

APRIL 2025

Perceptions Hub

Health Perceptions Research: India

Objectives & methodology

This research project is designed to answer the following questions:

1. What are the most salient topics in donor, middle-income, and lower-middle/low-income countries? What issues do people care about? And what's the current mood?
2. How does health feature in the current issue landscape? How are specific health issues perceived?
3. How are current efforts to address health issues globally perceived?
4. How can we best make the case for investing to tackle health issues globally? What messages and messengers are most effective?

Methodology (India):

1. 2 focus groups among opinion leaders in Delhi and Mumbai on October 15 and 16, 2024.
2. Online survey among the general public in India (N=1,003). Fieldwork conducted November 27 – December 9, 2024.

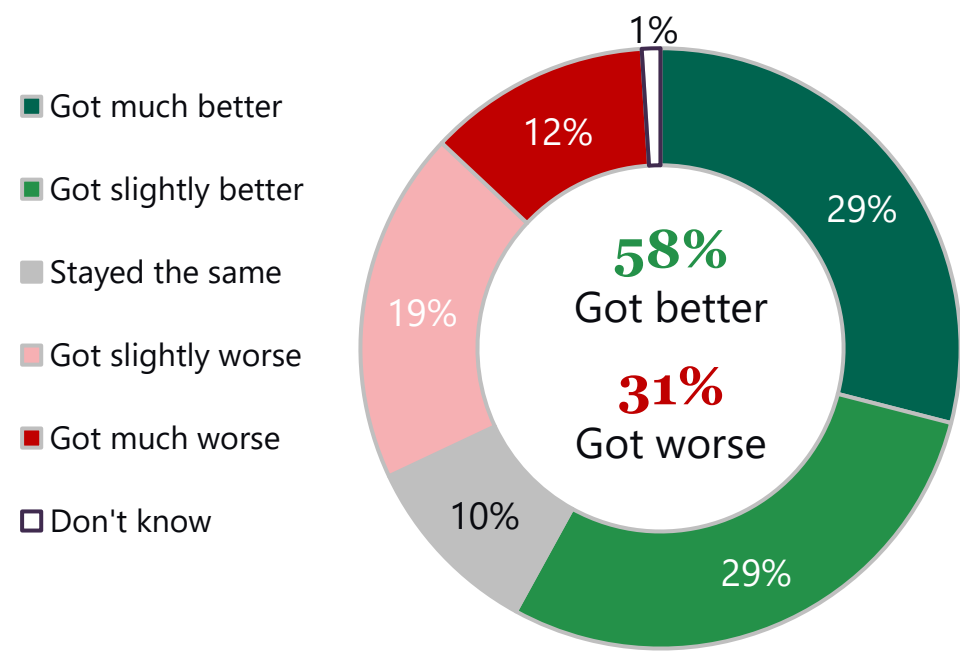
For full Wave 2 findings and detailed methodology please see the full Wave 2 report (which can be downloaded [here](#)).

Detailed findings: India

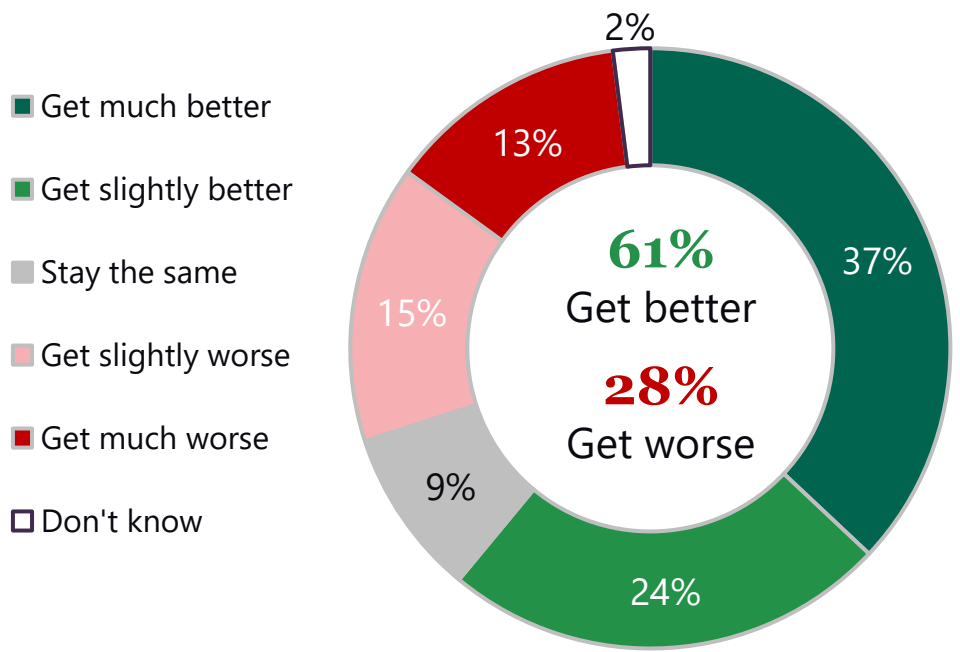
Global progress

The Indian public has similar levels of optimism about the past and the future, with around three-in-five thinking that the world has gotten better (58%) and will continue to get better in the future (61%).

Over the **last 20 years**, has the world got better, worse, or stayed the same?



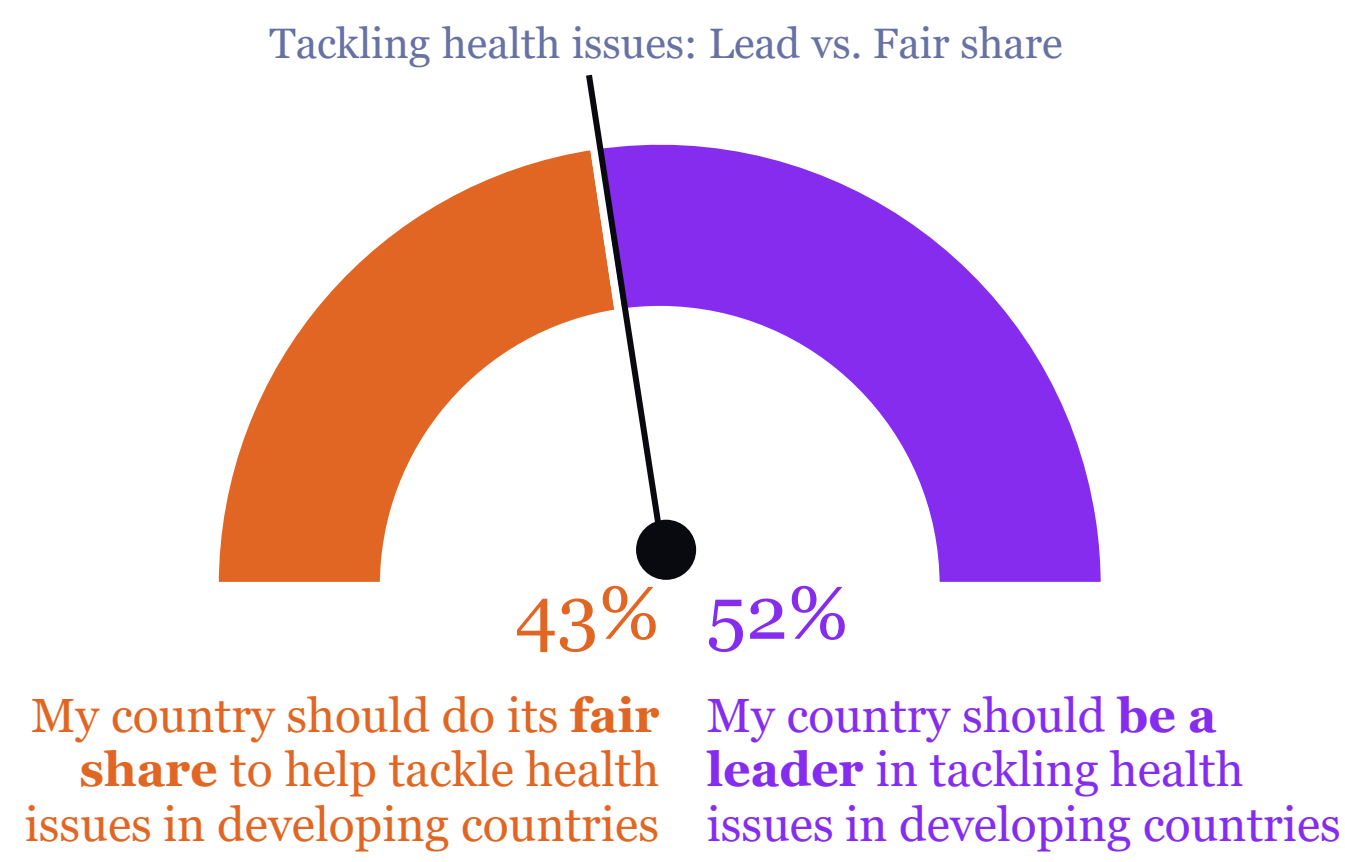
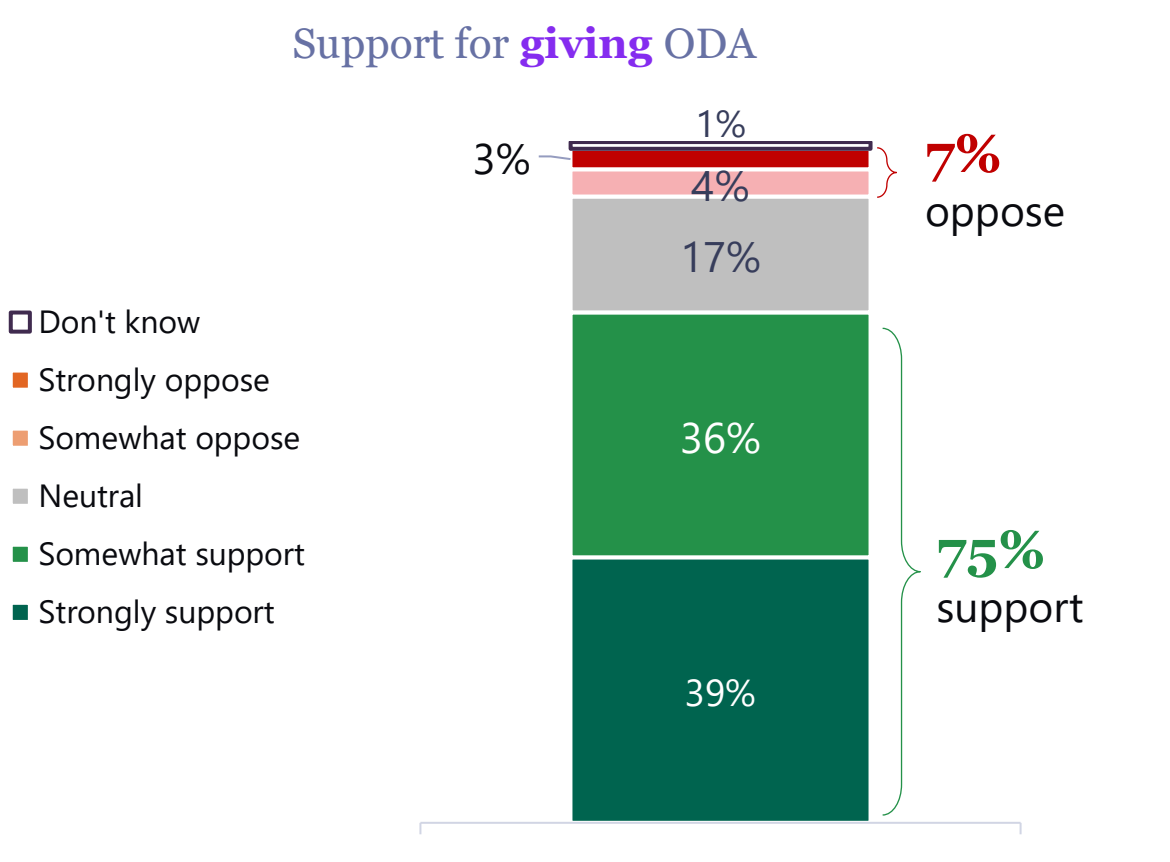
Over the **next 20 years**, will the world get better, worse, or stay the same?



Q: All things considered, over the last 20 years do you think the world has got better or worse or stayed the same? [Base size: N=1,003]
Q: All things considered, over the next 20 years do you think the world will get better or worse or stay about the same? [Base size: N=1,003]

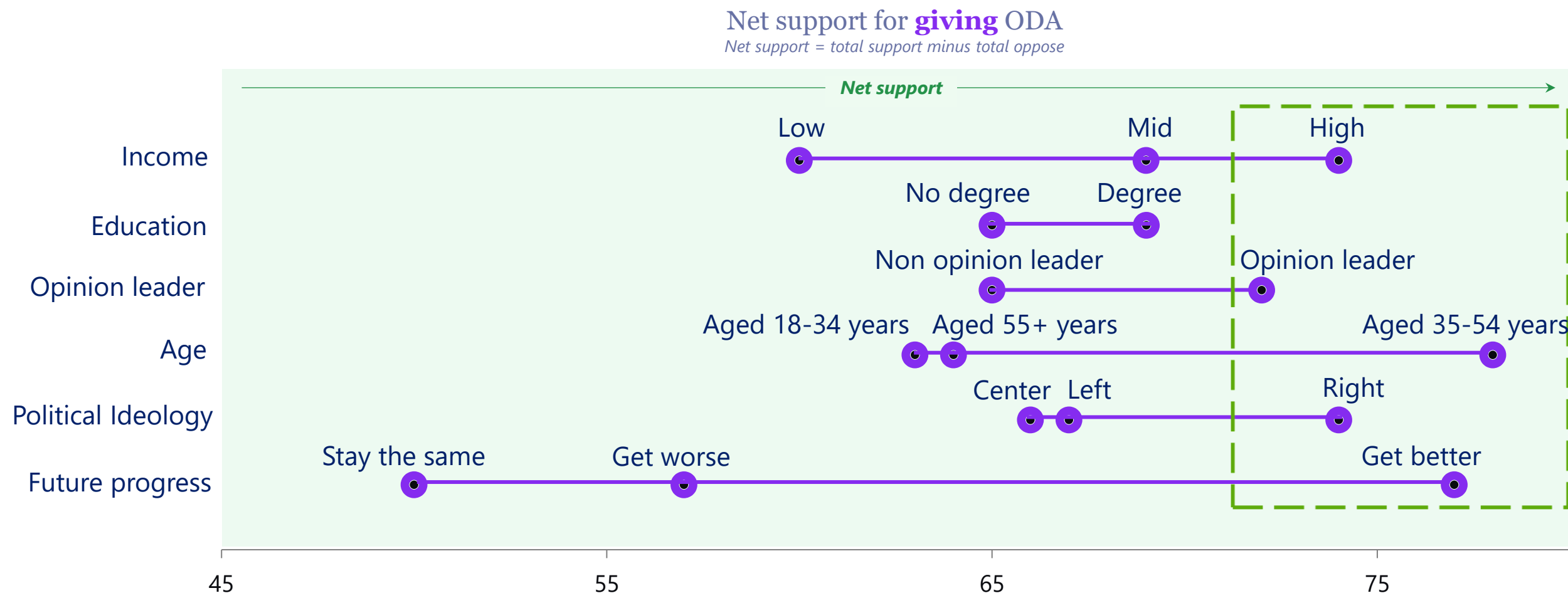
Support for giving ODA and tackling global health issues

There is strong support for India giving ODA (75% support). When it comes to addressing global health issues, just over half (52%) in India think their country should be a leader (in contrast to other countries in the research, where there was a preference for countries to do their 'fair share').



Giving ODA: net support among key subgroups

There is strong net support for giving ODA across key subgroups. Net support is higher for higher income groups, opinion leaders, middle-aged groups (35-54 years), those on the right of the political spectrum, and those who are more optimistic about the future.

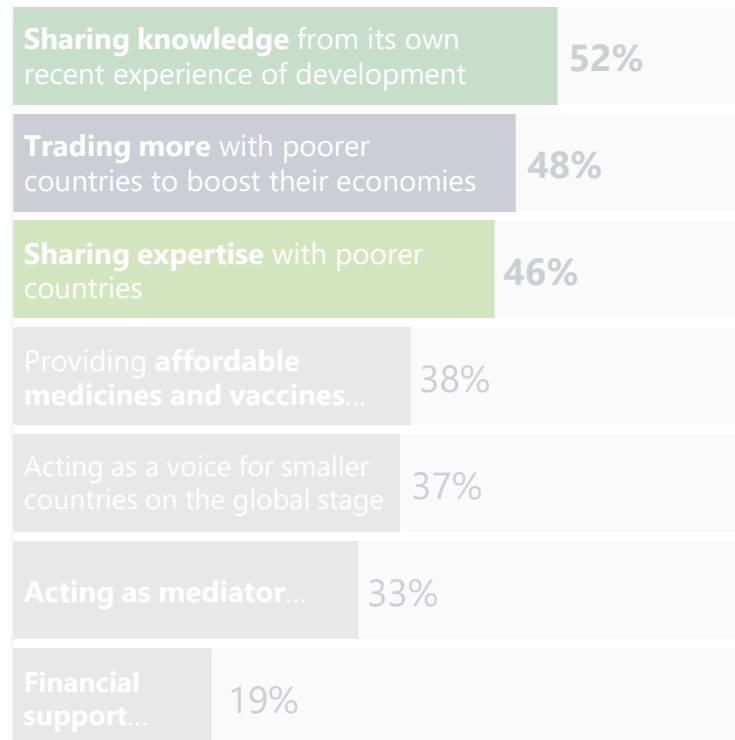


Role of India in supporting development

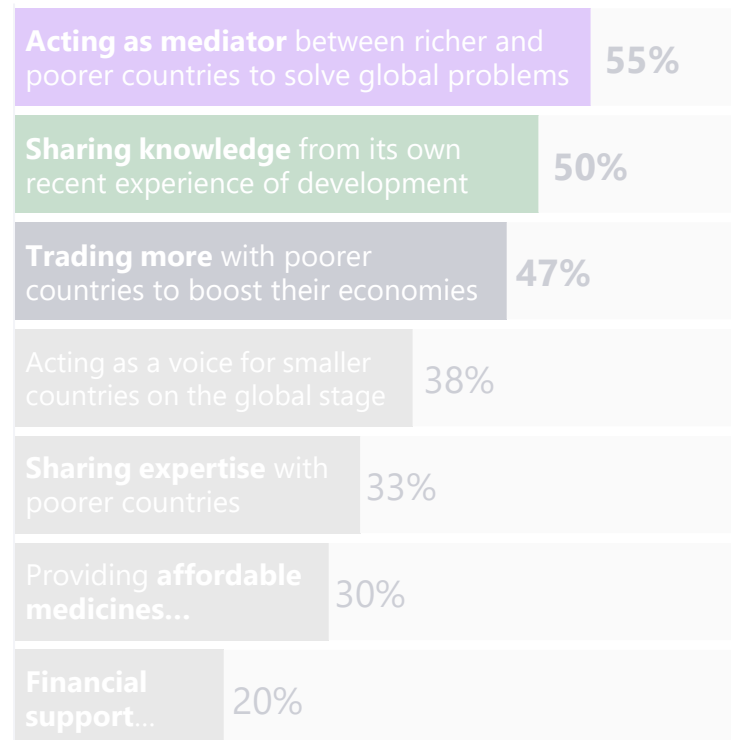
Support is strongest for India to help the development of poorer countries by providing affordable medicines and vaccines, which focus group feedback highlighted is an area of perceived national strength.

% Support for country taking each action

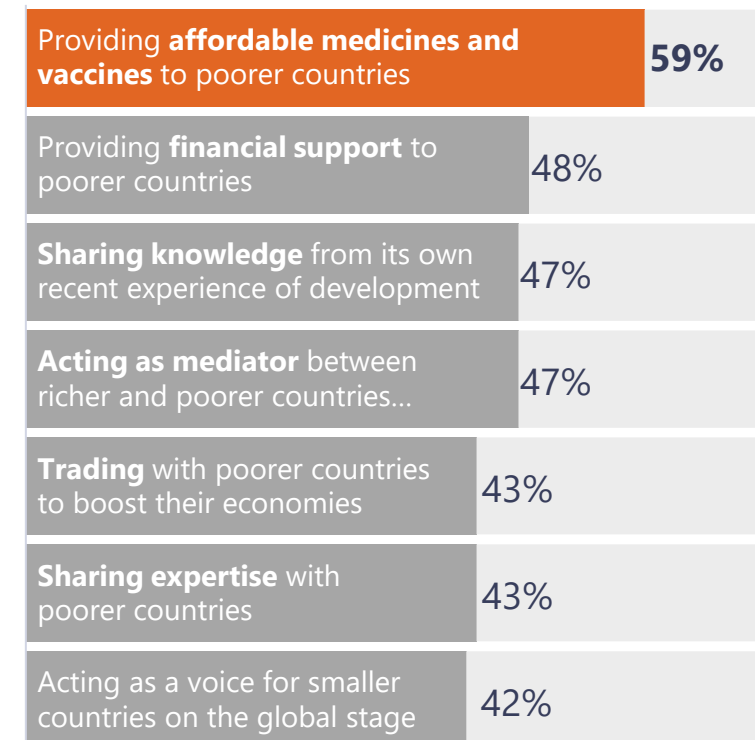
South Africa



Indonesia

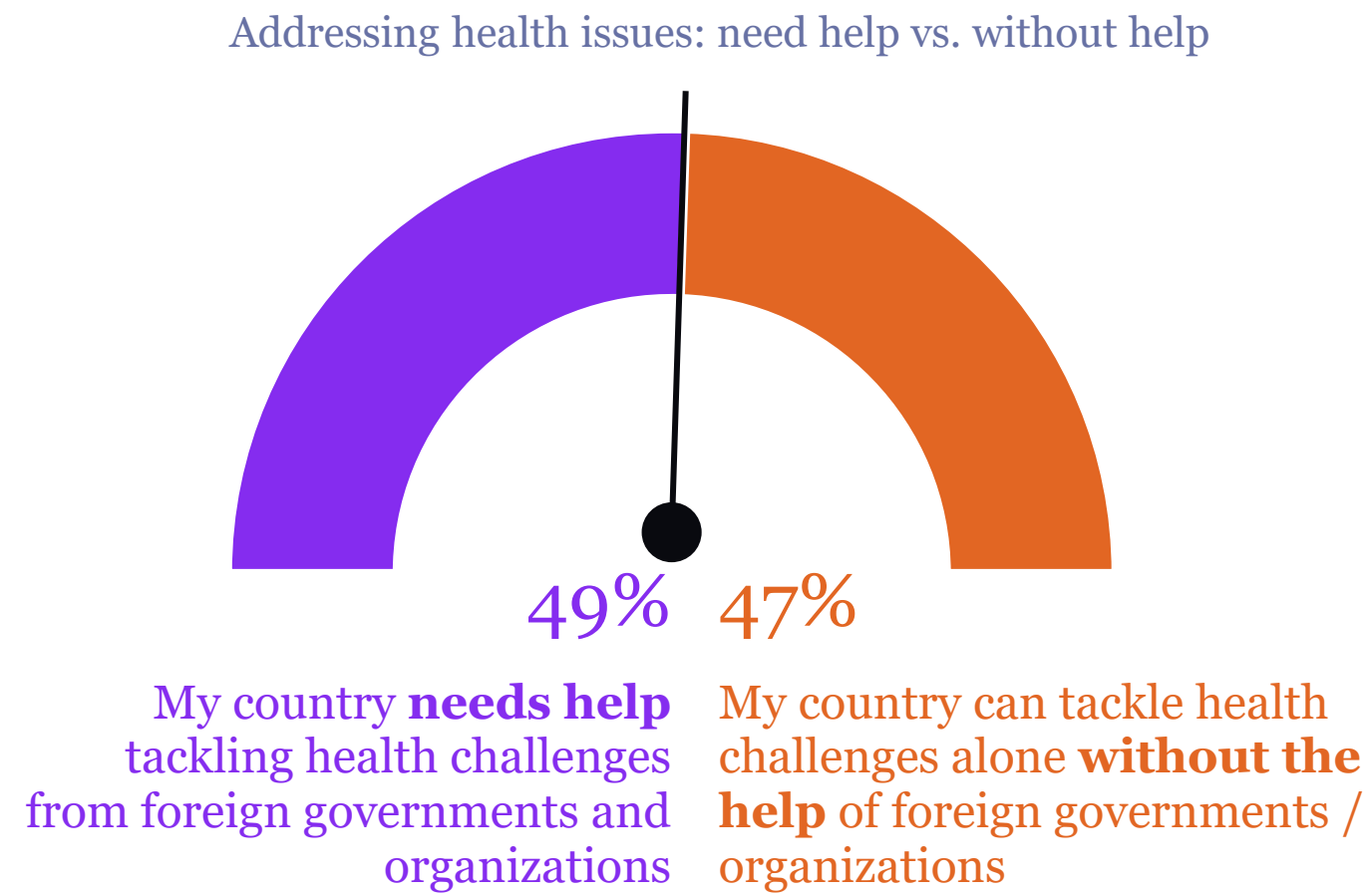
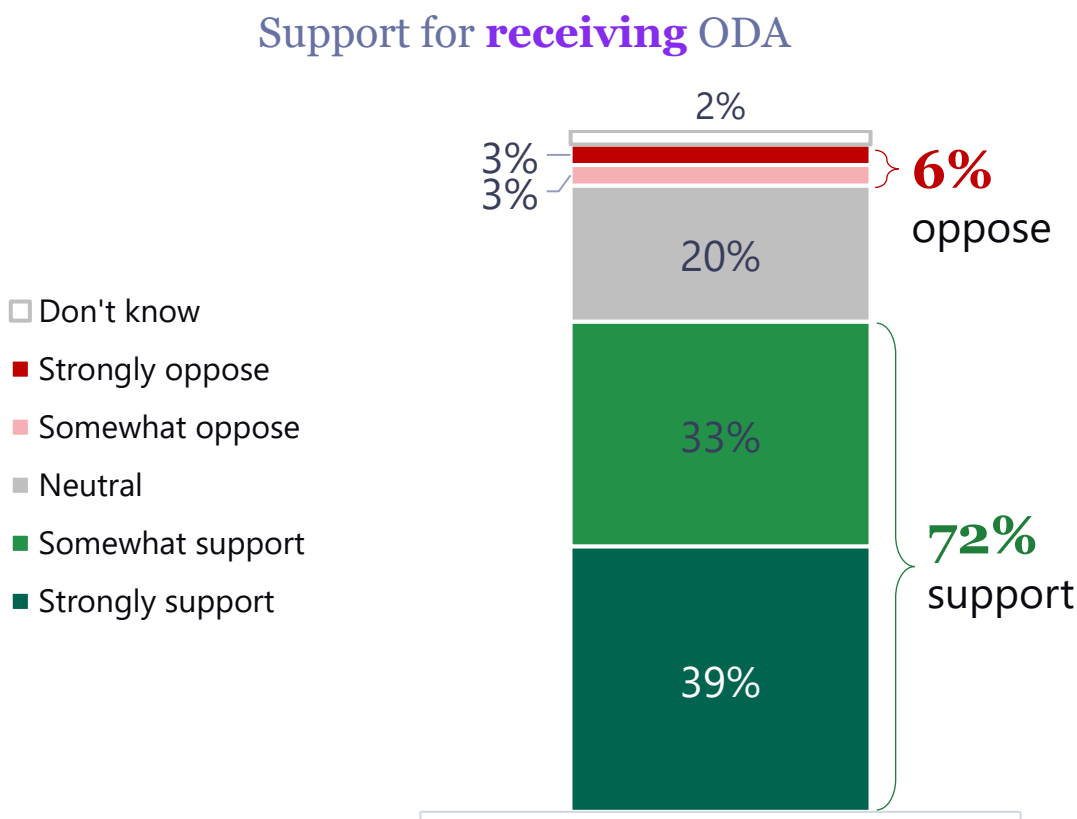


India



Support for receiving ODA and help addressing health issues

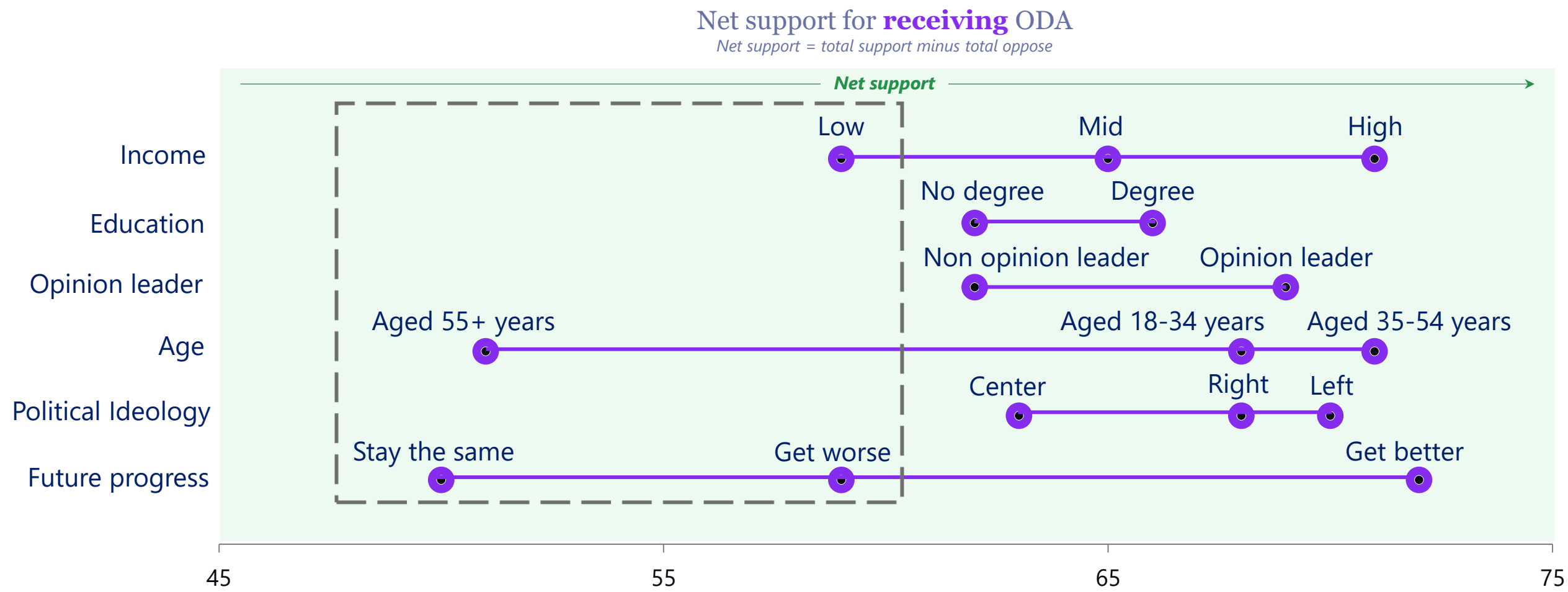
There is strong support for India receiving ODA (72%), but opinions are more divided when it comes to receiving help from foreign organizations to address India's health challenges.



Q: How strongly do you support or oppose India receiving overseas aid from richer countries? [Base size: N=1,003]
Q: On this topic, which of the following statements do you agree with more? [Base size: N=1,003]

Receiving ODA: net support among key subgroups

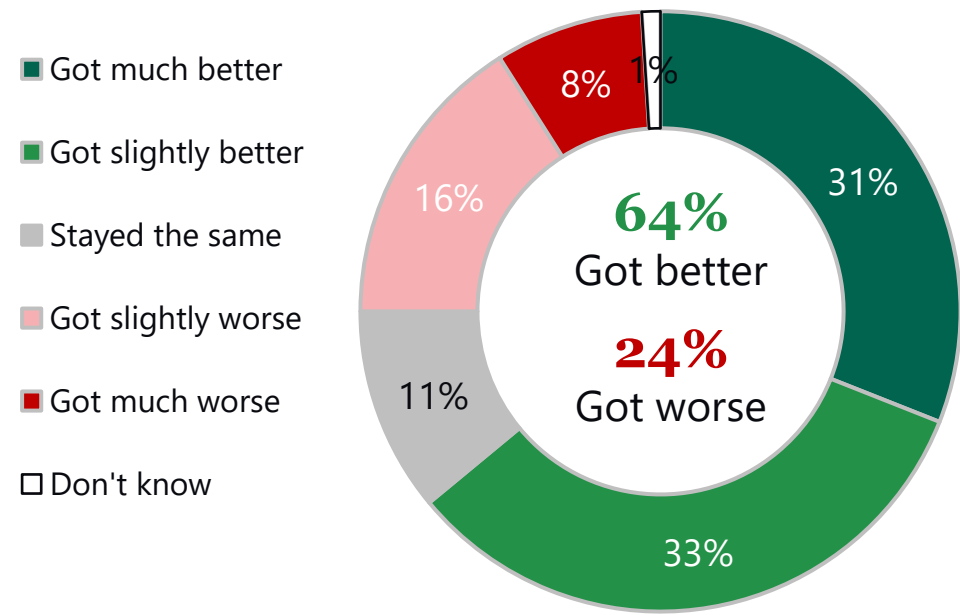
There is strong support for receiving ODA across key subgroups. However, support is relatively lower amongst older groups (55+ years), those who believe the world will get worse/stay the same, and lower income groups.



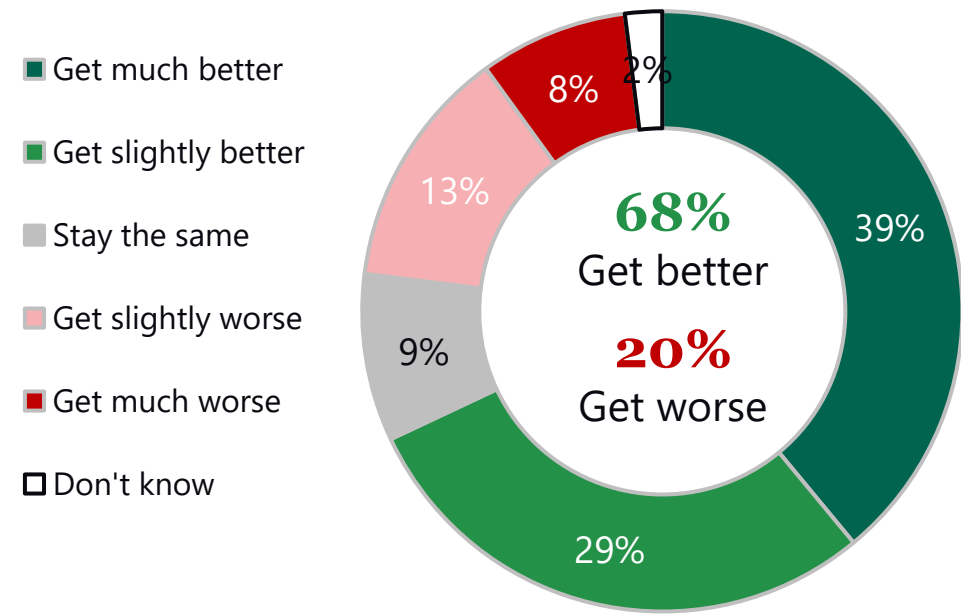
Global health progress

A majority of the public in India are optimistic about global health progress. There is slightly higher optimism about the future of *global health progress* (68%) compared to *general progress* (61%).

Over the **last 20 years**, has global health got better, worse, or stayed the same?



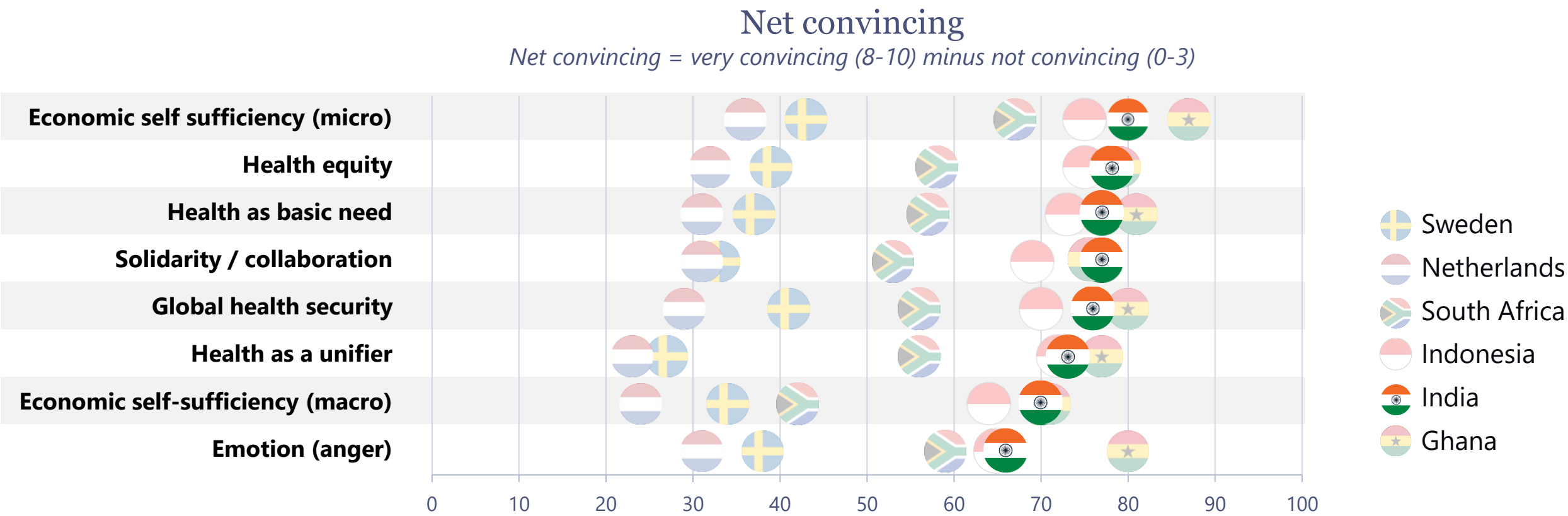
Over the **next 20 years**, will global health get better, worse, or stay the same?



Q: All things considered, over the last 20 years do you think global health has got better or worse or stayed the same? [Base size: N=1,003]
Q: All things considered, over the next 20 years do you think global health will get better or worse or stay about the same? [Base size: N=1,003]

Global health messaging

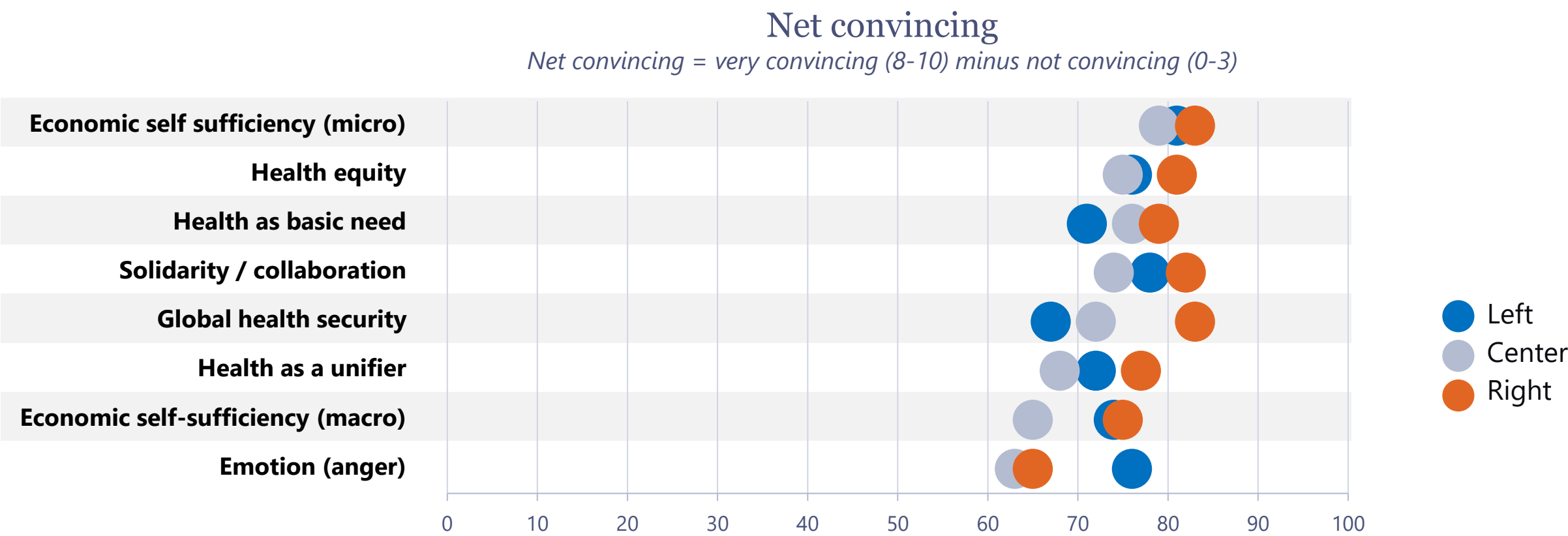
While most messages tested well in India, micro-economic self sufficiency framing was the most convincing. By contrast, the anger framing was relatively less convincing.



Note: Message testing was light touch and intended as a sense-check against wave 1 results, so it should be considered directional and viewed in the context of other message testing research. For a list of the full messages tested, please refer to the Appendix.

Global health messaging x political ideology

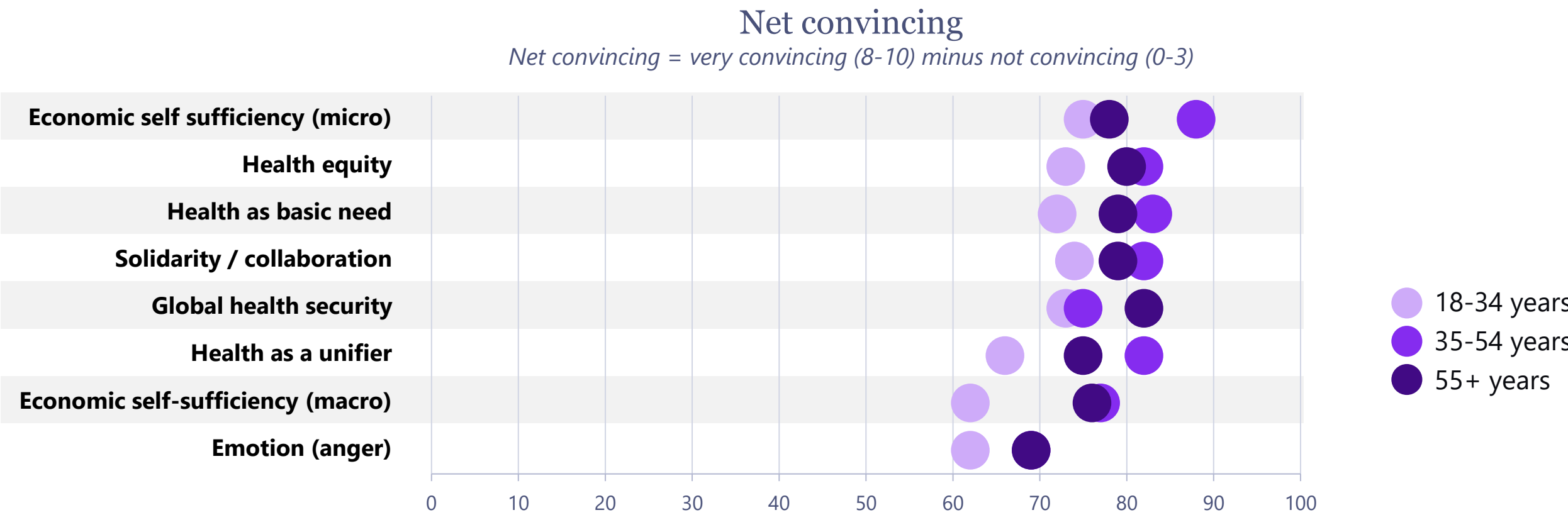
All messages tested resonate more strongly with voters on the right than voters on the left. Micro-economic self sufficiency was the most convincing message for all ideological groups.



Note: Message testing was light touch and intended as a sense-check against wave 1 results, so it should be considered directional and viewed in the context of other message testing research. For a list of the full messages tested, please refer to the Appendix.

Global health messaging x age groups

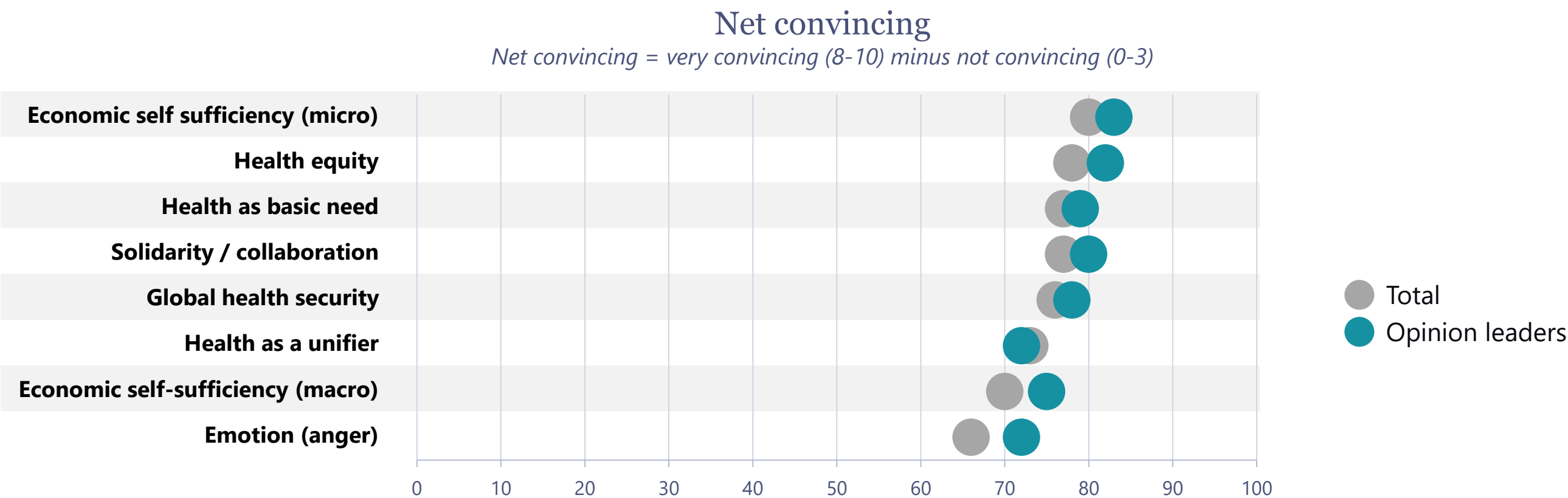
Messages resonated most strongly with middle-aged Indians, and least strongly with younger groups. Several messages were notably weaker with younger Indians, for instance, emotion (anger), health as a unifier, macro-economic self-sufficiency.



Note: Message testing was light touch and intended as a sense-check against wave 1 results, so it should be considered directional and viewed in the context of other message testing research. For a list of the full messages tested, please refer to the Appendix.

Global health messaging x opinion leaders

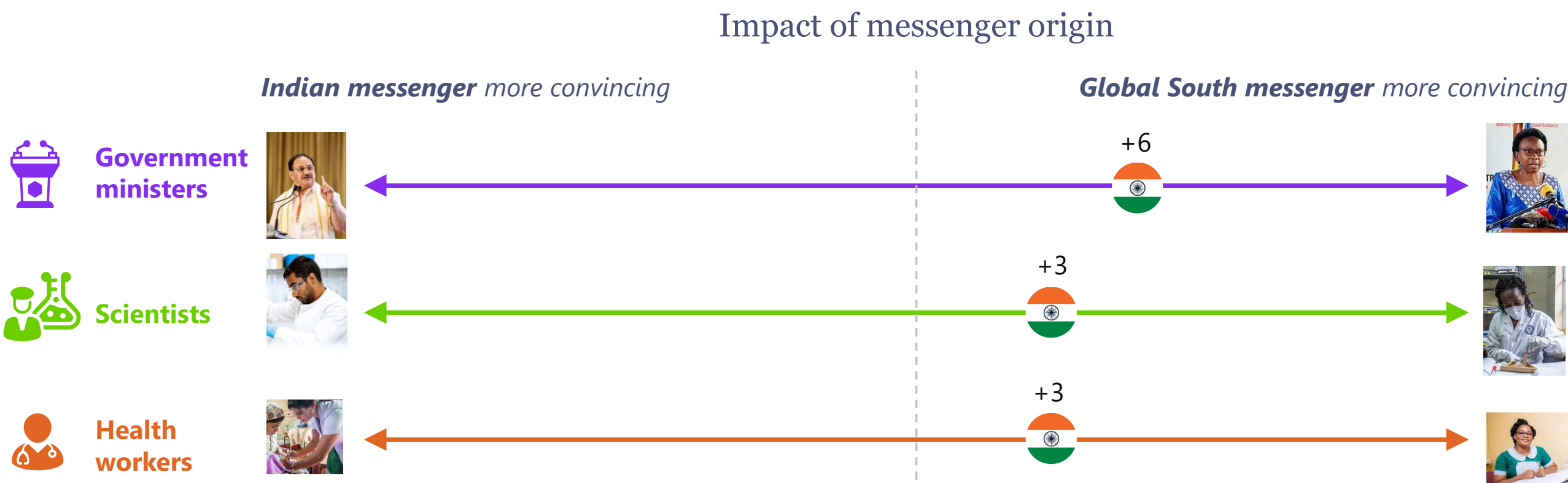
All messages tested resonate to a similar degree with both opinion leaders and the broader public. Messages tend to be slightly more convincing with opinion leaders, except for 'health as a unifier'.



Note: Message testing was light touch and intended as a sense-check against wave 1 results, so it should be considered directional and viewed in the context of other message testing research. For a list of the full messages tested, please refer to the Appendix.

Impact of messenger origin

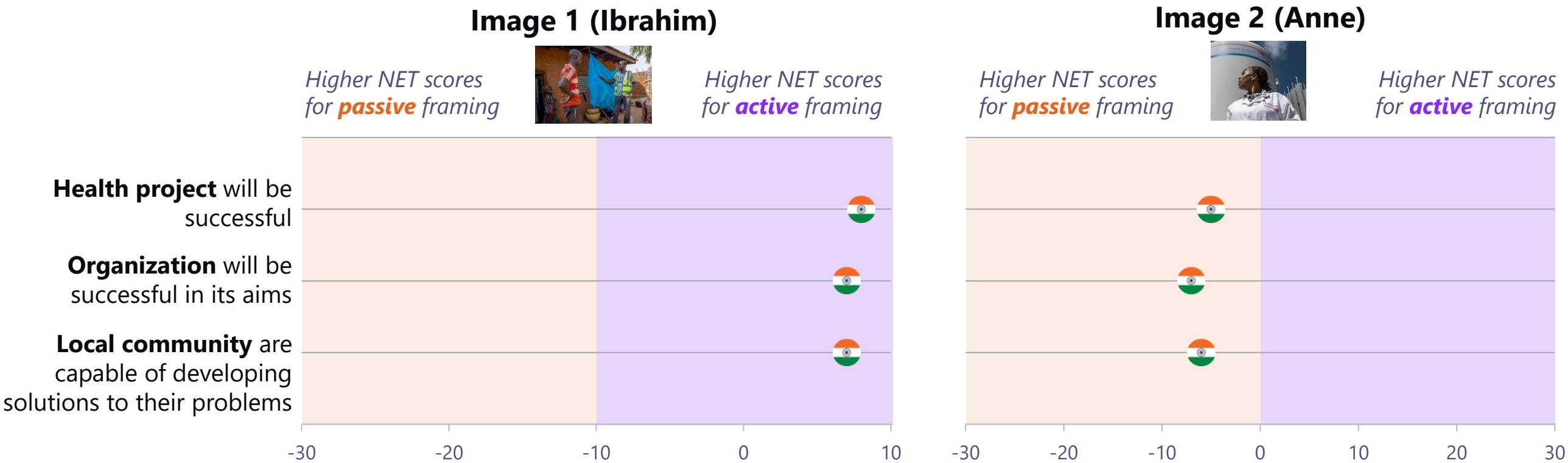
Messages attributed to ministers, scientists, and health workers from the Global South test as slightly more convincing than those attributed to messengers from India.



Q. How convincing, or not, would you find this statement in favor of investing in tackling health issues globally if made by the person pictured? [Base size: N=1,003. Base size per messenger: N=c. 500; showing difference in net convincing scores]

Recipient framing

An experiment to test the impact of two framings of aid recipients gave mixed results in India, suggesting an active framing of recipients *can* have a positive impact – but this appears to be dependent on the specific framing.



Caveats to consider when reviewing this data: This question was asked at the end of a long survey; a small sample of respondents saw each image/framing (N=c. 250 per market per framing) meaning differences must be large to be statistically significant; survey respondents saw just one framing, rather than both “passive” and “active” and making a direct comparison. Therefore, focus group insights may carry more weight. For more details, please refer to the main report.

Appendix: Messages tested

We tested the top 8 performing messages from wave 1

As a “health check” to see if these messages continue to perform well in wave 2 markets / 6 months on.

Frame	Message
Economic self-sufficiency (micro)	Good health is vital for people to stand on their own feet. Healthy children can go to school, healthy parents can go to work and support their families. Investing in health is one of the smartest economic decisions we can make.
Global health security	Investing in better health internationally is not just about charity, it's about making the world a safer place for everyone. As Covid-19 has shown, a health crisis somewhere can become a health crisis everywhere.
Health equity	Everyone in the world deserves the chance to lead a healthy life. By tackling health issues globally, we can provide access to basic medicines and vaccines which protect people from life-threatening and life-changing diseases.
Health as a basic need	We all need good health, wherever we live, it is a basic human need. By investing to tackle health issues globally, we can help ensure everyone has access to basic healthcare services, and essential medicines and vaccines.
Emotion (anger)	It is an outrage that in 2024 millions of people are still dying from health issues we know how to treat. We cannot, and must not, stand by while this happens.
Solidarity / collaboration	Investing to tackle health issue globally is an act of solidarity, transcending borders and differences. By working together, across countries, we can ensure that everyone has access to the healthcare they need, regardless of geography or circumstance.
Health as a unifier	Good health allows us to experience life's moments, both big and small. No one should be deprived of these moments: by tackling health issues globally, we can help ensure no one misses out.
Economic self-sufficiency (macro)	Only countries with healthy populations can lift themselves out of poverty. Healthy adults can contribute to the economy and lead productive working lives. Investing in health is one of the smartest economic decisions we can make.