

APRIL 2025

Perceptions Hub

Health Perceptions Research: The Netherlands

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 (The Netherlands):

1. Online survey among the general public in the Netherlands (N=1,006). Fieldwork conducted November 27 – December 9, 2024.

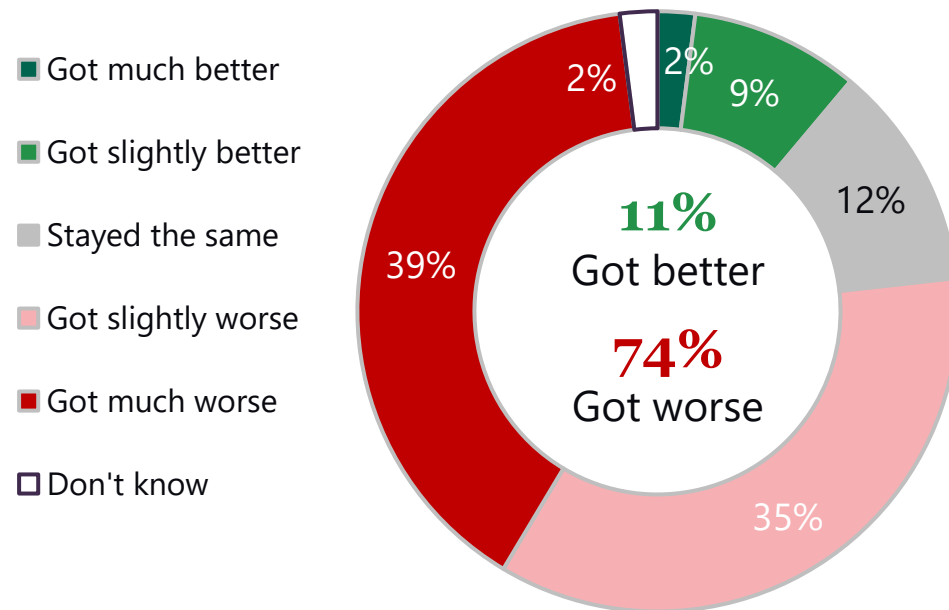
For full Wave 2 findings and detailed methodology please see the full Wave 2 report (which can be downloaded [here](#)).

Detailed findings: The Netherlands

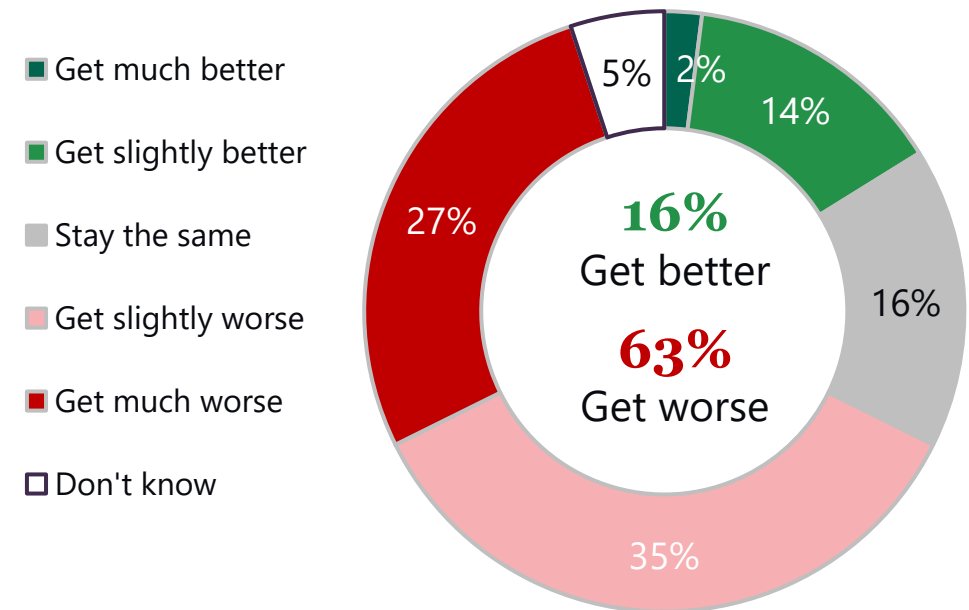
Global progress

A large majority (74%) believe the world has gotten worse over the last 20 years. While the Dutch public are slightly less pessimistic about the next 20 years, nearly two-thirds (63%) still think the world is likely to get worse.

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

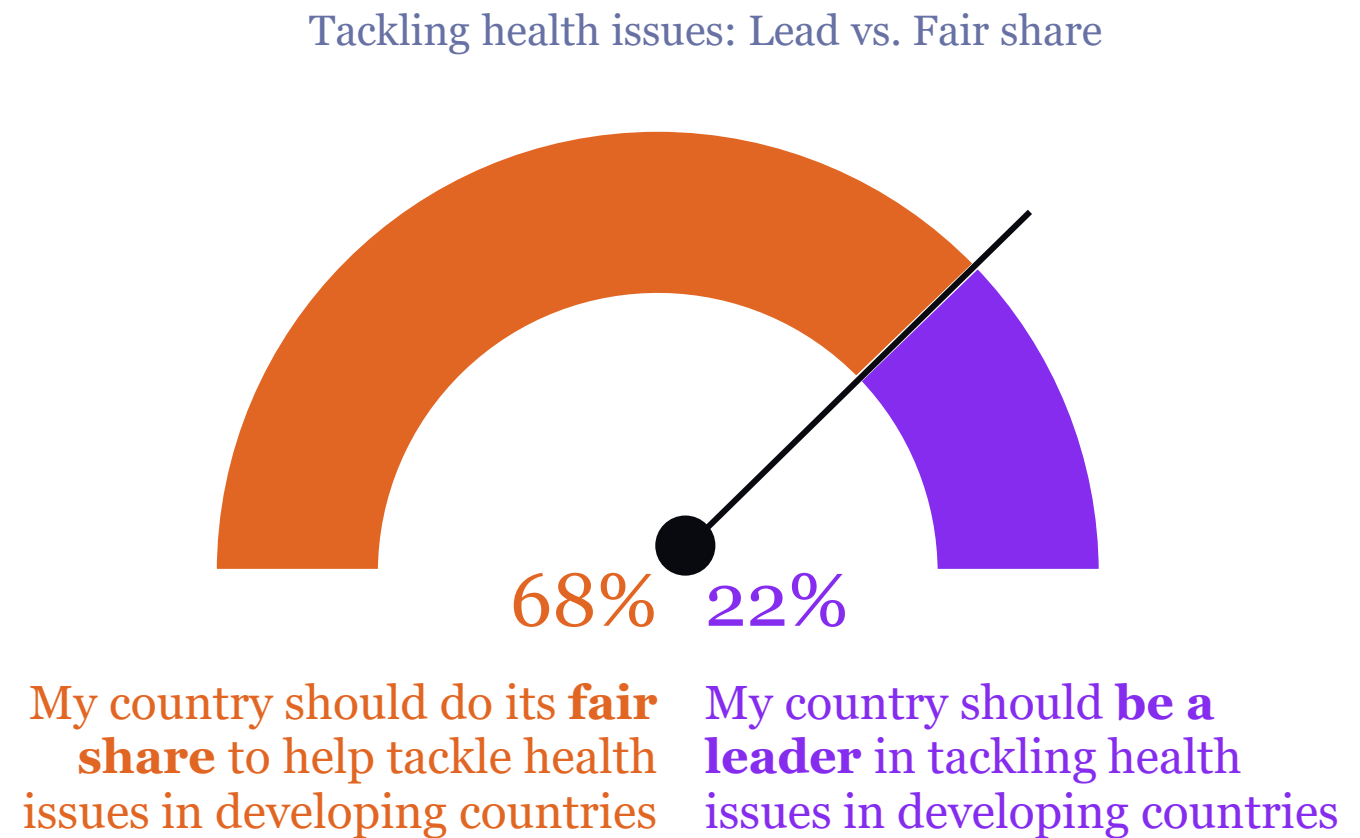
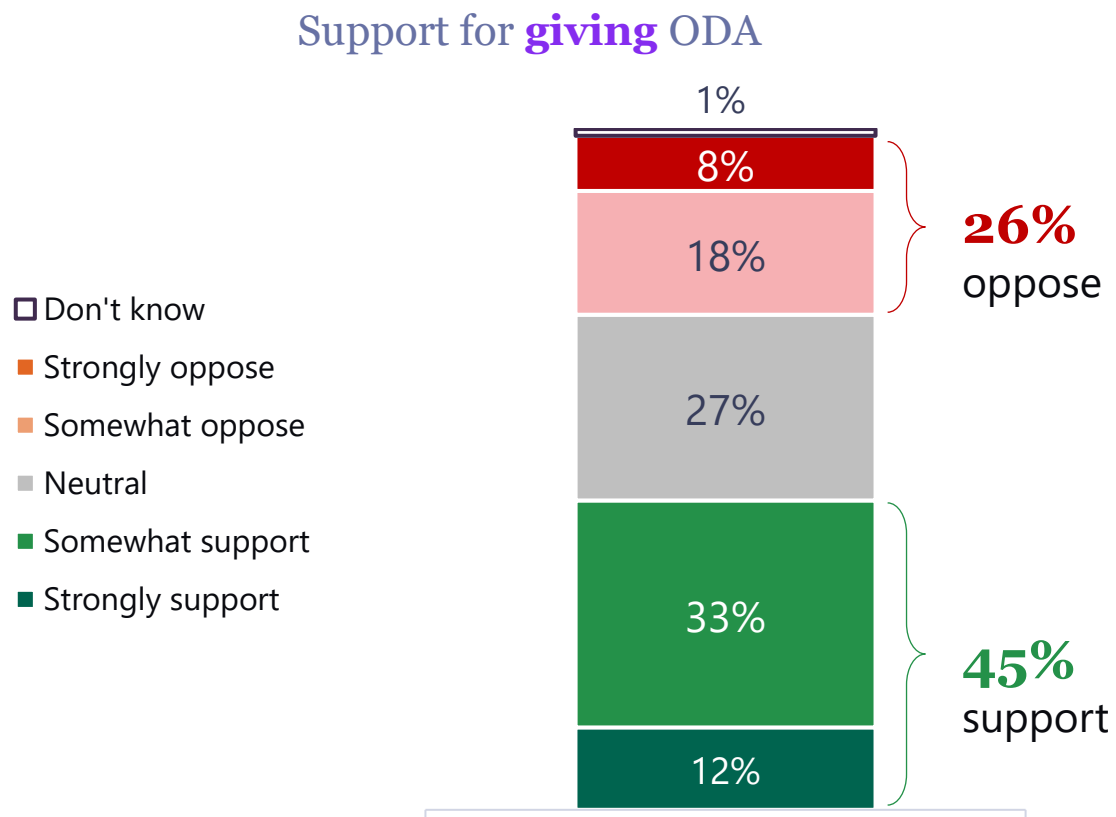


Over the **next 20 years**, will the world get better, worse, or stay the same?



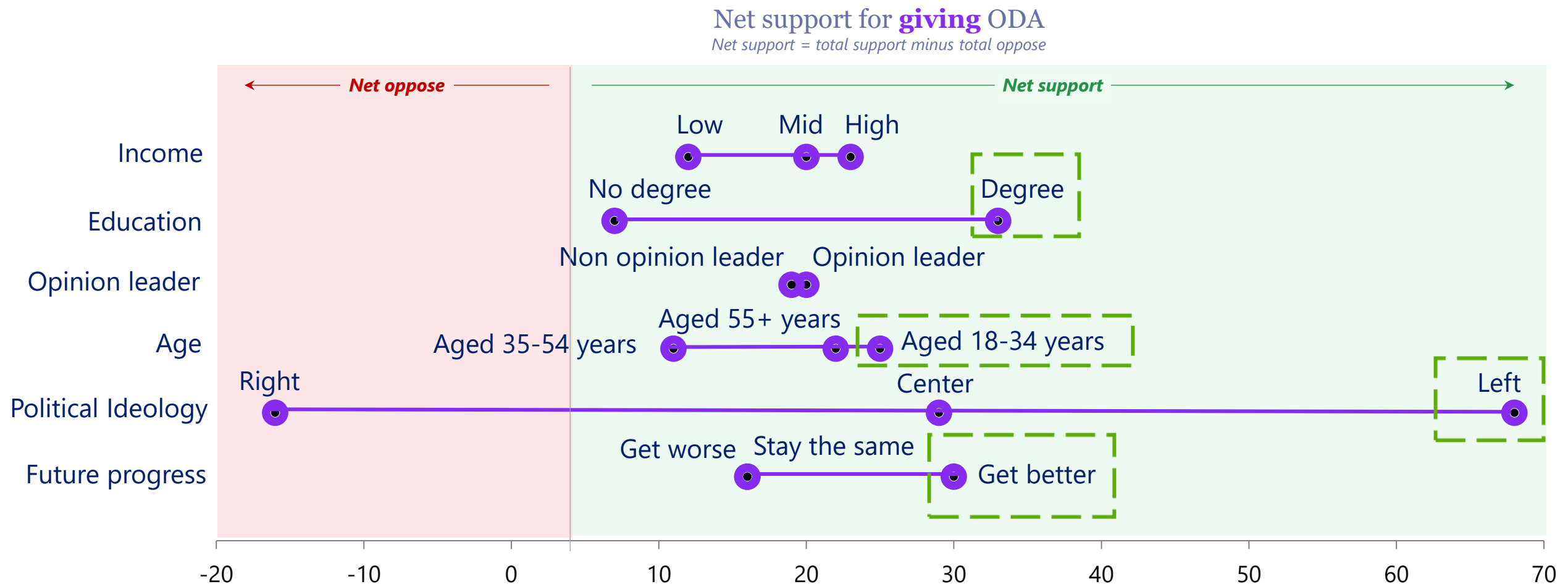
Support for giving ODA and tackling global health issues

There is net support for ODA, with just under half (45%) supporting the Netherlands giving aid, and 26% opposed. When it comes to tackling global health issues, there is strong public consensus that the Netherlands should do its fair share instead of being a leader.



Giving ODA: net support among key subgroups

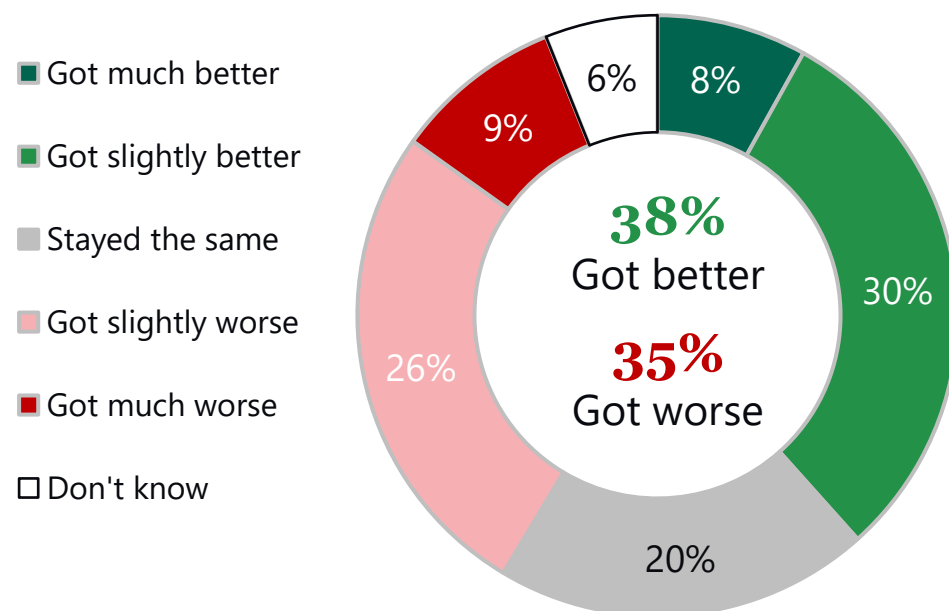
Support for giving ODA tends to be higher for degree holders, those on the left of the political spectrum, and the younger age group. Support is also higher among those who are optimistic on global progress.



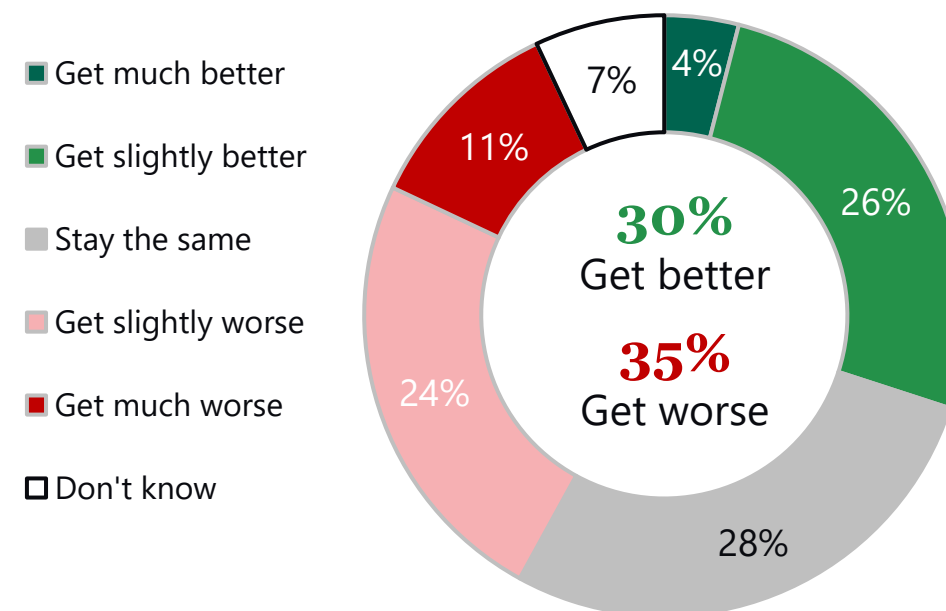
Global health progress

Views are broadly evenly split on past and future global health progress. However, the public are more optimistic about *global health progress* than *general global progress*, with one-in-three (30%) thinking global health will get better in the next 20 years, compared to only 16% who think the world will get better.

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

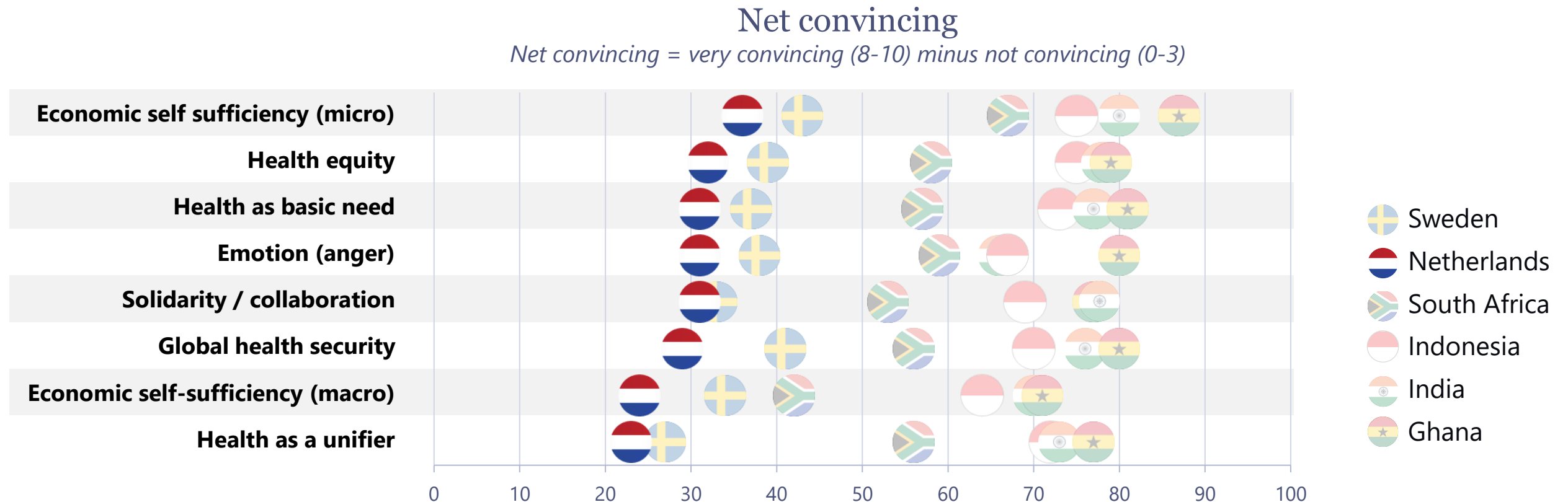


Over the **next 20 years**, will global health get better, worse, or stay the same?



Global health messaging

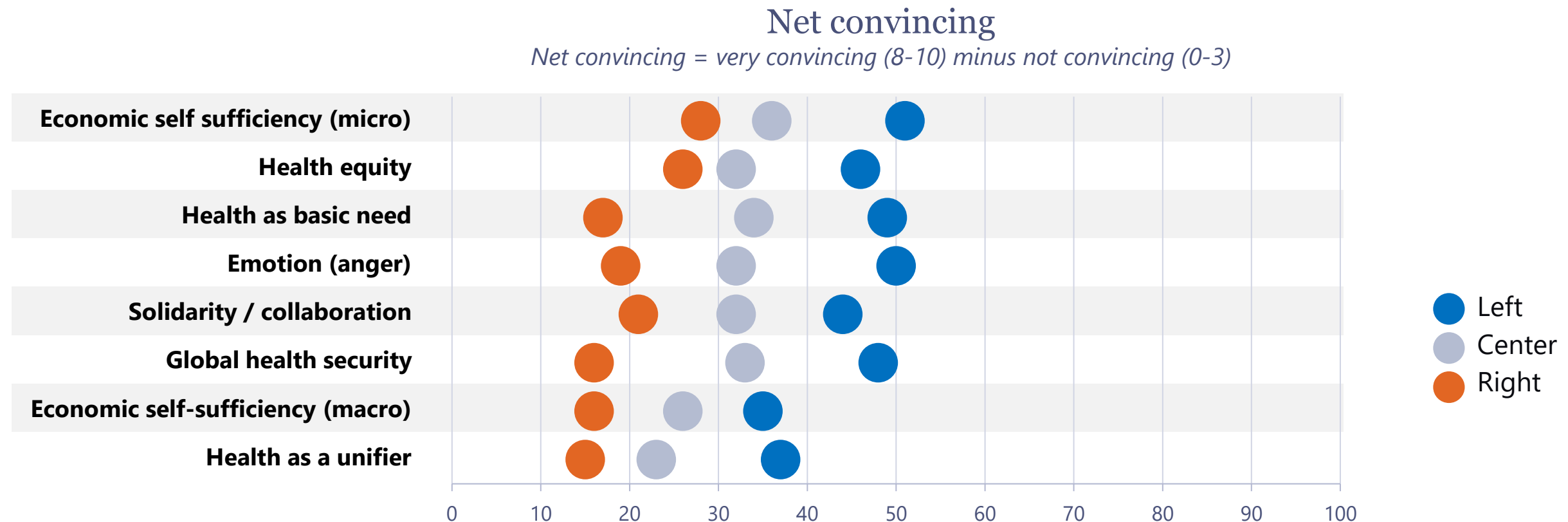
Micro-economic self-sufficiency and health equity were the most convincing messages for the Dutch public. 'Health as a unifier' and macro-economic self-sufficiency were least convincing.



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

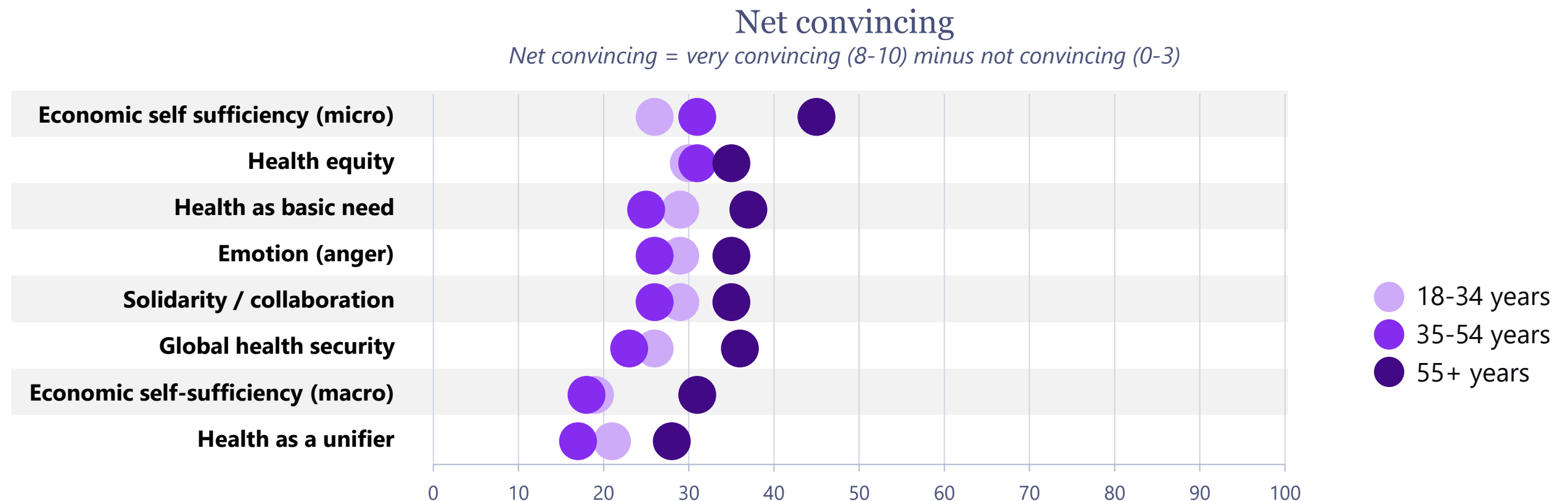
All messages tested more strongly with voters on the left. In relative terms, messages performed similarly across political groups, with micro-economic self sufficiency being the most convincing.



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 age groups

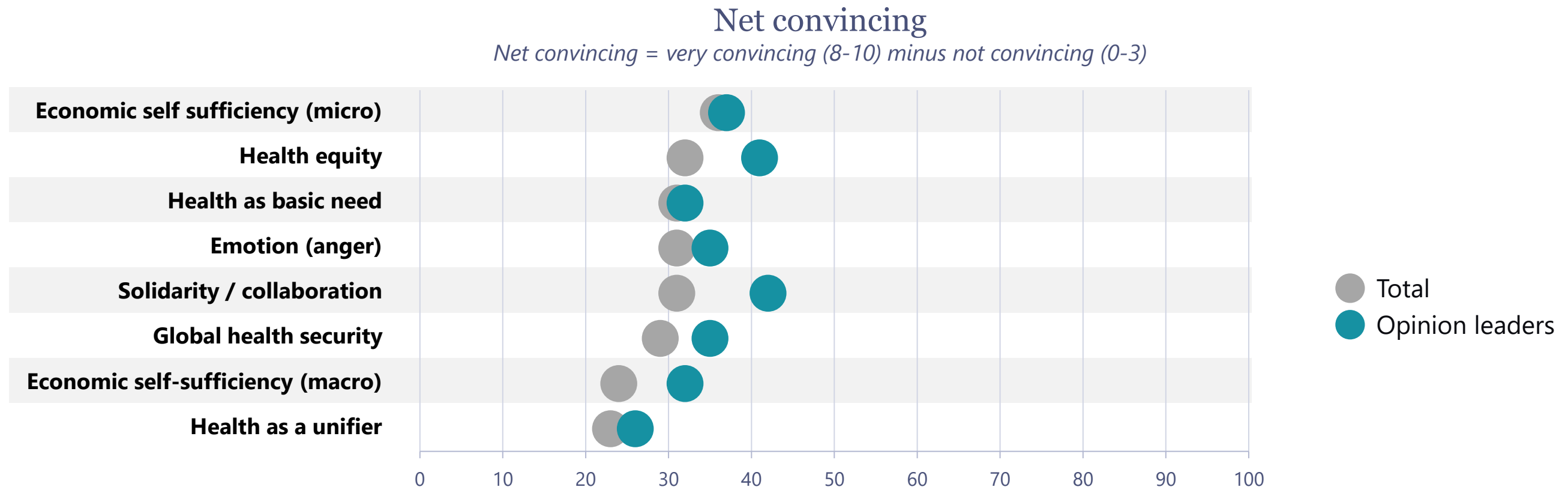
All messages tested more strongly with the older age group (55+). Older groups found micro-economic self-sufficiency most convincing by a notable margin. By contrast, younger and middle age groups found the health equity message most convincing.



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 opinion leaders

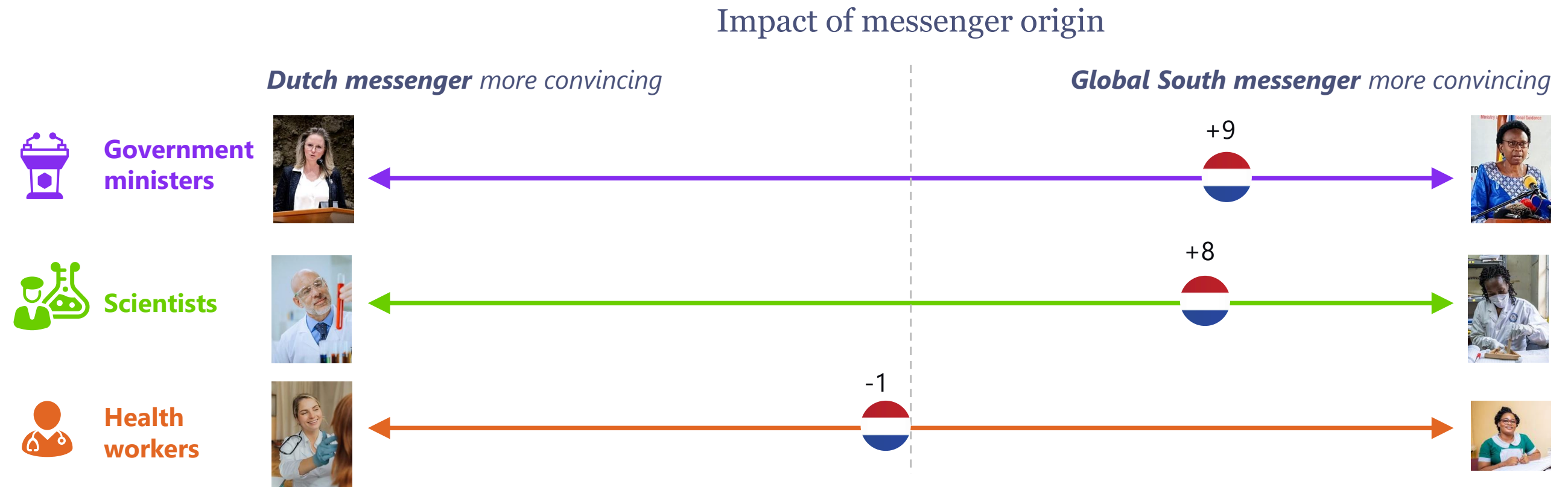
Health equity and solidarity/collaboration messages resonate more strongly with opinion leaders. In particular, the solidarity/collaboration message was most convincing for opinion leaders.



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.

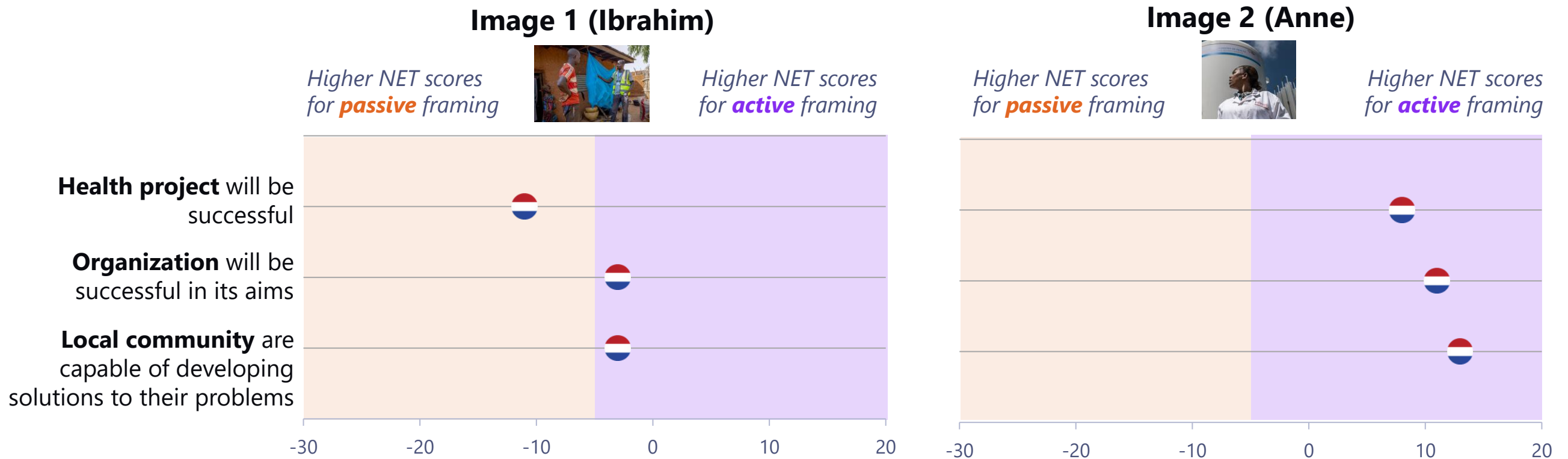
Impact of messenger origin

Messages attributed to ministers and scientists from the Global South test as more convincing than those attributed to their Dutch counterparts. However, country of origin made less impact for messages attributed to health workers.



Recipient framing

An experiment to test the impact of two framings of aid recipients gave mixed results in the Netherlands. But there are indications an active framing can drive more positive perceptions of an organization and health project's likely success and confidence in the local community to solve problems.



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)	Een goede gezondheid is van essentieel belang om op eigen benen te kunnen staan. Gezonde kinderen kunnen naar school, gezonde ouders kunnen werken en hun gezin onderhouden. Investeren in gezondheid is een van de slimste economische keuzes die we kunnen maken.
Global health security	Investeren in een betere gezondheid wereldwijd is niet alleen liefdadigheid, maar zorgt ook dat de wereld voor iedereen veiliger is. Zoals de coronapandemie liet zien, kan een lokale gezondheids crisis een wereldwijde gezondheids crisis worden.
Health equity	Iedereen ter wereld moet de kans hebben om een gezond leven te leiden. Door gezondheidsproblemen wereldwijd aan te pakken, kunnen we fundamentele geneesmiddelen en vaccins beschikbaar maken die mensen beschermen tegen levensbedreigende of levensveranderende ziektes.
Health as a basic need	Een gezond leven leiden, waar dan ook, is een fundamentele menselijke behoefte. Door te investeren in gezondheidsproblemen wereldwijd, kunnen we zorgen dat iedereen toegang heeft tot fundamentele medische zorg en essentiële geneesmiddelen en vaccins.
Emotion (anger)	Het is schandalig dat in 2024 nog steeds miljoenen mensen overlijden aan behandelbare gezondheidsproblemen. We kunnen en mogen niet lijdzaam toekijken terwijl dit gebeurt.
Solidarity / collaboration	Investeren in de aanpak van gezondheidsproblemen wereldwijd is een daad van solidariteit die grenzen en verschillen overstijgt. Door internationale samenwerking kunnen we ervoor zorgen dat iedereen toegang heeft tot de gezondheidszorg die ze nodig hebben, ongeacht hun locatie of omstandigheden.
Health as a unifier	Als je gezond bent kun je de grote en kleine mijlpalen in het leven bereiken. Dat mag niemand ontzegd worden: door gezondheidsproblemen wereldwijd aan te pakken kunnen we ervoor zorgen dat niemand buiten de boot valt.
Economic self-sufficiency (macro)	Alleen landen met een gezonde bevolking kunnen de armoede ontstijgen. Gezonde volwassenen kunnen bijdragen aan de economie en een productief arbeidsbestaan leiden. Investeren in gezondheid is een van de slimste economische keuzes die we kunnen maken.

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