beds full every day of the year.

None of this would be possible without the vast commitment made by hundreds of volunteers who provide practical and emotional support to people living with cancer. Volunteer drivers made 18,700 trips with patients to their treatment appointments, and 127 hospital-based volunteers provided support to patients and their families in oncology wards. They cover an impressive 67 shifts each week.

This year the CSNZ developed two more online volunteer-orientation modules. These modules give new volunteers an overview of the Cancer Society activities and services across the country. They complement the face-to-face orientation that each of the volunteers receive in their own CSNZ Divisions.

IN 2014 THE CANTERBURY WEST COAST RURAL VOLUNTEERS WERE AWARDED THE MINISTER OF HEALTH’S INAUGURAL ‘HEALTH VOLUNTEER OF THE YEAR AWARD’. THESE VOLUNTEERS STOOD OUT FOR THE IMPACT THEY HAVE MADE ON THE LIVES OF HUNDREDS IN SOUTH ISLAND RURAL COMMUNITIES. THIS IMPACT HAS CONTINUED OVER MANY YEARS, WITH SEVERAL GROUPS MORE THAN 30 YEARS OLD, AND SPREAD ACROSS CANTERBURY AND THE WEST COAST.

WHETHER IT’S PROVIDING TRANSPORT TO TREATMENT APPOINTMENTS, HOME VISITS, FOOD OR COMPANIONSHIP, VOLUNTEERS’ SUPPORT IS GREATLY VALUED BY CANCER PATIENTS AND THEIR FAMILIES.”
In 2014/15 we continued to review our resources and looked to add a new publication to our cancer information catalogue. One of the publications to be reviewed this year was the second edition of our booklet *Living with Dry Mouth*. The booklet will inform and offer suggestions to people who have a dry mouth as a result of chemotherapy, medications or radiotherapy. It has sections on food choices and preparation tips, many of which have been contributed by people with a dry mouth.

Our thanks go to all those who voluntarily contributed their feedback and helped us to ensure that the booklet contains clear and relevant information for affected people. We thank specialist reviewers Charlene E. Tan, Helen Brown, Dr Jane Elmslie, Jonathan Rea, Lea Stening, Tory Crowder and Dr David Hay. We also appreciated the chance to hear from our wonderful lay reviewers who told us of their experiences.

This year we also worked on the often-requested new booklet *Supporting Someone with Cancer*. Cancer affects the whānau and friends of those diagnosed, and this booklet provides information and practical suggestions for coping when a loved one has cancer. The resource was made possible with the help of specialist reviewers Virginia Lee, Margaret Alve, the CSNZ Auckland Northland’s Psychology Service Team, and the many lay reviewers who offered their invaluable suggestions.

CSNZ also thanks our Kaumatua, Hohepa MacDougall, who ensured that both booklets have te reo Māori translations of key messages.
We are proud that the CSNZ is regarded as one of New Zealand’s most valued charities. We are sincerely grateful to everyone who chose to donate and/or support our cause during this past financial year.

Despite the very challenging economic climate, the unwavering support of individual Kiwis, donors and organisations helped fund the following CSNZ Division services:

- Supportive care - everyone affected by cancer deserves support for themselves and their families so they don’t face cancer alone.
- Information - we distributed over 40,000 pamphlets and booklets about cancer.
- The CSNZ Division-run 0800 CANCER helpline.
- Fund vital research into the causes and treatments of all types of cancer. Finding a cure for cancer begins with scientific research. The CSNZ also invests in quality social and behavioural cancer research.
- Reduce cancer risk through health promotion and education.
- Division accommodation services for people with cancer as well as their families/whānau who had to travel away from their homes for treatment. There were 47,000 bed nights provided in 2014/2015.
- Counselling services.
- Volunteer services, including nearly 19,000 trips for patients to get their cancer treatment, and 127 oncology support volunteers working alongside health professionals in the oncology departments.
- Support and education programmes throughout New Zealand.

The challenging times reinforce the importance of the CSNZ’s long-term commitment to developing and building sustainable fundraising income to help ensure the long-term surety of these important core services.

**Daffodil Day 2014**

Daffodil Day is the CSNZ’s flagship event, which culminates with a street appeal on the last Friday of August.

We are grateful for the valuable support received from many organisations and the thousands of people of all ages who donate time and money, many of whom host events and fundraise for our cause.

In 2014 the CSNZ delivered its twenty-fourth CSNZ nationwide Daffodil Day in conjunction with Principal Sponsor, ANZ Bank. Nationally the CSNZ raised $4,877,372 with the support of almost 425 volunteer area coordinators and more than 9,880 volunteer collectors. The street appeal requires a huge number of volunteers and we appreciate the support of these special people who help the CSNZ deliver New Zealand’s largest face to face fundraising event. In 2014 they were present at 1,681 sites across the country.

We are most grateful to ANZ, Principal Sponsor of Daffodil Day. The valuable support of management and staff, and their proprietary media across more than 255 branches provides a platform for Daffodil Day. The support enables the CSNZ to keep
campaign costs to a minimum. Almost 10,000 staff assist with fundraising, including the sale of Daffodil Day merchandise and supporting the PR.

In 2014, further to ANZ’s tremendous fundraising effort, the bank also held a special Gala Dinner to celebrate the first anniversary of the new ANZ. Held in early September this event promoted our cause to major customers and stakeholders and the charity auction raised $147,884, which was a fabulous result. Noel Leeming also raised $30,298.

The CSNZ acknowledges the support of its creative agency, Creative Marketing, media agency, Communic8 Ltd and the many other media organisations who support advertising for Daffodil Day.

APN NZ Media Bauer Media
Choice TV
Fairfax Media
Māori Television
Mediaworks Parkside Media
Signature Promotions
Sky TV
The Radio Bureau
TVNZ

Acknowledgement Major Sponsor ANZ

The CSNZ is truely grateful to ANZ for the many new initiatives it has introduced to further develop our relationship, including an association with NZ Cricket and the very successful ANZ International Series.

Bequests

Bequests are a vital source of philanthropic support, representing more than one-third of all fundraising income.

We appreciate the kindness and forethought of these most dedicated and visionary donors. The CSNZ has an active bequest programme and it welcomes the opportunity to honour supporters during their lifetime while they are able to accept our thanks and appreciation.

Trusts and Foundations

We are tremendously grateful to the Trustees of the Trusts and Foundations who have awarded grants to the CSNZ in an ever increasing regulatory environment. The money received from Trusts and Foundations represents an important source of income which helps the CSNZ sustain core services and further diversify its fundraising. The national portfolio also helps reduce duplication across the CSNZ and has established clear guidelines in terms of national fundraising priorities.

Genesis Oncology Trust
Lottery Community

Special thanks to NZ Guardian Trust for choosing to feature the CSNZ organisation in its 2014 calendar. We are most grateful for the valuable endorsement to NZGT clients and stakeholders.

Soar Printing

We would like to acknowledge the valuable sponsorship received from Soar Printing, the CSNZ’s 2014 National Print Sponsor for Relay For Life.

Payroll Giving

The CSNZ is recognised by the IRD as an approved donee organisation, so can receive donations by way of Payroll Giving.

The CSNZ has been nominated by a number of organisations to receive donations from Payroll Giving, which provide a tax credit of 33.3 percent on the total deduction.

The CSNZ sincerely appreciates the valuable support it has received from the following organisations and their employees:

AHL Group
Department of Internal Affairs
Kiwi Karma
iPayroll
Inland Revenue Department
Ministry of Social Development
Rabobank
Spark Foundation
The Warehouse
SE Payton J Lowe
Community fundraising events
The CSNZ has been fortunate to receive proceeds from a number of unique fundraising events and cause related programmes organised by people in the community. The majority of these events require many hours of planning and also rely on the generosity and goodwill of supporters.

Walking Stars 2014
The CSNZ was pleased to be selected as a beneficiary of this event yet again, which was introduced into New Zealand by event director, Mel Lloyd in 2013. Walking Stars is New Zealand’s first night time walking half marathon and it attracted a big turnout this year.

The CSNZ is also very fortunate Walking Stars has been structured so that fundraising income comes directly to the cause to help sustain the CSNZ’s free support services and to fund research, primarily social and behavioural cancer research.

The event raised $196,396 this year, which is a tremendous result, and this wonderful support has been applied right across New Zealand.

We are sincerely grateful to Mel for creating such a fun-filled and novel event. Our grateful thanks to each and every-one of the walkers who raised valuable funds and the thousands of donors who chose to donate in support of the CSNZ.

Ride for Cancer 2014
Ride for Cancer is a national fundraising event organised by New Zealand firefighters in memory of firefighters lost to cancer.

The third annual Ride for Cancer raised $29,663 for the Cancer Society Social & Behavioural Research Unit in the Department of Preventive & Social Medicine at the University of Otago.

Acknowledgement
Please do take some time to acknowledge our valued supporters listed below:

Major Sponsor of the Cancer Society, Principal Sponsor of Daffodil Day and Official Bank: ANZ

National Sponsors:
Fairfax Magazines - Daffodil Day / DM campaign
Ryman Healthcare
Soar Printing
The Breeze (MediaWorks)

Key Supporters:
Movember New Zealand
Connect NZ - Men’s Health
Mitre 10 MEGA - Upper Hutt
Mitre 10 MEGA - Petone
Kiwi Karma

Signature Promotions

Your help: Giving Care, Comfort and Hope
Everyone living with cancer deserves support for themselves and their families, and your support will help ensure they don’t face cancer alone. Please consider how you can support the CSNZ:
• donate by mail, in person, by text or through our secure website
• encourage your employer to make a tax-deductible donation
• organise your own fundraising event to raise funds and awareness
• plan a bequest in your will
• plan a regular donation in conjunction with a workplace Payroll Giving scheme
• sponsorship
• support events: Relay For Life, Daffodil Day, Walking Stars and Ride For Cancer.

To find out more, visit our website: www.cancernz.org.nz
This year, the CSNZ was the New Zealand Charity Partner of one of the biggest sporting events of the year: the ICC Cricket World Cup.

From our volunteers, patients, SunSmart schools and CSNZ staff right across New Zealand, we would like to thank the Black Caps and the ICC Cricket World Cup for giving us the opportunity to be a part of the event’s matches and coaching clinics. Throughout the tournament, your hospitality and support were second to none.

Many patients who attended the games have been going through difficult times and it was fabulous for them and some of the volunteers and staff that work so hard, to have a day out at the cricket and be a part of the wonderful atmosphere. It was also a fantastic chance for some lucky schools who were chosen to meet their cricket idols and learn some new skills at coaching clinics.

The tournament was an exciting time for us, seeing our messages proudly portrayed at the games. Cricket World Cup volunteers looked great, role-modelling in their broad-brimmed hats, showing our international visitors how to stay safe in the harsh sun.

As a charity we really appreciate the opportunities that partnering with an event like the ICC Cricket World Cup brings.
This summer we painted New Zealand purple! Relay For Life is one of the CSNZ’s key community engagement and fundraising events, and 2015 marked another successful year.

Relay for Life is community-driven and volunteer-led, involving hundreds of hard-working volunteers and CSNZ staff. 20 Relays were held from Whangarei in the North to Dunedin in the South, Gisborne in the East and Hokitika in the West! Together, 19,284 people formed 1,222 teams and raised an amazing $3.06 million for the CSNZ.

A Relay event is also an opportunity for communities to come together to remember loved ones who have been lost to cancer. This year, 4,870 people who have survived cancer or cared for someone who has cancer, celebrated their lives and their work.

CSNZ continuously works to increase our support for Relay for Life volunteers and staff in organising this important event. This year we developed an online module that explained what Relay is all about.


CSNZ put together a short video that Cancer Society Divisions can use to promote their Relays:

https://youtu.be/eLOz3L89Gs

We also introduced an online ordering system for event resources and merchandise, which has streamlined distribution and improved our stock management.

Celebrate, Remember, Fight Back!
Whakanui, Maumaharatia, Tū Atu!
Hutt International Boys School runner up for the Minister of Health Volunteer Awards.

Over the past 12 years, Hutt International Boys School has made a huge contribution to the Cancer Society through its participation in Relay for Life. This year alone, students raised $79,000 to support CSNZ.

This tremendous contribution was also formally recognised when the school was runner up in the 2014 Minister of Health Volunteer Awards.
The CSNZ awarded the following Grants in the 2014/2015 year:

Dr Noelyn Hung, Dr Tama Slatter and Dr Janice Royds
Pathology, Dunedin School of Medicine
Telomere maintenance in Uterine Cancer:
a powerful and prognostic tool?
This team was granted $136,364 over two years to
study a group of uterine tumours using innovative
ways to improve cell survival.
Who wants chemotherapy or radiotherapy if you
don’t need it? The potential of some uterine
cancers to spread is difficult to predict, so
deciding whether or not to have chemotherapy or
radiotherapy is also very difficult. The CSNZ
funding has allowed them to show that badly
behaving cancers repair the ends of chromosomes
telomeres, providing a growth advantage), and
that this is detectable at the time of diagnosis.
Now they are working on a blood test to detect
this repair, and applying this knowledge to similar
brain cancers.

Associate Professor Michael Hay and Dr Kevin Hicks
University of Auckland
Novel radiosensitisers to improve stereotactic
body radiotherapy
This team was granted $120,295 over one year to
identify new drugs that sensitise tumour cells
with low oxygen levels (hypoxia) to radiotherapy.
They have identified several new compounds that
mimic oxygen and improve the effect of
radiotherapy on human tumour models. They do
this by killing the radio-resistant hypoxic tumour
cells. These compounds have the potential to work
with an emerging technology, stereotactic body
radiotherapy, which uses fewer larger fractions of
radiation and is a shorter treatment.

Professor Franca Ronchese and Dr Melanie McConnell
Malaghan Institute of Medical Research, Wellington
Control of anti-tumour immune responses by
dendritic cell (DC) subsets
This team was granted $317,789 over two years to
identify which of the many different types of dendritic
cells is necessary for tumour immunotherapy.
Immunotherapy hopes to unlock the body’s own
fight against cancer; finding ways to stimulate
our immune cells to attack cancer cells, in
contrast to established approaches that target
cancer directly.
Finding ways to stimulate our immune system to
detect and destroy cancer cells in the ways they
do when we are attacked by infection, requires us
to understand DCs more fully. They are well known
for their complexity. There are many types and
each type is likely to play a different role in the
immune response. The function of each DC type in
tumours is not fully understood and so there is
much more to be learned.
Through their support, CSNZ has helped to make
such studies possible.
Talented PhD student Connie Gilfillan is
investigating the use of “mimics of infection” to
vaccinate against tumours. A cancer vaccine that
mimics infection, Bacillus Calmette-Guérin (BCG)
is used therapeutically to treat bladder cancer
because it stimulates immune responses that can destroy cancer cells within the bladder. Connie’s research is comparing the effects of two such vaccines when all DCs are present, or when one subset is missing. Initial results have suggested a surprising conclusion: that there isn’t one critically important DC, but that, depending on the immunotherapy, different types of DCs are required.

As there are many different immunotherapy approaches, future research will investigate how combining immunotherapies might improve overall success by enlisting different subsets of DCs in the task of fighting tumours.

Dr Alex McLellan, Professor Bridget Robinson and Dr James Faed
Malaghan Institute of Medical Research, Wellington

Tumour vesicle induced coagulation
This team was granted $189,889 over two years to determine how coagulation (blood clotting) factors affect cancer progression and thrombosis. The researchers are targeting molecules involved in thrombosis and cancer progression to improve outcomes for cancer patients.

Thrombosis is the second leading cause of death in cancer patients, and this research will lead to new drugs to target thrombosis and cancer progression.

Dr Merilyn Hibma and Professor Ian Frazer
Department of Microbiology and Immunology, Otago University, Dunedin

Human Papillomavirus (HPV) regulation of the skin immune microenvironment in pre-malignancy
This team was granted $302,289 over three years to study the effects of the cancer-causing proteins of HPV on the immune response in the skin.

They have found that immune cells that should be activated by HPV are instead suppressed by the virus. They are exploring this more so that they can understand how they could combat existing infection using our body’s immune system.

Dr Margaret Currie, Dr Elizabeth Phillips, Dr Jinny Willis and Professor Bridget Robinson
Pathology Department, University of Otago, Christchurch

Improving Chemotherapy in Obese Breast Cancer Patients
This team was granted $235,458 over two years to study the local effects of fat cells on breast cancer cell invasion, migration and response to chemotherapy.

They have found that when breast fat cells and breast cancer cells are grown together, both cell types undergo major transformations. Their results show the fat cells release nutrients and other factors that support cancer cell survival, and the breast cancer cells become more invasive and resistant to the toxic effects of chemotherapy. The team are now studying these changes in breast tumour samples, and searching for drugs that can block the interaction between fat and cancer cells. Their ultimate aim is to improve chemotherapy treatment and survival in overweight and obese breast cancer patients.

Training Scholarships
The CSNZ has awarded four new scholarships to allow students to undertake advanced research in the field of cancer, leading to a Doctorate in Philosophy from a New Zealand University.

1. Stephen Tat: BSc Honours student, Victoria University of Wellington

Study of novel analogues of a microtubule stabilising drug Zampanolide. Zampanolide (from marine sea sponge) attaches to microtubules that should reduce the development of drug resistance.

Supervisor: Dr Joanne Harvey

2. Elyce du Mez: BSc First Class Honours, Otago University

To identify which of the ten Toll-like receptors (TLR) in humans are expressed on antigen presenting cells that are the sentinel cells of the immune system. A vaccine could be developed from a TLR ligand.

Supervisor: Dr Catherine Angel

3. Cho Hong; MSc University of Auckland

To investigate how hypoxia-activated pro drugs can have a direct anti-cancer effect (called the bystander effect).

Supervisor: Professor Bill Wilson and Associate Professor Michael Hay

4. Fraser Putt: B Med Sci, Victoria University of Wellington

Do non-nicotine components of cigarette smoke contribute to tobacco addiction?

Supervisor: Bronwyn Kivell
In 2014/15 the Unit’s projects included:

**Tobacco control:**
- Smokefree outdoor areas in New Zealand.
- Smokefree Tertiary Institutions.
- The association of smoking with drinking may provide opportunities to reduce smoking among students.
- Media portrayal of tobacco control policies in New Zealand.
- Tobacco smoking, media and consumer orientation among New Zealand adolescents.
- Tobacco and alcohol imagery on New Zealand television.
- The impact of point-of-sale tobacco promotion on smoking.
- Perceptions of tobacco retailing policies.
- Price of tobacco in New Zealand.
- Low-frequency social smoking.
- Smoking cessation and weight gain.
Ultraviolet radiation exposure:

- Quantifying the association between sun exposure and vitamin D status.
- Sunburn in a New Zealand urban population 1994-2006.
- Systematic review of interventions for the primary prevention of skin cancer.
- Skin cancer primary prevention in New Zealand public secondary schools.
- Adolescent sports events: an observational study.
- Validity and reliability of measures of photosensitivity and skin colour.

Alcohol:

- Evaluation of New Zealand’s alcohol laws.

Psycho-social spiritual factors:

- 0800 Phone Service Model Review.
- Investigation of oncologists’ perceptions regarding the role of GPs in supportive care of cancer patients.
- Cancer Society of New Zealand Supportive Care programme for men with prostate and testicular cancer: literature review.

Cancer Awareness:

- Changes in awareness of cancer risk factors from 2001 to 2015.
- Awareness of causes of cancer mortality and beliefs about early detection and treatment among New Zealand adults.
- Patterns of cancer-information seeking among New Zealand adults, and awareness of cancer support services among this group.

Cancer awareness:

Staying well and being connected

One of our goals for cancer control in New Zealand is to raise public awareness of the lifestyle factors that can reduce the risk of getting cancer. We know that around one third of all cancers can be prevented by lifestyle changes. Understanding these positive behaviour changes can help empower individuals, families and communities to take steps to support healthier lifestyle choices.

The goal of the Staying well and being connected study was to explore how aware New Zealanders are about cancer risks and also where, why and how they find information about cancer. Last summer we conducted over 1,000 telephone interviews with adults randomly selected from all over New Zealand. Some of our initial findings are shared here.

In terms of understanding cancer risk, we found that over 90 percent of people are aware that there are things they can do to reduce their risk of cancer. Specifically, people were able to identify the benefits of being smokefree, eating fruit and vegetables and avoiding sunburn. Much fewer, however, were aware of the benefits of maintaining a healthy weight or reduced alcohol consumption.

When we asked about people’s access to cancer information, almost one-third of individuals had actively searched for information about cancer over the past year. The most common reasons for doing this were due to a loved one having cancer, to educate themselves about cancer, or because they had personally experienced either a positive screening test result or had something they thought might be a symptom. Individuals reported the most useful source of information being the internet, followed by health professionals, books, The Cancer Society and the general media.

We still have many more questions that can be answered by our rich dataset; for example, what do people understand about risk factors for specific cancer types, are there differences between men and women, how about for younger versus older participants? We look forward to exploring the study findings in greater detail over the course of this year and, as always, remain grateful for the time and knowledge that was shared by our study participants and for the support of the Cancer Society to carry out this research.
Origins
The Cancer Society of New Zealand Incorporated (the Society) was established in 1963.

Organisational Structure
The CSNZ is a federation of seven organisations and sixteen centres. Its seven organisations are: the National Office, Auckland, Waikato/Bay of Plenty, Central Districts (Taranaki, Wanganui, Gisborne, Hawkes Bay and Manawatu), Wellington (including Nelson and Marlborough) and Canterbury-West Coast, Otago and Southland. Core areas of activity are carried out by all Divisions and each Division will fulfil its local role according to how it wishes to address its community’s needs.

Governance Structure
The six Divisions appoint a Board that comprises a representative from each Division and a President to govern the CSNZ. The Chair of the National Finance Audit and Risk Advisory Committee is present on the Board as a voting member. The Chair of NEC and the Chief Executive of National Office attend in an ex officio capacity. All Board members are volunteers.

Mission Statement
Improving community well-being by reducing the incidence and impact of cancer.

Role of CSNZ
CSNZ exists to promote and advocate for agreed policy goals, provide expert advice and optimise the CSNZ’s research programme. It acts as an information conduit, supporting Divisions with the provision and exchange of information, innovation and best practice. It works to support and strengthen the sustainability of Divisions and maximise their services. CSNZ also coordinates activities that can best be done on a national basis.

This work is headed by the Chief Executive. National advisory committees operate in the areas of finance, health promotion and research. The committees work closely with National Office staff to provide expert advice to the CSNZ Board. NEC also acts as an Advisory Committee to the Board. Assessment of applications for research grants is undertaken by the National Scientific Committee in order to provide independent rigour to decision making.

Funding
CSNZ receives no government funding. Core services and operational responsibilities are funded by Division levies calculated on a population basis.

Administration revenue is also supplemented by income from a small investment portfolio and from royalties and dividends from Daffodil Enterprises Ltd, the wholly CSNZ-owned trading company.

Sponsorship
ANZ provides major support through its sponsorship of Daffodil Day and the fundraising efforts of its staff. All funds raised from Daffodil Day are returned to Divisions. We are very grateful to ANZ, who is a major sponsor of the organisation and the official bank of the CSNZ.

Financial Reporting
It is important to note that the financial statements in this report reflect the activities of the National Office only. The Divisions, being autonomous organisations, publish their own independent financial statements.
Elected Officers
(as at time of publication)

Acting President
Mr Peter Hutchison (Otago and Southland Division)

Patron
Her Majesty Queen Elizabeth II

National Board Representatives
Auckland Division
Mr Nigel Brown
Mr Stuart Bauld

Waikato/Bay of Plenty
Mr Murray Loewenthal

Central Districts Division
Dr Garry Forgeson

Wellington Division
Mr Roy Cowley

Canterbury-West Coast Division
Ms Kathy Conlan

Otago and Southland Division
Mr Peter Hutchison

Chief Executive Representative
Mr Mike Kernaghan (Otago and Southland Division).

National Finance Advisory Committee Chair
Mr Stuart Bauld

Meritorious Award Recipients
Mr William Kelso
Dr David Perez
Dr Peter Fitzgerald
Dr David Becroft
Assoc Prof Chris Atkinson
Mr Athol Hutton
Mr Tony Schramm
Mr Geoff Clatworthy
Mr Carrick Davidson
Mr Richard Gray
Mr Brian Tyler
Ms Kate Reid
Dr Simon Allan
Mr Russell McIlroy

Appointed Officers
National Health Promotion Advisory Committee Chair
Ms Ann Shaw

National Scientific Advisory Committee Chair
Prof Brett Delahun	

Past Presidents
Sir James Elliott 1925–1955
Dr P Lynch 1956–1957
Mr L A Bennett 1958–1959
Professor Eric D’Ath 1960–1961
Mr J Maxwell Clarke 1962–1963
Mr R O’Regan 1964–1965
Mr J K Davidson 1966–1968
Mr H Gaudin 1967–1970
Mr J M Tyler 1971–1972
Mr C T Collins 1973–1974
Mr Arthur Ibbotson 1975–1976
Mr G W Holland 1977–1978

Mr E Gifford 1979–1980
Dr D W Urquhart 1981–1982
Mr B Prior 1983–1984
Mr John Heslop 1985–1986
Dr P R Kelleher 1987–1988
Mr Don Carnachan 1989–1990
Dr Chris Atkinson 1991–1994
Prof John Blennerhassett 1995–1996
Mr John Kelly 1997–2000
Dr David Perez 2001–2002
Mr Richard Gray 2003–2006
Mr Russell McIlroy 2007–2010
Mr Clive Clelland 2010–2013
Mr Murray MacCormick 2013–2015

National Office Staff
Chief Executive
Claire Austin
Kaumatua
Hohepa MacDougall
Medical Director
Dr Christopher Jackson
Capacity and Development Manager
Helga Wientjes
Policy and Research Manager
Louise Sandford
Business Systems Development Manager
Mark Vallance
Health Promotion and Campaigns Manager
Shayne Nahu
Information Systems and Communications Manager
Matt McIlraith
Health Promotion Advisor
Vikki Ambrose
Health Promotion Advisor
Alishi Weststrate
Supportive Care Advisor
Marie Daly
National Men’s Health Coordinator
Steve Kenny
Communications Officer
Hypatia Stacy-Baynes
National Projects Support Officer
Annita Patel
Policy Analyst
Karen Heine
Office Manager
Milissa Anselmi
Reception/Administration Assistant
Gloria Love
Executive Assistant
Melanie Metuariki

Auditors
Deloitte
10 Brandon Street, Wellington

Solicitors
Kensington Swan
89 The Terrace, Wellington

Bankers
ANZ
PO Box 2846, Wellington

Life Members
Mr B C Prior
Professor John Gavin
Mr John Heslop
Dr Pat Kelleher
Dr Alan Gray
Professor B Heslop
Dr Peter Fitzgerald

Auditors
Deloitte
10 Brandon Street, Wellington

Solicitors
Kensington Swan
89 The Terrace, Wellington

Bankers
ANZ
PO Box 2846, Wellington

Daffodil Enterprises LTD
Marketing Manager
Fiona Mawley

National Office
Level 2, Red Cross House,
69 Molesworth St, PO Box 12 700,
Wellington 6144, New Zealand
Telephone: (04) 494 7270
Fax: (04) 494 7271

CANCER SOCIETY OF NEW ZEALAND | 25
SUMMARY FOR THE YEAR ENDING 31ST MARCH 2015

This is a summary of the financial statements of the Cancer Society of New Zealand Incorporated, for the year ending 31 March 2015. The information was extracted from the full financial statements as audited by Deloitte Wellington, which were approved by the Board on 11 August 2015. Those full financial statements comply with Generally Accepted Accounting Practices in New Zealand (NZ GAAP). They comply with the New Zealand equivalents to International Financial Reporting Standards (NZ IFRS) and other applicable Financial Reporting Standards, as appropriate for public benefit entities. The accounts are available on application to the Cancer Society of New Zealand Incorporated at PO Box 12700, Wellington.

The summary financial statements have been prepared in accordance with FRS-43: Summary Financial Statements. They cannot be expected to provide as complete an understanding as provided by the full financial report.

The presentation currency is in New Zealand dollars. All amounts are stated in $000’s.
AUDITOR’S REPORT

REPORT OF THE INDEPENDENT AUDITOR ON THE SUMMARY FINANCIAL STATEMENTS TO THE NATIONAL BOARD OF THE CANCER SOCIETY OF NEW ZEALAND INCORPORATED

The accompanying summary financial statements of the Cancer Society of New Zealand Incorporated and its subsidiaries (‘the Group’) on page 28, which comprise the summary consolidated statement of financial position as at 31 March 2015, and the summary consolidated statement of financial performance for the year then ended, are derived from the audited consolidated financial statements of the Group for the year ended 31 March 2015. We expressed an unmodified audit opinion on those consolidated financial statements in our report dated 11 August 2015.

The summary financial statements do not contain all the disclosures required for full consolidated financial statements under and generally accepted accounting practice in New Zealand. Reading the summary financial statements, therefore, is not a substitute for reading the audited consolidated financial statements of the Group.

This report is made solely to the National Board, as a body, for the purpose of expressing an opinion on the summary financial statements for the year ended 31 March 2015. Our audit has been undertaken so that we might state to the National Board those matters we are required to state to them in an auditor’s report on summary financial statements and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the company’s shareholders as a body, for our audit work, for this report, or for the opinions we have formed.

National Board’s Responsibility for the Summary Financial Statements

The National Board is responsible for the preparation of a summary of the audited consolidated financial statements, in accordance with FRS-43: Summary Financial Statements.

Auditor’s Responsibility

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with International Standards on Auditing (New Zealand) (ISA (NZ)) 810: Engagements to Report on Summary Financial Statements.

Other than in our capacity as auditor we have no relationship with or interests in the Society or Group.

Opinion

In our opinion, the summary financial statements derived from the audited consolidated financial statements of Cancer Society of New Zealand Incorporated and its subsidiaries for the year ended 31 March 2015 are consistent, in all material respects, with those financial statements, in accordance with FRS-43: Summary Financial Statements.

Chartered Accountants
11 August 2015
Wellington, New Zealand

This audit report relates to the summary financial statements of Cancer Society of New Zealand Incorporated for the year ended 31 March 2015 included on Cancer Society of New Zealand Incorporated’s website. The National Board is responsible for the maintenance and integrity of the Cancer Society of New Zealand Incorporated’s website. We have not been engaged to report on the integrity of Cancer Society of New Zealand Incorporated’s website. We accept no responsibility for any changes that may have occurred to the summary financial statements since they were initially presented on the website. The audit report refers only to the summary financial statements named above. It does not provide an opinion on any other information which may have been hyperlinked to/from these summary financial statements. If readers of this report are concerned with the inherent risks arising from electronic data communication they should refer to the published hard copy of the audited summary financial statements and related audit report dated 11 August 2015 to confirm the information included in the audited summary financial statements presented on this website. Legislation in New Zealand governing the preparation and dissemination of financial statements and summary financial statements may differ from legislation in other jurisdictions.
## FINANCIAL SUMMARY
Cancer Society of New Zealand Incorporated
Financial Summary for the year ended 31st of March 2015

### Summary Statement of Financial Performance

For the Year Ended 31 March 2015

<table>
<thead>
<tr>
<th></th>
<th>GROUP 2015 $000s</th>
<th>GROUP 2014 $000s</th>
<th>PARENT 2015 $000s</th>
<th>PARENT 2014 $000s</th>
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<tr>
<td>Divisional Levies</td>
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<td>Royalties- Sunscreen/Sales/Other Products</td>
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<td>619</td>
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<td>Daffodil Enterprises Royalty</td>
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<td>-</td>
<td>156</td>
<td>154</td>
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<tr>
<td>Income for Movember</td>
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<td>376</td>
<td>1,293</td>
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<td>Management Fee from Daffodil Enterprises Limited</td>
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<td>-</td>
<td>67</td>
<td>65</td>
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<tr>
<td>Daffodil Day Donations</td>
<td>1,783</td>
<td>673</td>
<td>1,783</td>
<td>673</td>
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<tr>
<td>Donations and Grants</td>
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<td>312</td>
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<tr>
<td>Fundraising Income</td>
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<td>-</td>
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<tr>
<td>Investment Income</td>
<td>490</td>
<td>440</td>
<td>480</td>
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<tr>
<td>Other Income</td>
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<td>115</td>
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<tr>
<td><strong>Total Income</strong></td>
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<td><strong>5,979</strong></td>
<td><strong>7,857</strong></td>
<td><strong>5,695</strong></td>
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<td>Administration</td>
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<td>Business Development</td>
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<td>Communications</td>
<td>28</td>
<td>53</td>
<td>28</td>
<td>53</td>
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<tr>
<td>Daffodil Day Expenditure</td>
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<td>673</td>
<td>1,783</td>
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<tr>
<td>Daffodil Enterprises Expenditures</td>
<td>253</td>
<td>225</td>
<td>-</td>
<td>-</td>
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<tr>
<td>Depreciation &amp; Amortisation</td>
<td>18</td>
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<td>Fundraising Income paid to Divisions</td>
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<td>Health Promotion</td>
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<td>Movember Projects &amp; Donations</td>
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<td>Rents</td>
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<td>Scientific Research Grants</td>
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<td>Support &amp; Volunteer Services</td>
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<td>299</td>
<td>283</td>
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<tr>
<td><strong>Total Expenses</strong></td>
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<td><strong>5,519</strong></td>
<td><strong>7,852</strong></td>
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<td><strong>Net Operating Surplus/(Deficit)</strong></td>
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<td><strong>460</strong></td>
<td>5</td>
<td>401</td>
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</table>

### Summary Statement of Financial Position

As at 31 March 2015

<table>
<thead>
<tr>
<th></th>
<th>GROUP 2015 $000s</th>
<th>GROUP 2014 $000s</th>
<th>PARENT 2015 $000s</th>
<th>PARENT 2014 $000s</th>
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<tr>
<td>Current Assets</td>
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<td>Non Current assets</td>
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<td><strong>Total Assets</strong></td>
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<td>Current Liabilities</td>
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<td><strong>Net Assets</strong></td>
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<td><strong>4,726</strong></td>
<td><strong>4,365</strong></td>
<td><strong>4,360</strong></td>
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<td>REPRESENTED BY:</td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>Total Equity</strong></td>
<td><strong>4,888</strong></td>
<td><strong>4,726</strong></td>
<td><strong>4,365</strong></td>
<td><strong>4,360</strong></td>
</tr>
</tbody>
</table>