Cancer Research UK briefing
State of the cancer research workforce survey

Summary
In late 2021, Cancer Research UK surveyed 338 people working in UK-based clinical cancer research to understand their experiences of the COVID-19 pandemic. The survey discovered that **3 in 10 researchers have become more likely to leave UK-based clinical cancer research** in the next five years, compared with before the pandemic.

COVID-19 is a driving factor of this change, but it is exacerbating pre-existing difficulties faced by the research workforce, which Cancer Research UK identified in our report Creating Time for Research. If this exodus of research talent materialises, it will reduce the UK's capacity to deliver cancer research and improve patient outcomes. To prevent this, Cancer Research UK recommends governments in all four nations of the UK take steps to reduce the pandemic's impact on clinical cancer research and embed research as an everyday part of NHS care.

How has COVID-19 affected researchers?
Our survey found that feelings of frustration, fatigue, and anxiety had increased amongst 66%, 63%, and 56% of respondents respectively since the pandemic began, and **55% of respondents reported feeling less optimistic** about their work in UK-based clinical cancer research.

As a result, 3 in 10 (29%) respondents said their experiences during the pandemic had made them more likely to leave their field in the next five years. This exodus of talent could materialise rapidly, as half of the respondents who reported being more likely to leave cancer research said they expect to do so within 2 years.

Worryingly, only 17% of those planning to leave said they expect to work in a related field. The remaining respondents expecting to leave their field said they would either **retire, work in an unrelated field, or leave the UK entirely**, which would make attracting them back to cancer research and reversing the loss of research talent much harder.

If these trends materialise, the UK will lose a substantial portion of its clinical cancer research workforce, with many of those losses being permanent. Losing this expertise and experience from the science base would significantly reduce the UK's ability to punch above its weight in cancer research,[1] a position which is vital for both improving cancer outcomes through research and making the UK a pioneering life sciences hub that attracts investment from around the world.

What is driving researchers away?
When asked why they were planning to leave UK-based clinical cancer research, the respondents highlighted several reasons, the three most influential of which were:

- Difficulties setting up research studies
- Lack of organisational support for research in the NHS
- Lack of research funding

These factors are unsurprising given the pandemic's negative impact on clinical trials and research funding. But these issues are not new either, as limited support for research is an endemic barrier to research within the NHS. Therefore, instead of posing new challenges that push researchers away from cancer research, COVID-19 has exacerbated pre-existing difficulties that were already frustrating researchers:

> "Workload has been excessive for some time even pre-pandemic…but the additional workload during COVID-19…while carrying on with existing work as 'normal' has been impossible" – **Statistician**

This quote was one of many testimonials shared by the respondents. Although they are only illustrative (and will be biased by self-selection), these excerpts depict a **workforce that is overworked, undervalued, and under-supported**:

- Many respondents felt their cancer research had been deprioritised in favour of COVID-19
- Others felt anxious about research funding, training and support becoming scarcer due to the pandemic's financial impact
- Poor job security and low pay were also common concerns, and several respondents said they planned to move to industry in pursuit of better salaries and job security

How do we retain research talent?

In the immediate term, the UK Government and devolved administrations must take steps to reduce the pandemic's impact on the clinical cancer research workforce's workload and wellbeing:

> "Fatigue and burnout are evident everywhere…I plan to step away in the next few years (five years sooner than I was expecting to) as I am so very exhausted." – **Research Nurse**

Whilst Cancer Research UK welcomes the Managed Recovery programme's efforts to restart non-COVID research, progress has been slower than anticipated. Therefore, more must be done to:

- **Prevent disruption of research**, by building resilience to COVID-19 within NHS study sites
- **Minimise disruption of research**, by only redeploying research staff and infrastructure away from non-COVID research in exceptional circumstances
- **Accelerate research**, by expanding research capacity through flexible delivery of clinical trials and better coordination of facilities shared by cancer research and services
- **Organise recovery**, by setting clear, measurable, and timely goals for the Managed Recovery programme to achieve

Although these actions will reduce the immediate pressure on the research workforce, many of the difficulties driving researchers away predate the pandemic. When asked what would help them stay in UK-based clinical cancer research, the most popular measures amongst the respondents were:

- Greater organisational support for research in the NHS
- Greater career support for research in the NHS
- Increased access to research infrastructure

These findings reflect well-documented limitations in the NHS's research culture, with numerous respondents noting that "clinical research is not valued as it deserves". As a result, NHS staff's access to research support (such as dedicated time for research) and progression opportunities are often scarce, which discourages prospective researchers from joining the workforce and disincentives existing researchers from staying in the workforce to develop expertise and experience.

Addressing these barriers to research will require "a large cultural shift" in the NHS, which will require all four governments to invest in embedding research in everyday NHS practice. To achieve this, Cancer Research UK has set out a comprehensive vision for transforming clinical cancer research for the better – learn more.

Appendix

Methodology

Cancer Research UK used the survey to collect data from 338 respondents between 25 October to 26 November 2021. Margins of error for the survey's questions range from ±5.3% to ±10.2% with a 95% confidence level.

The survey was designed in coordination with Cancer Research UK's Cancer Intelligence team and members of its research community. It was divided into three sections, with the second (questions 8-19) open only to respondents who said they had become more likely to leave UK-based clinical cancer research. This design was chosen to avoid asking respondents irrelevant questions, which resulted in questions 8-19 having lower response rates and correspondingly higher margins of error.

The survey was open to anyone who worked on clinical cancer research in the UK. Respondents were self-selected, with the survey being shared through email, social media, and staff networks. Almost all respondents worked in the public sector (52%) or academia (45%), and, as such, their responses cannot be seen as indicative of researchers' experiences within the private sector. The variety of roles represented in the survey respondents was vast, with over a quarter of respondents occupying a job that three or fewer other respondents had. The largest individual job groups were Research Nurses (18%), followed by Consultants (13%). The surveyed population was experienced, with around half having at least 10 years' experience working in clinical cancer research, whilst a third of respondents had 5 or fewer years' experience.

The survey's dataset (excluding questions that contain respondents' contact details) is available upon request.

About Cancer Research UK

Cancer Research UK is the world's largest cancer charity dedicated to saving lives through research. We support research into over 200 types of cancer, and our vision is to bring forward the day when all cancers are cured. Our long-term investment in state-of-the-art facilities has helped to create a thriving network of research at 90 laboratories and institutions in more than 40 towns and cities across the UK supporting the work of over 4,000 scientists, doctors, and nurses. In 2020-21, Cancer Research UK invested £421 million on new and ongoing research projects into the causes and treatments for cancer.

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References

[1] Department for Business, Energy & Industrial Strategy. 2017. International Comparative Performance of the UK Research Base 2016. Accessed 27 January 2022 via https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/660855/uk-research-base-international-comparison-2016.pdf.