



U.S. GLOBAL HEALTH POLICY

SURVEY OF AMERICANS
ON THE U.S. ROLE IN GLOBAL HEALTH

May 2009



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Introduction and Executive Summary

The Kaiser Family Foundation *Survey of Americans on the U.S. Role in Global Health* examines the American public's knowledge, beliefs and opinions about the role of the United States in efforts to improve health for people in developing countries. A companion survey on domestic HIV/AIDS was conducted at the same time and has been previously released. The global health survey combines new questions about whether, why and how the U.S. should contribute to international health efforts, along with trend questions specifically about global HIV/AIDS that the Foundation has tracked since 2000. This new survey will serve as a baseline for ongoing efforts to assess and track Americans' attitudes towards U.S. global health investments and priorities as the Foundation expands its policy work in this area.

In recent years, there has been growing attention to global health on the U.S. policy agenda. Global health spending represents a key part of U.S. foreign assistance, and U.S. funding for global health more than doubled between FY 2004 and FY 2008.¹ Given this increased interest, it is particularly timely to gauge the public's support for such programs. As is the case with all surveys, the timing and context in which this survey was conducted play an important role in interpreting the results. Interviews were conducted from January through March 2009, in the midst of an economic recession both at home and around the world. As such, many of the findings, particularly those related to attitudes towards U.S. government spending, need to be interpreted in this context.

For example, despite the deep recession, less than a quarter (23 percent) of the public wants to decrease spending on efforts to improve health for people in developing countries, and two-thirds support maintaining (39 percent) or increasing (26 percent) current levels of spending. At the same time, the current economic crisis does appear to be tilting Americans' concerns toward taking care of the home front first – 71 percent say that given the serious economic problems facing the country and the world right now, the U.S. cannot afford to spend more on global health efforts. Still, support for increased spending on global health priorities such as HIV/AIDS has not completely eroded. Thirty-seven percent now say the U.S. spends too little on fighting the HIV/AIDS problem in developing countries – lower than the 56 percent who said the U.S. was spending too little in 2006, but still higher than the 31 percent who said so in 2002. In the context of a deep recession, alternative interpretations of these findings are reasonable. They could be seen as a modest falling off of public support for global health, or as evidence of its staying power despite the recession.

The survey also found that the *purpose* of aid matters to the public – people are more supportive when specific types of health spending are mentioned. For example, more than half the public (52 percent) says the U.S. spends too much on “foreign aid,” but far fewer say the same about spending on efforts to improve health (23 percent) or fight HIV/AIDS (16 percent) in developing countries. Inaccurate views of the actual size of U.S. foreign aid may contribute to negative views of spending in this area. Nearly half the public (45 percent) incorrectly chooses foreign aid as one of the largest areas of spending by the federal government, more than choose Medicare or Social Security (33 percent each) – programs that actually dwarf foreign aid in terms of federal spending – and we found that those who are better informed about foreign aid spending are more likely to support increases in U.S. global health spending.

Other groups also stand out as being more supportive of increased U.S. action on global health, including young adults, African Americans, and self-identified Democrats. By contrast, the elderly and those who identify as Republicans are less likely to support such action.

The public sees objective criteria of need, rather than foreign policy goals, as the most important factors for determining how U.S. dollars should be spent in developing countries. For example, majorities say the impact on children (69 percent), number of lives lost (60 percent), and the impact on quality of life (55 percent) should be very important factors in determining how to spend U.S. aid, while far fewer say the same about whether a country is friendly to the U.S. (36 percent) or whether it is in the interest of U.S. foreign policy (25 percent). Further, while the public does recognize a variety of benefits to spending on health in developing countries – more than six in ten say it helps with U.S. diplomacy and with improving the U.S.'s image in countries that receive assistance – moral factors appear to drive support more than national interest ones, with a greater share of Americans supporting such spending because it is “the right thing to do” than because it will advance our

¹ Kaiser Family Foundation, *The U.S. Government's Global Health Policy Architecture: Structure, Programs, and Funding*, April 2008, available at <http://www.kff.org/globalhealth/7881.cfm>

national objectives. Foreign policy objectives may however be a greater motivator for elites than for the public in the U.S., and the beneficiaries of aid in developing nations, who are not the subject of this survey, may look more favorably on the U.S. as a result of it.

The public's priorities for development assistance focus on fundamental and inter-connected issues, including education, poverty reduction, and health. After fighting terrorism and promoting peace (which 59 percent of Americans say should be a top priority for U.S. help to developing countries), improving education rises above other development issues, with 55 percent saying it should be a top priority. Behind education, several priorities are closely grouped together, including reducing poverty (41 percent), improving health (38 percent), protecting the environment and fighting climate change (37 percent), and promoting the rights of women (34 percent). On health specifically, the public sees many issues as important, with certain priorities rising to the top, including improving access to clean water, increasing childhood vaccinations, and reducing hunger and malnutrition (six in ten say each of these should be a top priority for U.S. spending on health in developing countries).

When it comes to progress, large majorities of Americans think that U.S. health spending over the past few years has made at least a small difference in improving the lives of people (83 percent) and in changing the overall course of disease in developing countries (79 percent), including some who say it has made a big difference in these areas (38 percent and 30 percent, respectively). However views are more mixed about whether additional spending will lead to further progress – four in ten say more spending will lead to meaningful progress, while about half say it won't make much difference. Corruption stands out as the biggest perceived barrier to success, with nearly half saying corruption and misuse of funds is the biggest reason why it has been difficult to improve health in developing countries.

Finally, trend data on global HIV/AIDS indicate that the public's sense of urgency and reported visibility of the HIV/AIDS epidemic around the world has declined notably in recent years. Fewer now name HIV/AIDS as the most urgent problem facing the world (21 percent, compared with 34 percent in 2006), and fewer say they have heard a lot about AIDS in Africa in the past year (26 percent, compared with 51 percent in 2004). More people now say the world is making progress on HIV/AIDS (46 percent, compared with 36 percent in 2006), while fewer say the world is losing ground against the disease (32 percent, compared with 40 percent in 2006), perhaps also indicating an attenuated sense of urgency about the global epidemic.

These and other survey findings are presented in detail in the report that follows, and the implications for engaging the public and gaining their support for global health efforts are discussed in the conclusion.

Acknowledgment

This survey was supported in part by a grant from the Bill & Melinda Gates Foundation.

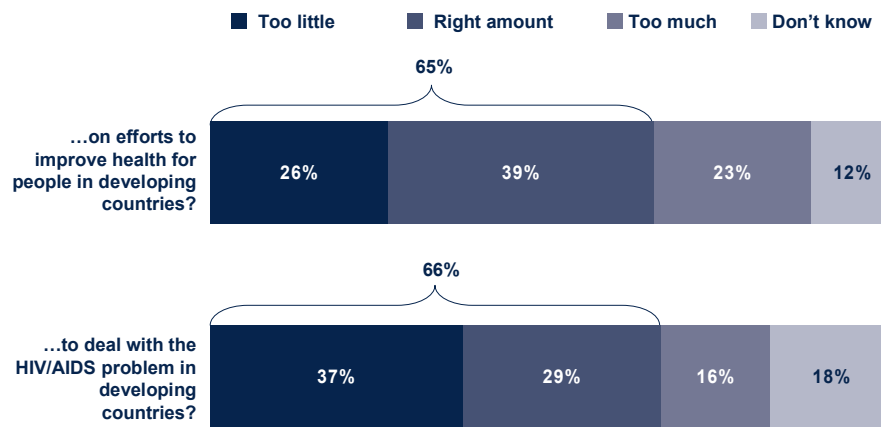
Support for action on global health in the current economic climate

Many Americans desire stepped up efforts on global health even as economic concerns steer their focus towards taking care of problems at home first. The deep economic recession has tempered, but not erased, the public’s support for government spending on global health priorities.

When it comes to spending on global health, about two-thirds of the public says the U.S. government is now spending too little (26 percent) or about the right amount (39 percent) on efforts to improve health in developing countries, and a similar share says U.S. government spending on HIV/AIDS in these countries is too little (37 percent) or about right (29 percent). Far fewer say we are currently spending too much in these areas (23 percent and 16 percent, respectively).

Spending on Global Health and Global HIV

Do you think the U.S. is now spending too much, too little, or about the right amount...

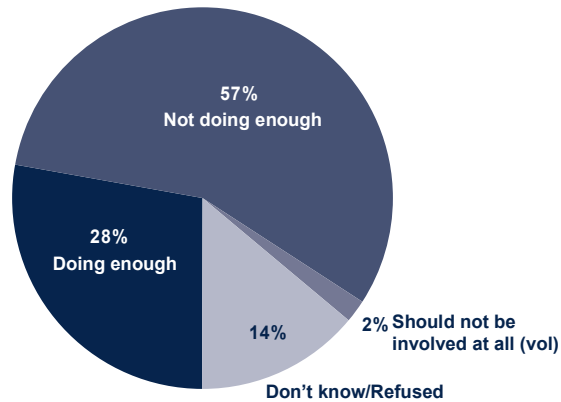


Note: Asked of separate half-samples.

More broadly, Americans think the developed world in general should be doing more on global health – nearly six in ten (57 percent) say that developed nations such as the U.S., England, France, Italy, Germany and Japan, are not doing enough to improve health for people in developing countries, while nearly three in ten (28 percent) think developed countries are doing enough in this area.

Majority Say Developed Nations Not Doing Enough

Do you think the developed nations of the world, such as the U.S., England, France, Italy, Germany and Japan, are doing enough or not doing enough to improve health for people in developing countries?



Despite this general support for doing more on global health, the current economic crisis appears to be tilting Americans' concerns toward taking care of the home front first.

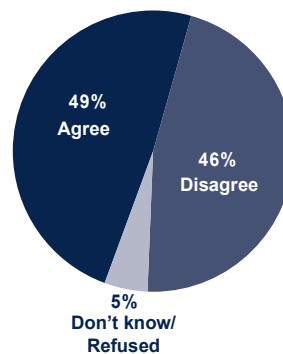
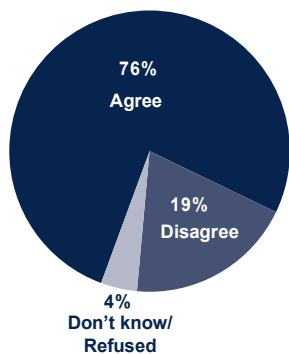
Currently, about three-quarters of Americans (76 percent) agree that “the U.S. should address problems at home first rather than spending more money to deal with the HIV/AIDS epidemic in developing countries,” and about half (49 percent) agree that “the U.S. is a global leader and has a responsibility to spend more money to help fight the HIV/AIDS epidemic in developing countries.” When forced to choose which statement they agree with more strongly, about seven in ten (69 percent) choose the first statement (“address problems at home first”), and 23 percent choose the second statement (“U.S. is a global leader”).

Views of U.S. Responsibility as Global Leader on HIV

Percent who agree/disagree with each of these statements:

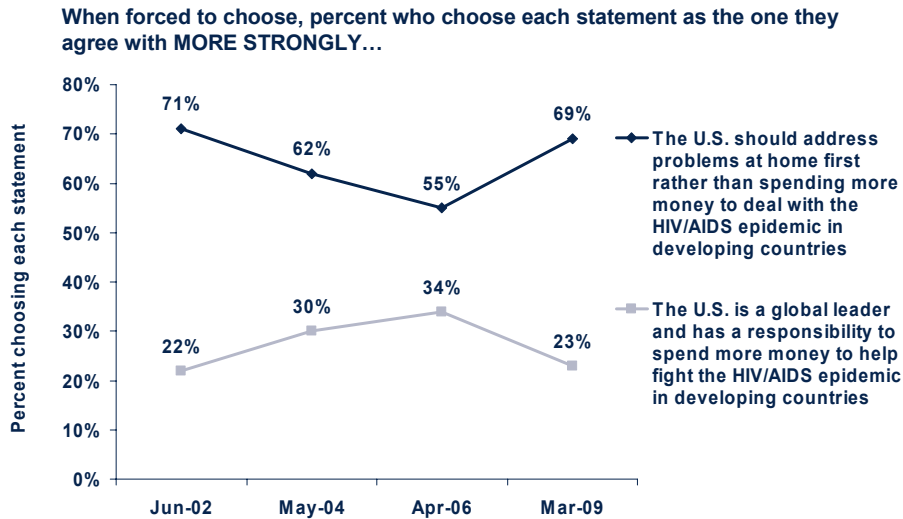
The U.S. should address problems at home first rather than spending more money to deal with the HIV/AIDS epidemic in developing countries

The U.S. is a global leader and has a responsibility to spend more money to help fight the HIV/AIDS epidemic in developing countries



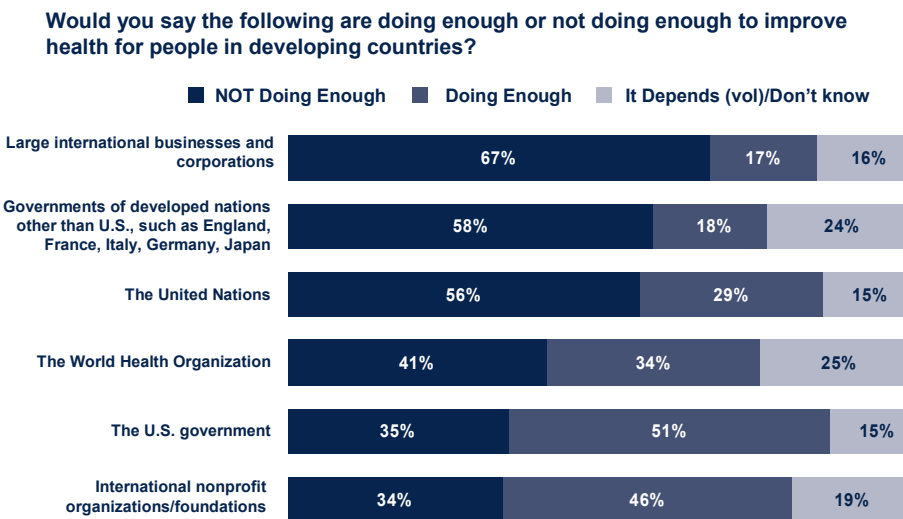
While this divide has been present since we began tracking this question in 2002, with more choosing the need to address problems at home first, public opinion had been trending toward the “global leader” side in recent years; the 2009 survey represents a return to levels measured in 2002.

Trend in U.S. Responsibility as Global Leader on HIV



Large shares of the public see a role for many sectors, beyond the U.S. government, that could do more to improve health for people in developing countries, including large international business and corporations (67 percent), the governments of developed nations other than the U.S. (58 percent), and the United Nations (56 percent). At the same time, about half (51 percent) think the U.S. government is already doing enough to improve health for people in developing countries, while just over a third (35 percent) think the U.S. should be doing more.

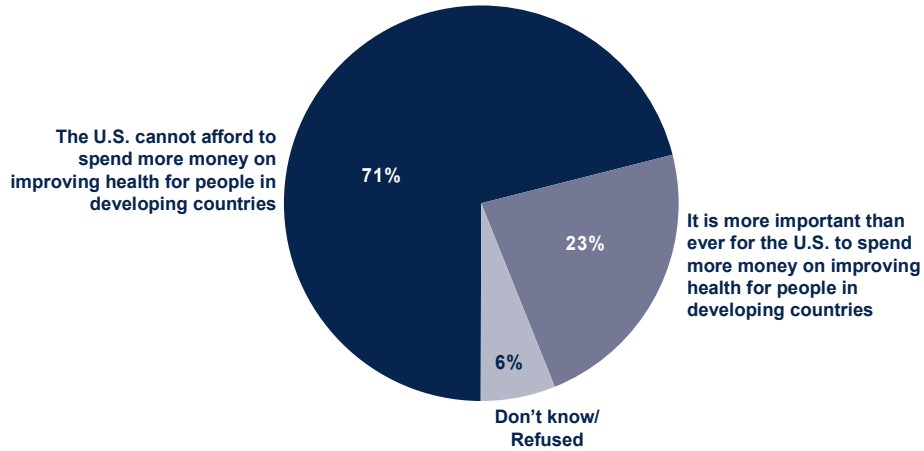
Who is Doing Enough on Global Health?



The current economic crisis also appears to be making most Americans leery of increased spending abroad. Seven in ten adults (71 percent) say that given the serious economic problems facing the country and the world right now, the U.S. cannot afford to spend more money on improving health in developing countries, while close to a quarter (23 percent) say the economic crisis makes it more important than ever for the U.S. to increase such spending.

Spending on Global Health in Hard Economic Times

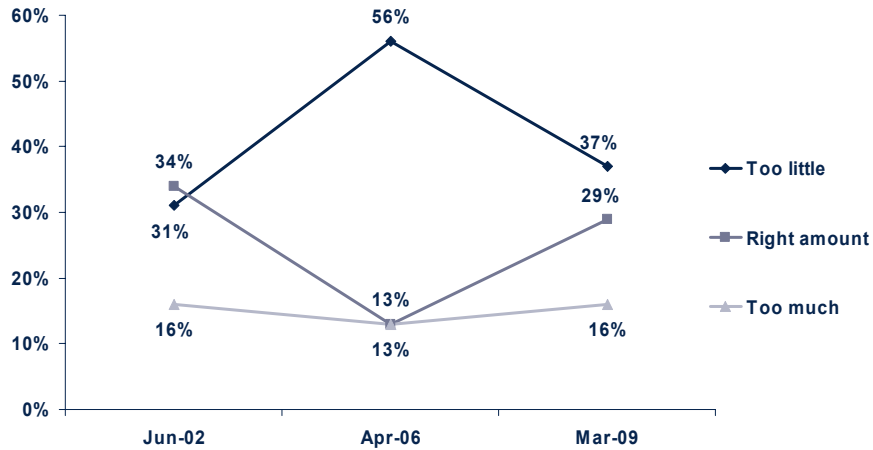
Which of the following comes closer to your view? Given the serious economic problems facing the country and the world right now...



However, support for spending more on global health priorities has not completely eroded even during this deep recession. While fewer now than in 2006 say the U.S. should *increase* spending on HIV/AIDS in developing countries (37 percent, down from 56 percent), this share is still higher today than it was in 2002 (31 percent). And, as noted above, a large majority say spending is either too little (37 percent) or about right (29%), while just 16 percent say U.S. government spending on global HIV should be decreased.

Trend in Attitude Towards Spending on Global HIV/AIDS

Do you think the U.S. is now spending too much, too little, or about the right amount to deal with the HIV/AIDS problem in developing countries?



Note: Don't know/Refused not shown.

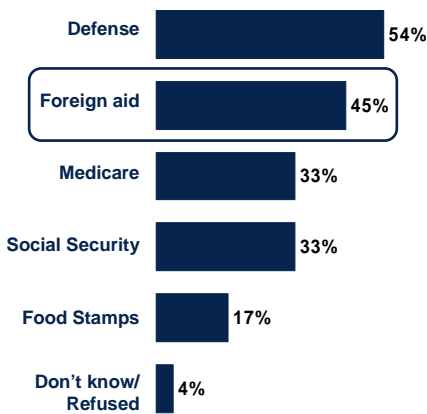
Foreign aid: the big myth remains

The public is not fond of “foreign aid” – perhaps clouded by misconceptions about actual U.S. spending in this area – but purpose and framing matter. People are more supportive of U.S. government spending on global health than foreign aid in general, and even more supportive still when framed in terms of a specific health issue, in this case HIV/AIDS.

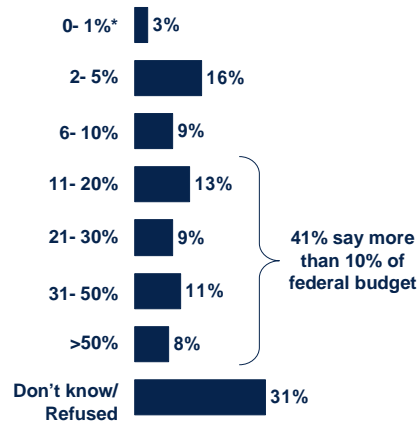
As we’ve found in the past, about half of Americans (52 percent) think the U.S. is now spending too much on foreign aid. This attitude may be fueled, at least in part, by misconceptions about how much the U.S. actually spends on foreign aid. While foreign aid accounts for roughly one percent of the federal budget², 45 percent of Americans choose foreign aid as one of the two largest areas of spending by the federal government, more than choose Medicare or Social Security (33 percent each). In reality, U.S. foreign aid spending is dwarfed by spending on defense, Medicare, Social Security, and interest on the national debt, among other items.

Knowledge About Foreign Aid and the Federal Budget

Which of the items on this list would you say are the two largest areas of spending by the federal government? [Adds up to more than 100% due to multiple responses]



Just your best guess, what percentage of the federal budget is spent on foreign aid? [Open-ended]



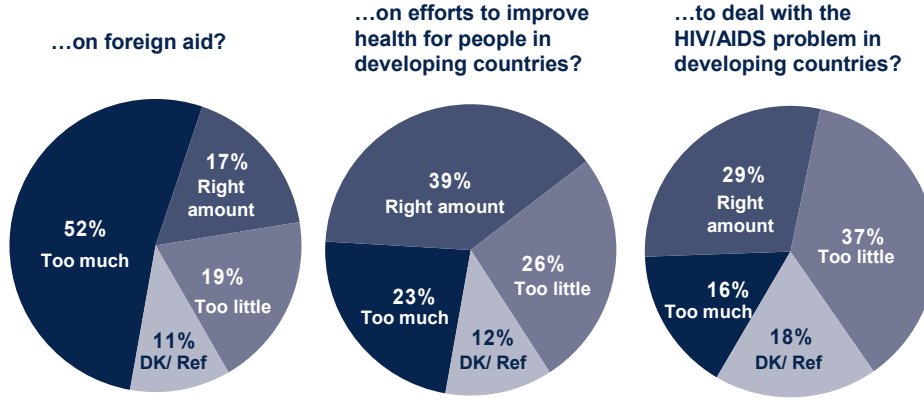
Note: Asked of separate half-samples.

While most Americans think the U.S. currently spends too much on foreign aid, support for more spending increases when foreign aid is described more specifically in terms of health-related goals. More than half (52 percent) say the U.S. is spending too much on foreign aid in general; however this decreases to 23 percent when it comes to spending on “efforts to improve health for people in developing countries.” Support for current levels of aid are even stronger when it comes to spending to fight HIV/AIDS in these countries; just 16 percent say the U.S. is spending too much in this area. Similarly, support for *increased* spending grows when more specific health goals are mentioned; the share saying the U.S. spends too little is 19 percent for foreign aid in general, 26 percent for spending to improve health, and 37 percent for spending to fight HIV/AIDS in developing countries.

² Congressional Research Service, *Foreign Aid: An Introduction to U.S. Programs and Policy*, R40213, February 2009.

Attitudes Toward Spending Differ by Specificity

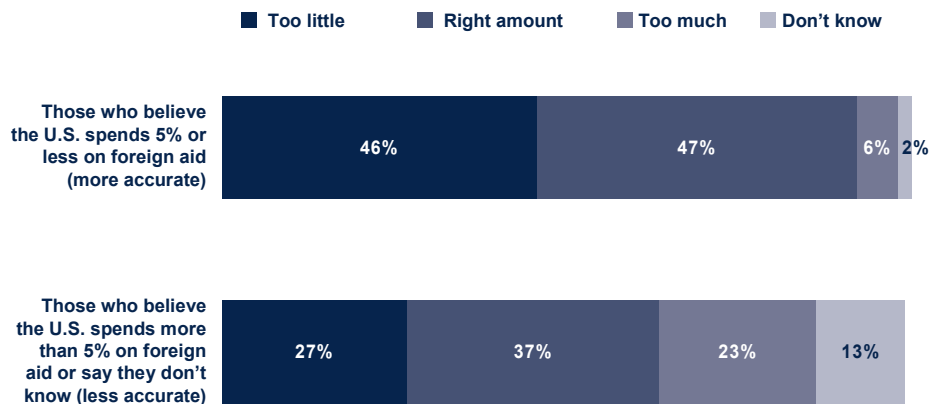
Do you think the U.S. is now spending too much, too little, or about the right amount...



Support for spending on global health efforts may be related to misconceptions about actual U.S. spending on foreign aid that are mentioned above. We found that those with more accurate views on foreign aid spending are much more likely to say the U.S. is not spending enough on efforts to improve health in developing countries, and much less likely to say the U.S. is spending too much on these efforts.

Spending Attitudes Differ By Foreign Aid Knowledge

Do you think the U.S. is now spending too much, too little, or about the right amount on efforts to improve health for people in developing countries?

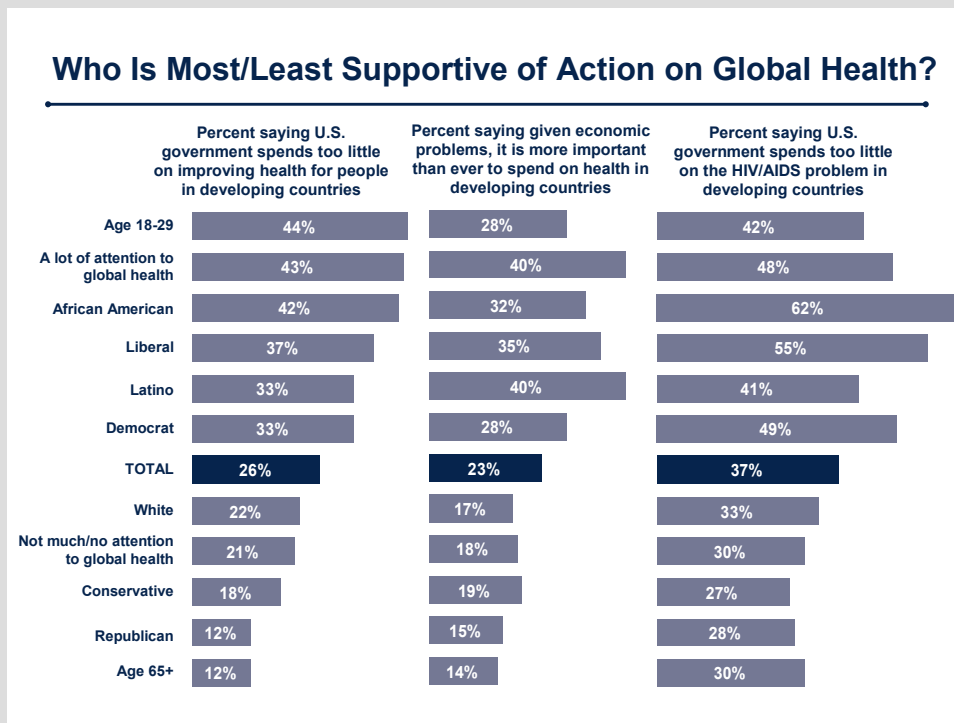


Which groups are most supportive of increased action on global health?

Certain groups among the public are more likely than others to support increased action from the U.S. on global health issues, including young people, African Americans, Latinos, those who self-identify as liberals or Democrats, and those who say they pay “a lot” of attention to global health issues. By contrast, Americans ages 65 and older, whites, self-identified conservatives and Republicans, and those who pay less attention to global health issues are less likely to support increased U.S. action on global health.

For example, more than four in ten (44 percent) young adults ages 18-29 say the U.S. government currently spends too little on efforts to improve health for people in developing countries, compared with just 12 percent of those ages 65 and older. Similarly, four in ten of those who pay a lot of attention to global health issues say that given the economic problems facing the country and the world right now, it is more important than ever for the U.S. to spend on improving health in developing countries, twice as many as among those who pay little or no attention to global health issues (18 percent). African Americans are particularly supportive when it comes to increasing U.S. spending on global HIV/AIDS; 62 percent of them say that the U.S. currently spends too little on HIV/AIDS in developing countries, compared with a third (33 percent) of whites.

These findings suggest that young people, members of racial and ethnic minority groups, and self-identified liberals and Democrats make up a natural target audience for those looking to gain support for increased action on global health, while the other groups represent audiences who are more negatively predisposed and will require persuasion.



Priorities for action

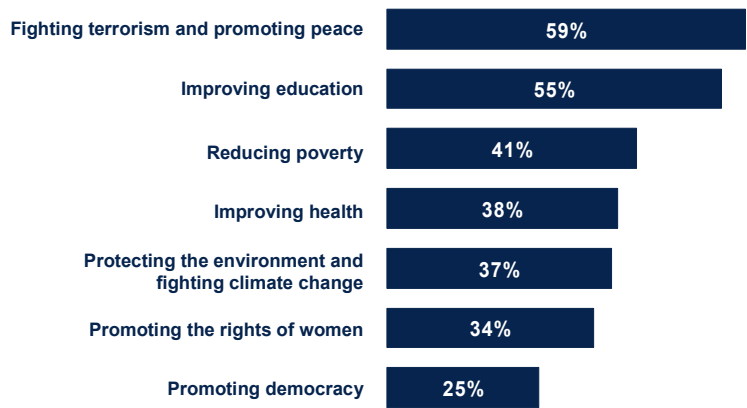
The public sees many priorities as part of a broad health and development agenda for U.S. aid to developing countries, focusing on education first, followed by an array of issues including poverty, health, the environment, and women’s rights.

After fighting terrorism and promoting peace (which 59 percent of Americans say should be a top priority for U.S. help to developing countries), improving education (55 percent) tops the list of the public’s priorities for development assistance, ranking noticeably ahead of other items. Behind education, several issues are closely grouped together as part of a broad development agenda: reducing poverty (41 percent say top priority), improving health (38 percent), protecting the environment and fighting climate change (37 percent), and promoting the rights of women (34 percent). Fewer Americans (25 percent) see promoting democracy as a top priority for U.S. help to developing countries.

Looked at as a whole, it might be said that when it comes to development assistance, Americans place priority on basic investments with a long-term payoff to address a variety of tough inter-connected challenges, with a particular emphasis on improving education.

Priorities for Spending to Help Developing Countries

Percent saying each should be a TOP priority for the new president and Congress when it comes to helping developing countries.



Priorities for health

On health specifically, lots of issues are seen as important, but a few priorities for U.S. aid rise to the top of the public’s agenda, including clean water, vaccinating children, and reducing hunger.

When it comes to U.S. aid to developing countries in the area of health specifically, the public sees many things as top priorities. However, three issues rise somewhat higher than others: improving access to clean water, increasing childhood vaccinations, and reducing hunger and malnutrition (six in ten say each of these should be a top priority for U.S. spending on health in developing countries). Large shares – between a third and nearly half – also name other issues as top priorities, including expanding training and supply of medical professionals (48 percent), preventing and treating HIV/AIDS (45 percent), improving access to prenatal care (43 percent), building and improving health care facilities (40 percent), preventing and treating Malaria (39 percent) and Tuberculosis (38 percent), and providing access to family planning services (35 percent). Somewhat fewer see preventing and treating heart disease and other chronic diseases as a top priority (28 percent).

Spending Priorities Within Global Health

Percent saying each should be a TOP PRIORITY for U.S. spending on health in developing countries:



Motivations for spending

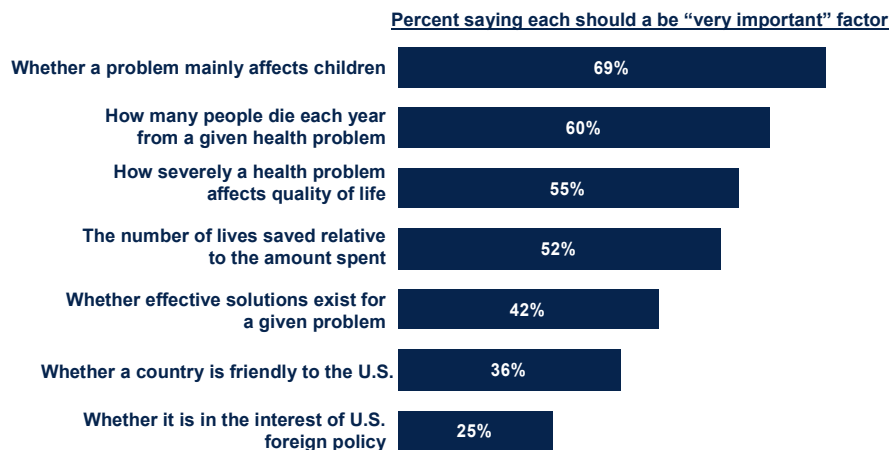
Objective criteria of need, not U.S. foreign policy goals, are seen as the most important factors for determining how U.S. global health aid should be spent. Americans emerge in the survey as a personally caring people, wanting to help developing countries because it is the right thing to do, not because it will advance our national objectives.

The factors seen by the largest shares of the public as being very important in determining how to spend U.S. dollars on global health are whether a problem mainly affects children (69 percent say this should be a very important factor), how many people die each year from a given health problem (60 percent), and how severely a health problem affects quality of life (55 percent). Cost-effectiveness is also seen as an important factor by more than half the public (52 percent), while somewhat fewer (42 percent) say the existence of effective solutions should be a very important factor.

By contrast, U.S. self-interest ranks much lower. Just over a third (36 percent) say that “whether a country is friendly to the U.S.” and a quarter say “whether it is in the interest of U.S. foreign policy” should be very important factors in determining how to spend U.S. dollars on improving health in developing countries.

Factors to Determine Spending

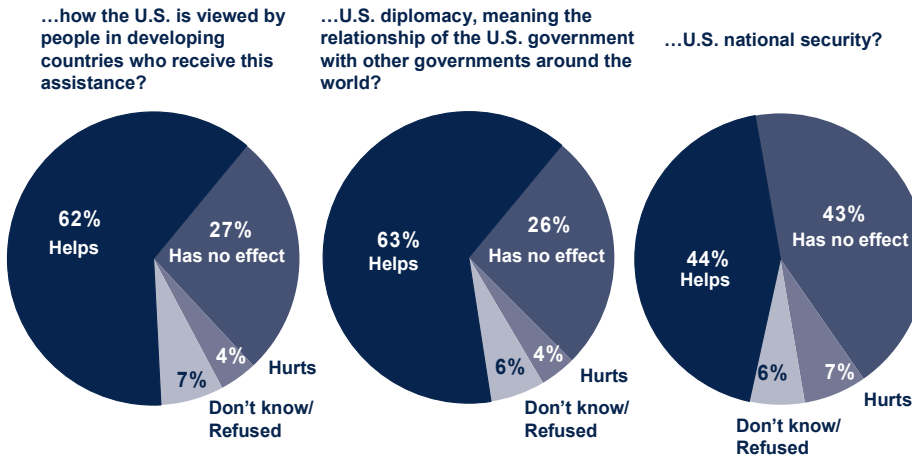
I'm going to read you some different factors that could be used to determine how to spend U.S. dollars on improving health for people in developing countries.



Similarly, while people see a variety of benefits to spending money on global health and recognize a role for U.S. interests, the moral argument trumps self-interest when it comes to reasons for the U.S. to provide this type of aid. More than six in ten U.S. adults think that spending money to improve health in developing countries is helpful for U.S. diplomacy (63 percent) and for the U.S.’s image among residents of the countries receiving assistance (62 percent). Somewhat fewer (44 percent) think such spending helps to improve U.S. national security, while a roughly equal share (43 percent) say it has no effect.

Perceived Benefits of U.S. Spending on Global Health

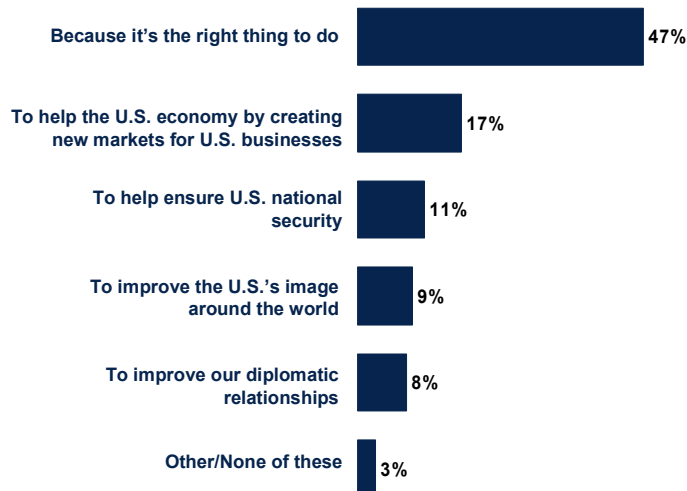
Do you think that spending money on improving health for people in developing countries helps, hurts, or has no effect on...



Despite recognizing these “self-interest” benefits of U.S. spending on global health, when asked about the *most* important reason for the U.S. to spend money on health in developing countries, nearly half the public (47 percent) says “because it’s the right thing to do.” Running a distant second, 17 percent say the most important reason for such spending is to help the U.S. economy by creating new markets for American businesses. Three other reasons were chosen by about one in ten each, including ensuring U.S. national security (11 percent), improving the U.S. image around the world (9 percent), and improving our diplomatic relationships (8 percent).

U.S. Should Spend Because “It’s the Right Thing to Do”

I’m going to read you some reasons why the U.S. might spend money on improving health for people in developing countries, and I’d like you to tell me which you think is the MOST important reason.

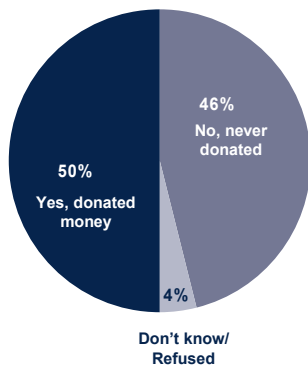


Note: Don't know/Refused not shown.

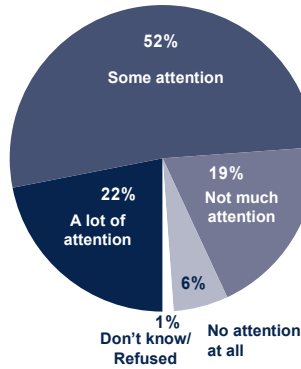
Many Americans endorse the sentiment that spending on global health is the “right thing to do” with their own pocketbooks. Fully half say they have personally donated money to an organization that works to improve health for people in developing countries. At the same time, global health is not an issue that most people spend a lot of time thinking about, though a sizable subset do. Just over one in five (22 percent) say they pay “a lot” of attention to issues related to global health, while about half (52 percent) pay “some” attention, and a quarter pay “not much” or “no attention at all.” Further, about a quarter (26 percent) say they have traveled to a developing country at some point.

Personal Connection With Global Health Issues

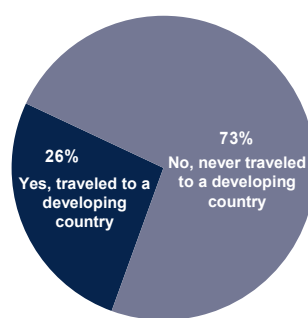
Have you, personally, ever donated money to an organization that works to improve health for people in developing countries, or not?



In general, how much attention do you pay to issues related to global health?



Have you ever traveled to a developing country, such as those in Africa, Asia, and Latin America, or not?

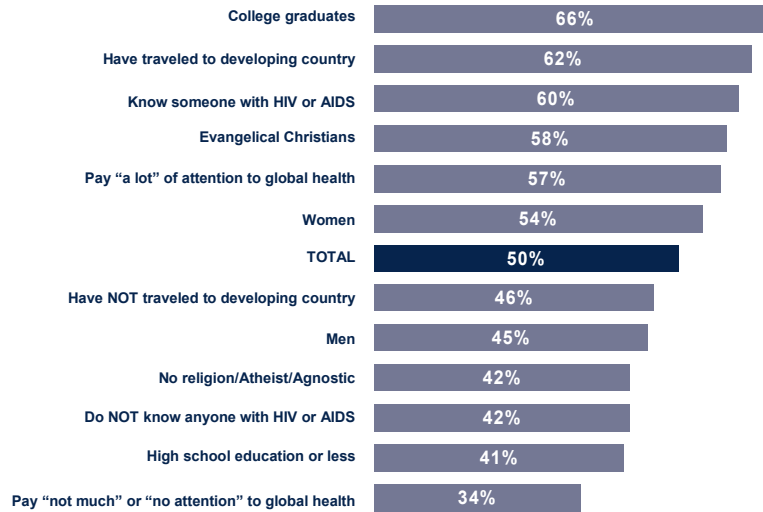


Who is most likely to contribute to global health charities?

College graduates, those who have traveled to a developing country, those who know someone with HIV/AIDS, Evangelical Christians, and those who pay a lot of attention to global health issues are among the groups most likely to say they have ever donated money to a global health-related charity.

Who Is Most/Least Likely to Give to Global Health Charities?

Percent saying they have donated money to an organization that works to improve health for people in developing countries:



Perceptions of progress

Overall, Americans believe that U.S. spending has made at least a small difference in improving health in developing countries. However, views are more mixed about how much progress can be made with more spending, and the public sees many barriers to success, most notably corruption.

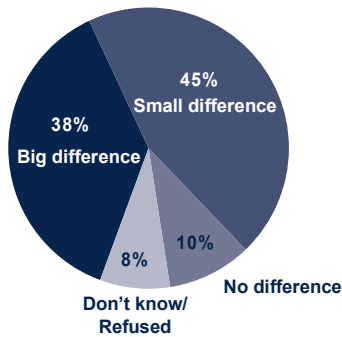
Most people think that U.S. spending on health in developing countries over the past 5 years has made at least a small difference at both the macro- and micro-level; however, opinions are more mixed when it comes to whether more spending will lead to meaningful progress.

When asked about U.S. spending on global health over the past 5 years, large majorities say that this spending has made at least a small difference in the lives of individual people (83 percent), and in changing the overall course of disease in these countries (79 percent), while very few say such spending has not made a difference (10 percent and 15 percent, respectively). Nearly four in ten (38 percent) say U.S. spending on health has made a *big* difference in the lives of individuals in developing countries, and three in ten say it has made a big difference in changing the overall course of disease.

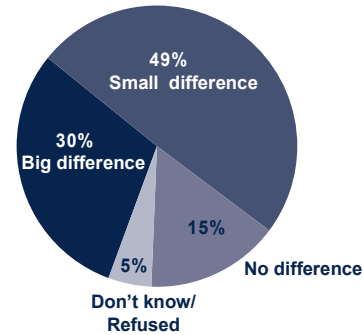
Perceived Progress on Global Health

In the past 5 years, do you think U.S. spending to improve health for people in developing countries has made a big difference, a small difference, or no difference...

... in the lives of individual people in these countries?



...in changing the overall course of disease in these countries?

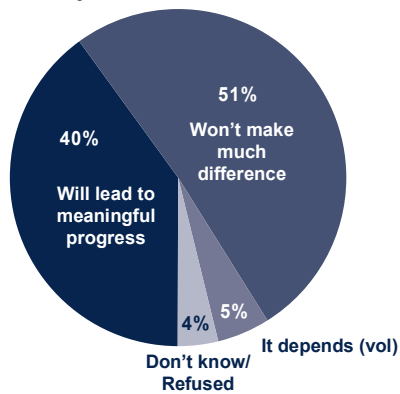


However, public opinion on how much progress can be made on global health with additional spending from the U.S. and other developed countries is somewhat mixed. About half (51 percent) think that increasing spending won't make much difference, while about four in ten say it will lead to meaningful progress in improving health for people in developing countries.

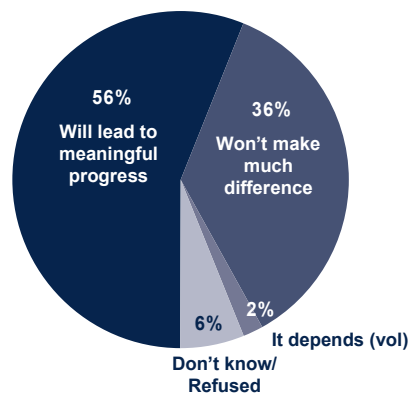
As we saw above with support for U.S. aid, people are more likely to think spending will make a difference when specific diseases or programs are mentioned. A majority (56 percent) say that more spending on HIV prevention in developing countries will lead to meaningful progress in slowing the epidemic, while just over a third (36 percent) say it won't make much difference.

Will More Spending Make a Difference?

In general, do you think more spending from the U.S. and other developed countries will lead to meaningful progress in improving health for people in developing countries, OR that spending more money won't make much difference?



In general, do you think that spending more money on HIV/AIDS prevention in developing countries will lead to meaningful progress in slowing the epidemic, or that spending more money won't make much difference?



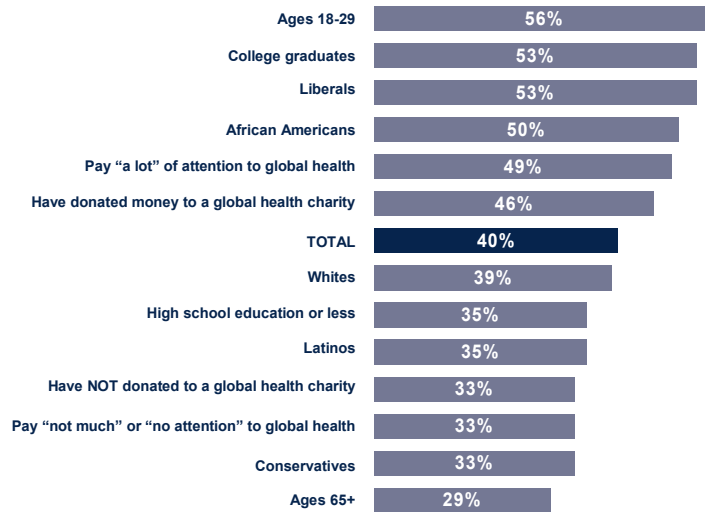
Note: Asked of separate half-samples.

Who is most likely to say spending will make a difference on global health?

While four in ten Americans overall believe that increased spending from the U.S. and other developed countries will lead to meaningful progress in developing countries, this belief is more common among certain groups, including young adults, college graduates, self-identified liberals, African Americans, and those who pay a lot of attention to global health issues. Those who are most skeptical about the impact of more spending include seniors, conservatives, and those who don't pay much attention to global health.

Who Is Most/Least Likely To Think More Spending Will Lead to Progress in Improving Health?

Percent saying more spending from the U.S. and other developed countries will lead to meaningful progress in improving health for people in developing countries:

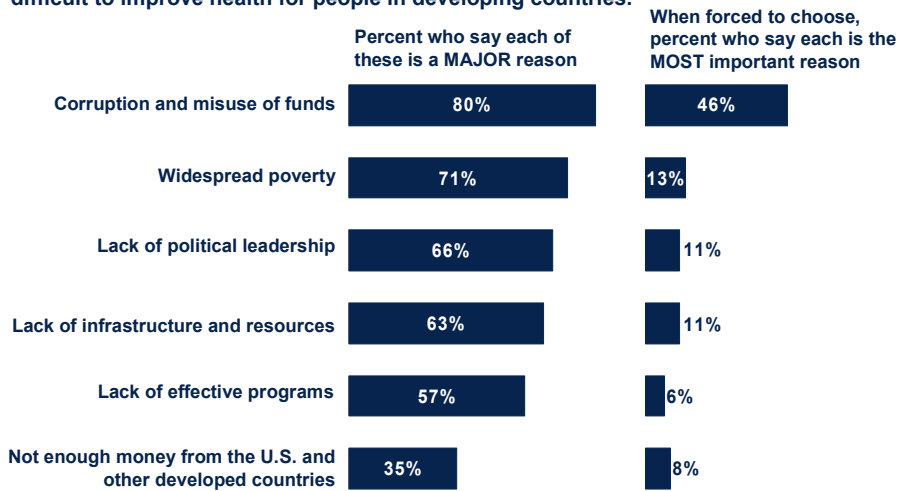


When it comes to barriers to progress, large shares of the public see a lot of things as major reasons why it has been difficult to improve health for people in developing countries, including corruption and misuse of funds (80 percent), widespread poverty (71 percent), lack of political leadership (66 percent), lack of infrastructure and resources (63 percent), and lack of effective programs (57 percent). When asked to choose the most important reason, corruption rises to the top, with nearly half (46 percent) choosing it as the chief reason.

Importantly, and perhaps a reason for the tempered views on U.S. global health spending mentioned above, many fewer people (35 percent) see lack of money from the U.S. and other developed countries as a major reason why it has been difficult to improve health in developing countries.

Corruption Seen As Biggest Barrier to Progress to Improving Health

Now I will mention some things that may or may not be reasons why it has been difficult to improve health for people in developing countries.

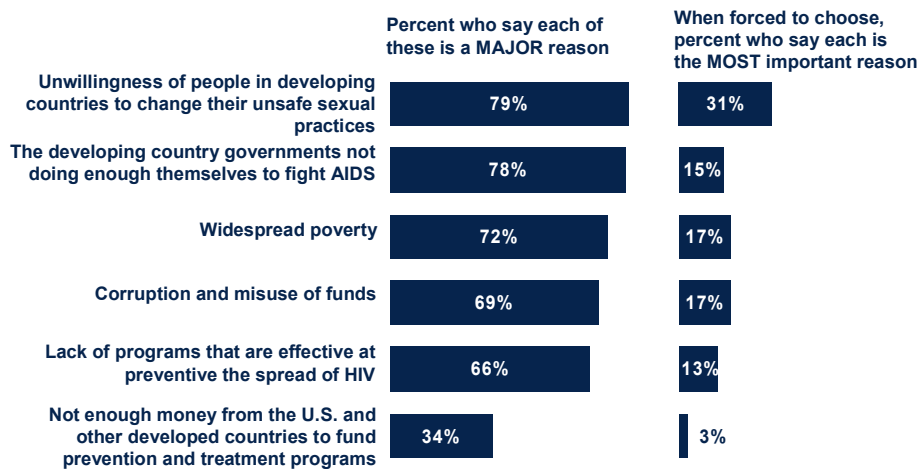


When asked about the fight against HIV/AIDS, large majorities of the public also identify a variety of barriers to controlling the spread of the disease in developing countries, including unwillingness of people to change their unsafe sexual practices (79 percent), developing country governments not doing enough (78 percent), widespread poverty (72 percent), corruption and misuse of funds (69 percent), and lack of effective HIV prevention programs (66 percent). When asked to choose the most important reason, the top reason chosen was unwillingness of people in developing countries to change their unsafe sexual practices (31 percent).

Again, just about a third (34 percent) see lack of money from the U.S. and other developed countries to fund prevention and treatment programs as a major reason why it has been difficult to control the spread of HIV/AIDS in developing countries.

Unsafe Sexual Practices Seen As Biggest Barrier to Progress on HIV/AIDS

Now I will mention some things that may or may not be reasons why it has been difficult to control the spread of HIV/AIDS in developing countries.



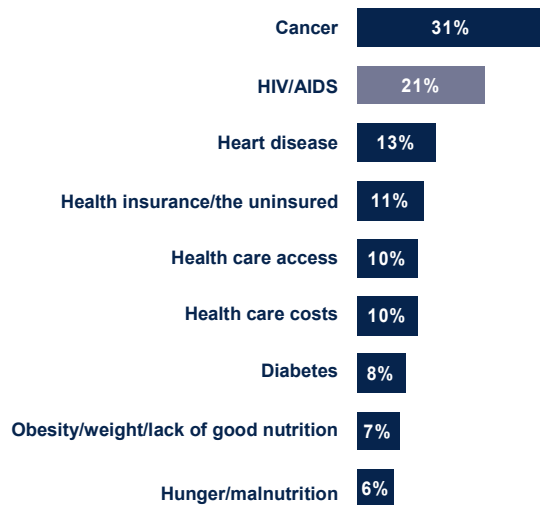
Shifting opinions and perceptions of global HIV/AIDS

The public’s sense of urgency and reported visibility of the HIV/AIDS epidemic around the world has declined in recent years.

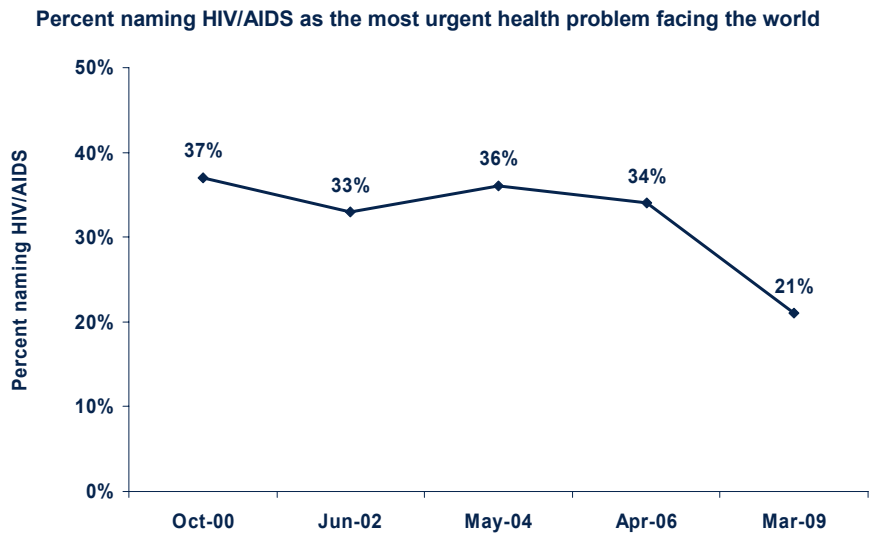
In open-ended questions from 2000 through 2006, the share of U.S. adults naming HIV/AIDS as the most urgent health problem facing the world had hovered around a third, but declined markedly in 2009. Currently, about one in five adults (21 percent) name HIV/AIDS as the world’s most urgent health problem, ranking second behind cancer (31 percent), and ahead of chronic diseases such as heart disease (13 percent) and diabetes (8 percent).

Perception of Most Urgent Health Problem Facing World

What do you think is the most urgent health problem facing the world today? (Open-ended, multiple responses allowed)



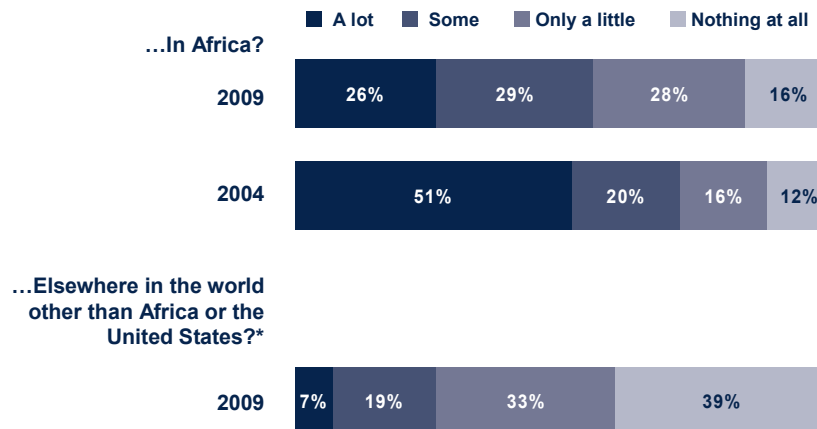
Trend in Share Naming HIV/AIDS As World's Most Urgent Health Problem



These declines may be related in part to people hearing less about the problem of HIV abroad. In 2004, fully half (51 percent) of adults in the U.S. said they had seen, heard, or read “a lot” about the problem of AIDS in Africa in the previous year. In 2009, about half as many (26 percent) say they have heard a lot about the disease in Africa. An even smaller share (7 percent) reports having heard a lot about AIDS in countries other than Africa or the United States.

Decline in Reported Visibility of AIDS in Africa Since 2004

During the last year, how much, if anything, have you personally seen, heard, or read about the problem of AIDS...

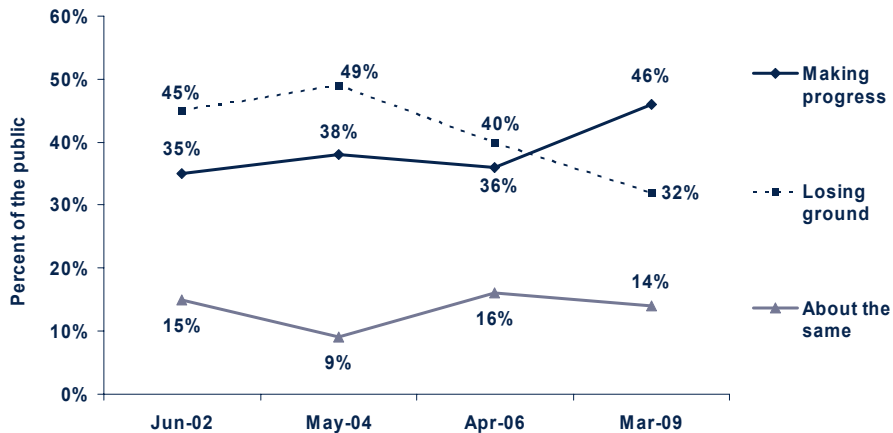


* Not asked in 2004. Note: Don't know/Refused not shown

Perceptions have also shifted when it comes to the world’s progress on HIV/AIDS. Currently, nearly half the public (46 percent) says that the world is making progress when it comes to HIV/AIDS, while about a third (32 percent) say the world is losing ground. This is the first time that more people have said the world is making progress than losing ground since we began asking this question in 2002. This may suggest that the public’s sense of urgency about the global epidemic is reduced.

Trend in Perceived Progress on HIV/AIDS

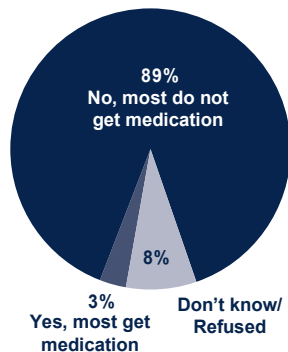
Thinking about the way the problem of HIV/AIDS affects the world today, do you think the problem is about the same as it has been, that the world today is making progress in this area, or that the world today is losing ground?



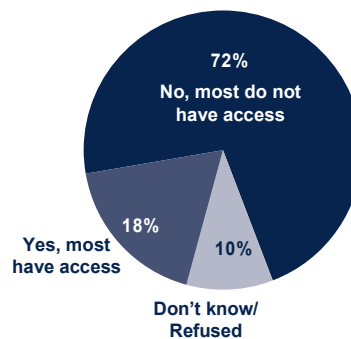
However, despite increasingly positive attitudes about the world’s progress on HIV, large majorities of Americans know that most people with HIV in developing countries do not get the medication they need (89 percent), and that most people at high risk for HIV in these countries don’t have access to needed prevention services (72 percent).

Perception of Access to HIV Prevention & Treatment

Do you think that most people in developing countries who need medication for HIV actually get that medication, or do you think that most of them do NOT get the medication they need?



Do you think that most people at high risk for HIV in developing countries have access to needed prevention services, such as HIV education, testing, and counseling, or not?



Conclusions

The survey results presented here have many implications, particularly for those who are interested in engaging the public and gaining their support for global health efforts. On one hand, despite the deep economic recession, there is no public outcry for decreasing levels of health aid to the developing world. In fact, the status quo is the preferred option – about two-thirds favor maintaining or increasing current levels of U.S. funding for improving health and for fighting HIV/AIDS in developing countries. On the other hand, there are signs of decreasing visibility and sense of urgency about the problem of HIV/AIDS around the world. Trend data suggest that advocates may want to increase their efforts; otherwise, the gains in public support seen earlier in the decade could be lost.

While Americans recognize a variety of foreign policy and national interest benefits to U.S. spending on global health, these benefits are not driving public support for spending. Rather, Americans believe that global health funding should be based on objective criteria of need, and the moral argument for spending seems to hold the most water with the public. These findings suggest that national interest arguments for development assistance may work better with elites, but may not resonate as much with the public. Instead, the survey suggests that making the public more aware of “success stories” might be a key strategy to increase their support for global health programs, since the public’s main reservation about aid is that it will be squandered because of corruption.

When it comes to priorities for development assistance, the public does not back away from tough issues that require long-term investment. Improving education rises to the top of the public’s priority list for development aid, followed by a group of closely-packed issues, including poverty, health, the environment and women’s rights. Given the inter-connectedness of these issues, we speculate that broader messages about basic approaches to development assistance that link together to lift people up into better conditions may resonate with the public and increase support for global health aid.

Some areas stood out in the survey where public education could potentially impact attitudes. For example, the survey shows that the public grossly overestimates the size of foreign aid spending relative to the overall federal budget, and also shows that those with more accurate views of foreign aid spending are more supportive of spending on global health. Further, people are more supportive of U.S. aid and more likely to think spending will lead to progress when specific types of more popular spending are mentioned. These findings indicate that increasing the public’s awareness about the actual size and type of U.S. health spending in developing countries could potentially increase their support for these efforts.

Survey methodology

The Kaiser Family Foundation *Survey of Americans on the U.S. Role in Global Health* was designed and analyzed by researchers at the Kaiser Family Foundation led by Mollyann Brodie, Ph.D., including Elizabeth Hamel, Jennifer Kates and Sasha Buscho. The survey was conducted by telephone between January 26 and March 8, 2009, among a nationally representative random sample of 2,554 adults ages 18 and older. Telephone interviews conducted by landline (N=1,951) and cell phone (N=603, including 214 who had no landline telephone) were carried out in English and Spanish by Princeton Survey Research Associates International. The survey includes oversamples of African American and Latino respondents as well as respondents ages 18-29. Results for all groups have been weighted to reflect their actual distribution in the nation.

The margin of sampling error for the overall survey is plus or minus 3 percentage points. Most questions reported in this document were asked of a random half-sample of respondents; for these questions the margin of sampling error is plus or minus 4 percentage points. Some questions were asked of a random quarter-sample, and have a margin of sampling error of plus or minus 6 percentage points. Please refer to the Survey Topline for details.

Please note:

- Portions of this survey (questions about the domestic HIV epidemic) have been previously released and can be found at <http://www.kff.org/kaiserpolls/7890.cfm>.
- Percentages may not always add up to 100% due to rounding.
- “Vol.” indicates that a response was volunteered by the respondent, not offered as an explicit choice.
- Trends in this document come from surveys listed on the last page.
- Sampling error is only one of many potential sources of error in this or any other public opinion poll.

Survey Topline

QUESTION 1 PREVIOUSLY RELEASED.

2. What do you think is the MOST urgent health problem facing the world TODAY? (OPEN-ENDED; DO NOT READ RESPONSE CATEGORIES. WAIT FOR REPLY BEFORE PROBE) Is there another health problem you think is almost as urgent? (RECORD UP TO 3 RESPONSES)

Based on Form 2 random half sample

<u>3/09</u>		<u>4/06</u>	<u>5/04</u>	<u>6/02</u>	<u>10/00</u>
31	Cancer	36	41	35	35
21	AIDS or HIV	34	36	33	37
13	Heart disease	18	19	9	12
11	Health insurance/The uninsured	6	6	8	5
10	Health care – access	6	4	6	3
10	Health care – cost	8	8	10	7
8	Diabetes	10	8	5	4
7	Lack of good nutrition/junk foods/obesity/weight disorder ³	9	13	n/a	n/a
6	Hunger/Malnutrition	7	4	11	6
2	Drugs	2	3	4	3
1	Pollution/Global warming/Environment	3	2	n/a	n/a
1	Tuberculosis/Malaria	n/a	n/a	n/a	n/a
1	Clean drinking water	n/a	n/a	n/a	n/a
1	Smoking	3	3	n/a	n/a
12	Other	16 ⁴	17	25	20
10	Don't know/Refused	7	7	7	9
(n=1234)		(1248)	(1432)	(720)	(1363)

Total exceeds 100% due to multiple responses

QUESTION 3 PREVIOUSLY RELEASED.

4. Thinking about the way the problem of HIV/AIDS affects the world today, do you think the problem is ABOUT THE SAME as it has been, that the world today is MAKING PROGRESS in this area, or that the world today is LOSING GROUND?

Based on Form 2 random half sample

<u>3/09</u>		<u>4/06</u>	<u>5/04</u>	<u>6/02</u>
14	About the same	16	9	15
46	World making progress	36	38	35
32	World losing ground	40	49	45
8	Don't know/Refused	8	4	5
(n=1234)		(1248)	(1432)	(720)

QUESTION 5-10 PREVIOUSLY RELEASED.

³ This item called "Obesity" in trends from 5/04 and earlier.

⁴ The *Other* category includes the following responses for trends: "Avian/Bird Flu", "Elderly/Senior citizens care", and "Sexually transmitted diseases".

READ: Now, on another topic...

11. Which of the items on this list would you say are the TWO largest areas of spending by the federal government (READ AND RANDOMIZE 1-5) (PROBE, IF NECESSARY: If you had to choose two items from this list, which would you choose?) (ALLOW UP TO TWO RESPONSES)

Based on Form 2A random quarter sample

<u>3/09</u>		<u>5/04</u>	<u>3/97</u>
54	Defense	51	56
45	Foreign aid	49	64
33	Medicare	25	23
33	Social Security	32	27
17	Food stamps	23	26
4	Don't know/Refused	6	1
(n=625)		(2902)	(1309)

Total exceeds 100% due to multiple responses

12. Just your best guess, what percentage of the federal budget is spent on foreign aid? (OPEN-END, RECORD PERCENTAGE BETWEEN 0 AND 100)

Based on Form 2B random quarter sample (n=609)

<u>3/09</u>	
3	0 to 1 percent
16	2 to 5 percent
9	6 to 10 percent
13	11 to 20 percent
9	21 to 30 percent
4	31 to 40 percent
7	41 to 50 percent
8	More than 50 percent
31	Don't know/Refused

13. Do you think the U.S. is now spending [ROTATE: (too much,)/(too little,)] or about the right amount on foreign aid?

Based on Form 2 random half sample

<u>3/09</u>		<u>5/04</u>	<u>6/02</u>
52	Too much	62	56
19	Too little	10	8
17	About the right amount	18	22
11	Don't know/Refused	11	14
(n=1234)		(1470)	(1402)

(READ TO ALL) Next, thinking about developing countries such as those in Africa, Asia, and Latin America...

14. I'm going to read you some different things the new president and Congress might try to do when it comes to helping developing countries. As I read each one, tell me if you think it should be one of their TOP priorities for helping developing countries, important but not a top priority, or not that important. What about (INSERT ITEMS - RANDOMIZE)? READ IF NECESSARY: Should this be one of their TOP priorities for helping developing countries, important but not a top priority, or not that important?

Based on Form 2 random half sample (n=1,234)

		<u>Top priority</u>	<u>Important but not a top priority</u>	<u>Not that important</u>	<u>Should not be done (vol.)</u>	<u>DK/ Ref.</u>
a. Improving health for people in developing countries	3/09	38	47	12	1	2
b. Reducing poverty	3/09	41	46	11	1	2
c. Promoting democracy	3/09	25	49	19	2	5
d. Promoting the rights of women	3/09	34	51	12	1	3
e. Fighting terrorism and promoting peace	3/09	59	33	7	*	1
f. Protecting the environment and fighting climate change	3/09	37	41	18	1	2
g. Improving education	3/09	55	34	9	1	1

15. Which of these do you think should be the HIGHEST priority for the president and Congress when it comes to helping developing countries? (READ ITEMS RATED TOP PRIORITY IN SAME ORDER)

14/15. Top/Highest Priority Combo Table (includes those who said only one item was "top priority")

Based on Form 2 random half sample (n=1,234)

3/09

29	Fighting terrorism and promoting peace
17	Improving education
10	Reducing poverty
10	Improving health
7	Protecting the environment and fighting climate change
4	Promoting democracy
2	Promoting the rights of women
18	None of these is top or highest priority/Something else (VOL.)
2	Don't know/Refused

16. Do you think the developed nations of the world, such as the U.S., England, France, Italy, Germany, and Japan, are doing ENOUGH or NOT DOING ENOUGH to improve HEALTH for people in developing countries?

Based on Form 2 random half sample (n=1,234)

3/09

- 28 Doing enough
- 57 Not doing enough
- 2 Should not be involved at all (VOL.)
- 14 Don't know/Refused

17. Would you say the following are doing ENOUGH or NOT DOING ENOUGH to improve health for people in developing countries? (First/Next), how about... (INSERT ITEMS – RANDOMIZE; OBSERVE FORM SPLITS)? READ IF NECESSARY: Are they doing enough or not doing enough to improve health for people in developing countries?

Items a, c, e based on Form 2A random quarter sample (n=625)

Items b, d, f based on Form 2B random quarter sample (n=609)

		Doing <u>enough</u>	Not doing <u>enough</u>	(VOL.) Should not be <u>involved</u>	DK/ <u>Ref.</u>
a. The U.S. government	3/09	51	35	3	12
b. The governments of developed nations other than the U.S., such as England, France, Italy, Germany, and Japan	3/09	18	58	*	24
c. The United Nations	3/09	29	56	1	14
d. International nonprofit organizations and foundations	3/09	46	34	*	19
e. Large international businesses and corporations	3/09	17	67	2	14
f. The World Health Organization	3/09	34	41	*	25

18. Do you think the U.S. is now spending [ROTATE: (too much), (too little)], or about the right amount on efforts to improve health for people in developing countries?

Based on Form 2 random half sample (n=1,234)

3/09

- 23 Too much
- 26 Too little
- 39 About the right amount
- 12 Don't know/Refused

19. Which of the following comes closer to your view? Given the serious economic problems facing the country and the world right now... (READ AND ROTATE)

Based on Form 2 random half sample (n=1,234)

3/09

- 71 The U.S. cannot afford to spend more money on improving health for people in developing countries
- 23 It is more important than ever for the U.S. to spend more money on improving health for people in developing countries
- 6 Don't know/Refused

20. In general, do you think more spending from the U.S. and other developed countries will lead to meaningful progress in improving health for people in developing countries, OR that spending more money won't make much difference?

Based on Form 2 random half sample (n=1,234)

3/09

- 40 Will lead to meaningful progress
- 51 Won't make much difference
- 5 Depends (VOL.)
- 4 Don't know/Refused

21. Next, I'm going to read you some different things the U.S. might spend money on to help improve health for people in developing countries. As I read each one, please tell me if you think it should be a top priority, important but not a top priority, or not that important for U.S. spending to improve HEALTH for people in developing countries. What about (INSERT ITEMS - RANDOMIZE; OBSERVE FORM SPLITS)? READ IF NECESSARY: Should this be a top priority, important but not a top priority, or not that important [for U.S. spending to improve health for people in developing countries]?

Items a,c,e,g,i,k based on Form 2A random quarter sample (n=625)

Items b,d,f,h,j based on Form 2B random quarter sample (n=609)

		<u>Top priority</u>	<u>Important but not a top priority</u>	<u>Not that important</u>	<u>(VOL.) Should not be done</u>	<u>DK/ Ref.</u>
a. Preventing and treating HIV/AIDS	3/09	45	44	9	1	2
b. Preventing and treating Tuberculosis	3/09	38	52	7	1	2
c. Preventing and treating Malaria	3/09	39	46	11	1	2
d. Providing access to family planning services	3/09	35	46	17	1	1
e. Improving access to clean water	3/09	61	30	7	1	1
f. Reducing hunger and malnutrition	3/09	60	36	3	1	*
g. Building and improving hospitals and other health care facilities	3/09	40	46	12	1	1
h. Increasing the number of children who get immunized for diseases like polio	3/09	61	32	3	1	3
i. Improving access to prenatal health care for pregnant women	3/09	43	44	10	2	1
j. Efforts to improve training and expand the supply of medical professionals	3/09	48	43	6	2	1
k. Preventing and treating heart disease and other chronic diseases	3/09	28	53	17	1	2

22. Do you think that spending money on improving health for people in developing countries helps, hurts, or has no effect on (INSERT ITEMS – READ IN ORDER)?

Based on Form 2 random half sample (n=1,234)

		<u>Helps</u>	<u>Hurts</u>	<u>Has no effect</u>	<u>DK/Ref.</u>
a. How the U.S. is viewed by people in developing countries who receive this assistance	3/09	62	4	27	7
b. U.S. diplomacy, meaning the relationship of the U.S. government with other governments around the world	3/09	63	4	26	6
c. U.S. national security	3/09	44	7	43	6

23. Next, I'm going to read you some reasons why the U.S. might spend money on improving health for people in developing countries, and I'd like you to tell me which you think is the MOST important reason. Here's the list... (READ AND RANDOMIZE ITEMS). Which of these do you think is the MOST important reason for the U.S. to spend money on improving health for people in developing countries?

Based on Form 2 random half sample (n=1,234)

3/09

- 47 Because it's the right thing to do
- 17 To help the U.S. economy by creating new markets for U.S. businesses
- 11 To help ensure U.S. national security
- 9 To improve the U.S.'s image around the world
- 8 To improve our diplomatic relationships
- 3 Other/None of these (VOL.)
- 4 Don't know/Refused

24. I'm going to read you some different factors that could be used to determine how to spend U.S. dollars on improving health for people in developing countries. For each, please tell me if this should be very important, somewhat important, not too important, or not at all important. What about (INSERT ITEMS - RANDOMIZE)? READ IF NECESSARY: Should this be very important, somewhat important, not too important, or not at all important [in determining how to spend U.S. dollars on improving health for people in developing countries]?

Based on Form 2 random half sample (n=1,234)

		<u>Very important</u>	<u>Somewhat important</u>	<u>Not too important</u>	<u>Not at all important</u>	<u>DK/ Ref.</u>
a. How many people die each year from a given health problem	3/09	60	28	4	4	5
b. How severely a health problem affects quality of life	3/09	55	35	3	4	2
c. Whether a problem mainly affects children	3/09	69	24	2	4	1
d. Whether effective solutions exist for a given problem	3/09	42	40	8	4	6
e. Whether a country is friendly to the U.S.	3/09	36	36	15	10	3
f. Whether it is in the interest of U.S. foreign policy	3/09	25	42	15	12	6
g. The number of lives saved relative to the amount spent	3/09	52	31	7	6	4

25. In the past 5 years, do you think U.S. spending to improve health for people in developing countries has made a big difference, a small difference, or no difference in the lives of individual people in these countries?

Based on Form 2A random quarter sample (n=625)

<u>3/09</u>	
38	Big difference
45	Small difference
10	No difference
8	Don't know/Refused

26. In the past 5 years, do you think U.S. spending to improve health for people in developing countries has made a big difference, a small difference, or no difference in changing the overall course of disease in these countries?

Based on Form 2B random quarter sample (n=609)

3/09

- 30 Big difference
- 49 Small difference
- 15 No difference
- 5 Don't know/Refused

27. Now I will mention some things that may or may not be reasons why it has been difficult to improve health for people in developing countries. For each, please tell me if you think it is a major reason, a minor reason, or not a reason. (First) what about...(INSERT ITEMS, RANDOMIZE)?
 READ IF NECESSARY: Is this a major reason, a minor reason, or not a reason (why it has been difficult to improve health for people in developing countries)?

Based on Form 2 random half sample (n=1,234)

		<u>Major reason</u>	<u>Minor reason</u>	<u>Not a reason</u>	<u>DK/ Ref.</u>
a. Not enough money from the U.S. and other developed countries					
	3/09	35	39	20	7
b. Corruption and misuse of funds					
	3/09	80	12	4	4
c. Lack of infrastructure and resources					
	3/09	63	27	6	3
d. Lack of effective programs					
	3/09	57	31	8	4
e. Lack of political leadership					
	3/09	66	24	8	3
f. Widespread poverty					
	3/09	71	19	6	4

28. You said the following things were major reasons why it has been difficult to improve health for people in developing countries. Which of these do you think is the MOST important reason? (READ ITEMS RATED MAJOR REASONS IN SAME ORDER)

27/28. Major/Most important Reason Combo Table (includes those who said only one item was a "major reason")

Based on Form 2 random half sample (n=1,234)

3/09

- 46 Corruption and misuse of funds
- 13 Widespread poverty
- 11 Lack of political leadership
- 11 Lack of infrastructure and resources
- 8 Not enough money from the U.S. and other developed countries
- 6 Lack of effective programs
- 4 None of these is a major or most important reason (VOL.)
- 2 Don't know/Refused

29. Have you, personally, ever donated money to an organization that works to improve health for people in developing countries, or not?

Based on Form 2 random half sample (n=1,234)

3/09

- 50 Yes
- 46 No
- 4 Don't know/Refused

QUESTION 30-35 PREVIOUSLY RELEASED.

READ: On another topic...

36. During the last year, how much, if anything, have you personally seen, heard, or read about the problem of AIDS (INSERT ITEMS a AND b – ROTATE, ALWAYS READ ITEM "c" LAST)? Have you heard a lot, some, only a little, or nothing at all?

Based on Form 1 random half sample

ITEM A PREVIOUSLY RELEASED.

		<u>A lot</u>	<u>Some</u>	<u>Only a little</u>	<u>Nothing at all</u>	<u>DK/ Ref.</u>	<u>(n)</u>
b. In Africa	3/09	26	29	28	16	*	(1320)
	5/04	51	20	16	12	1	(2902)
c. Elsewhere in the world other than Africa or the U.S.	3/09	7	19	33	39	2	(1320)

READ TO ALL: Next, thinking about the problem of HIV/AIDS in developing countries such as those in Africa, Asia, and Latin America...

37. Do you think that most people in developing countries who need medication for HIV actually get that medication, or do you think that most of them do not get the medication they need?

Based on Form 1A random quarter sample

<u>3/09</u>		<u>4/06</u>
3	Get medication	4
89	Do not get medication	92
8	Don't know/Refused	4
(n=649)		(1269)

38. Do you think that most people at high risk for HIV in developing countries have access to needed prevention services, such as HIV education, testing, and counseling, or not?

Based on Form 1B random quarter sample

<u>3/09</u>		<u>4/06</u>
18	Have access	13
72	Do not have access	81
10	Don't know/Refused	7
(n=671)		(1248)

39. Do you think the U.S. is now spending (READ AND ROTATE ANSWER CATEGORIES 1 & 2, ALWAYS READ 3 LAST) to deal with the HIV/AIDS problem in developing countries?

Based on Form 1 random half sample

<u>3/09</u>		<u>4/06</u>	<u>6/02</u>
16	Too much	13	16
37	Too little	56	31
29	About the right amount	13	34
18	Don't know/Refused	18	20
(n=1320)		(2517)	(720)

40. I'm going to read you two statements and ask whether you agree or disagree with each. Here's the (first/next) one...(INSERT ITEMS - ROTATE) (Do you agree or disagree?)

Based on Form 1 random half sample

		<u>Agree</u>	<u>Disagree</u>	<u>DK/Ref.</u>	(n)
a. The U.S. should address problems at home first rather than spending more money to deal with the HIV/AIDS epidemic in developing countries	3/09	76	19	4	(1320)
	4/06	67	28	6	(2517)
	5/04	71	25	4	(2902)
	6/02	78	18	5	(1402)
b. The United States is a global leader and has a responsibility to spend more money to help fight the HIV/AIDS epidemic in developing countries	3/09	49	46	5	(1320)
	4/06	60	33	7	(2517)
	5/04	53	42	5	(2902)
	6/02	44	51	5	(1402)

41. Which of these two statements do you agree with MORE STRONGLY? (READ AND ROTATE 1-2 IF NECESSARY – READ IN SAME ORDER AS PREVIOUS)

40/41. Combo Table (includes those who agreed with only one statement)

Based on Form 1 random half sample

<u>3/09</u>		<u>4/06</u>	<u>5/04</u>	<u>6/02</u>
69	The U.S. should address problems at home first rather than spending more money on AIDS in developing countries	55	62	71
23	The U.S. is a global leader and has a responsibility to spend more money on AIDS in developing countries	34	30	22
1	Neither/Both equally (VOL.)	3	1	n/a
7	Disagree with both	8	6	3
1	Don't know/Refused	*	*	4
(n=1320)		(2517)	(2902)	(1402)

42. Which one of the following do you think should be the top priority for the U.S. government's financial help to fight AIDS in developing countries? (READ AND RANDOMIZE 1-3)

Based on Form 1 random half sample

<u>3/09</u>		<u>4/06</u>	<u>10/00</u>
59	Spending for prevention and education	54	44
18	Reducing the amount of money these countries owe so they can do more themselves	18	15
15	Spending for treatment and care	21	27
3	Other/None of these (VOL.)	2	12
5	Don't know/Refused	5	2
(n=1320)		(2517)	(2683)

43. In general, do you think that spending more money on HIV/AIDS prevention in developing countries will lead to meaningful progress in slowing the epidemic, OR that spending more money won't make much difference?

Based on Form 1 random half sample

<u>3/09</u>		<u>4/06</u>	<u>5/04</u>
56	Lead to meaningful progress	60	54
36	Won't make much difference	31	38
2	Depends (VOL.)	3	2
6	Don't know/Refused	6	5
(n=1320)		(2517)	(2902)

44. Now I will mention some things that may or may not be reasons why it has been difficult to control the spread of HIV/AIDS in developing countries. For each, please tell me if you think it is a major reason, a minor reason, or not a reason. (First) what about...(INSERT ITEMS - RANDOMIZE)?

READ IF NECESSARY: Is this a major reason, a minor reason, or not a reason (why it has been difficult to control the spread of AIDS in developing countries)?

Based on Form 1 random half sample

		<u>Major reason</u>	<u>Minor reason</u>	<u>Not a reason</u>	<u>DK/ Ref.</u>	(n)
a. Not enough money from the U.S. and other developed countries to fund prevention and treatment programs	3/09	34	41	18	7	(1320)
	4/06	43	34	17	6	(2517)
	6/02	25	46	21	8	(1402)
b. The developing country governments not doing enough themselves to fight AIDS	3/09	78	12	5	5	(1320)
	4/06	75	15	5	5	(2517)
	6/02	74	13	3	10	(1402)
c. Unwillingness of people in developing countries to change their unsafe sexual practices	3/09	79	13	4	5	(1320)
	4/06	74	15	5	5	(2517)
	6/02	82	10	3	5	(1402)
d. Corruption and misuse of funds	3/09	69	20	5	6	(1320)
	4/06	71	15	6	8	(2517)
e. Widespread poverty	3/09	72	18	7	4	(1320)
	4/06	78	12	7	4	(2517)
	6/02	65	23	8	5	(1402)
f. Lack of programs that are effective at preventing the spread of HIV	3/09	66	21	7	6	(1320)

45. You said the following things were major reasons why it has been difficult to control the spread of HIV/AIDS in developing countries. Which of these do you think is the MOST important reason? (READ ITEMS RATED MAJOR REASONS IN SAME ORDER)

44/45. Major/Most Important Reason Combo Table (includes those who said only one item was a "major reason")

Based on Form 1 random half sample (n=1,320)

3/09

- 31 Unwillingness of people to change their unsafe sexual practices
- 17 Widespread poverty
- 17 Corruption and misuse of funds
- 15 Developing country governments not doing enough themselves
- 13 Lack of effective programs
- 3 Not enough money from the U.S. and other developed countries
- 2 None of these is a major or most important reason (VOL.)
- 2 Don't know/Refused

QUESTION 46-53 PREVIOUSLY RELEASED.

READ: Next, just to describe the people taking part in the survey...

- D1. (Interviewer: RECORD RESPONDENT'S SEX)

- 49 Male
- 51 Female

- D2. What is your religion – Protestant, Roman Catholic, Jewish, some other religion, or no religion?

- D3. Do you think of yourself as Christian, or not?

- D4. Do you happen to be a born-again or Evangelical Christian, or not?

- 54 Total Protestant/Christian
 - 26 Evangelical
 - 27 Non-evangelical
- 25 Roman Catholic
- 2 Jewish
- 1 Mormon
- * Orthodox Church
- 3 Other religion
- 14 No religion/Atheist/Agnostic
- 1 Don't know/Refused

- D5. In politics today, do you consider yourself a [ROTATE: Republican, Democrat/Democrat, Republican], an Independent, or what?

- 23 Republican
- 38 Democrat
- 28 Independent
- 7 Or what? (INTERVIEWER: INCLUDE 'OTHER' AND 'NONE' HERE)
- 5 Don't know/Refused

D6. Would you say your views in most political matters are liberal, moderate, or conservative?

- 23 Liberal
- 34 Moderate
- 37 Conservative
- 7 Don't know/Refused

D7. Are you currently married, living with a partner, divorced, separated, widowed, or have you never been married?

- 50 Married
- 7 Living with a partner
- 10 Divorced
- 3 Separated
- 8 Widowed
- 21 Never been married
- 1 Don't know/Refused

D8. What is the LAST grade or class that you COMPLETED in school? (DO NOT READ)

- 4 None, or grade 1-8
- 10 High school incomplete (grades 9-11)
- 34 High school graduate (grade 12 or GED certificate)
- 3 Technical, trade or vocational school AFTER high school
- 23 Some college, no four-year degree (includes associate degree)
- 16 College graduate (B.S., B.A., or other four-year degree)
- 11 Post-graduate or professional schooling after college (e.g., toward a Master's degree or Ph.D; law or medical school)
- * Refused

D9. What is your age? [ENTER AGE] / ASK IF REFUSED:

D9a. Could you please tell me if you are between the ages of (READ)

- 21 18-29
- 37 30-49
- 26 50-64
- 16 65 or older
- * Refused

D10. Are you, yourself, of Hispanic or Latino background, such as Mexican, Puerto Rican, Cuban, or some other Latin American background?

D11. What is your race? Are you white, black, Asian, or some other race? IF R SAYS "HISPANIC" OR "LATINO" ASK: Do you consider yourself a WHITE Hispanic/Latino or a BLACK Hispanic/Latino?

- 71 White, non-Hispanic
- 11 Black, non-Hispanic
- 11 Hispanic
- 4 Asian
- 2 Other/Mixed race (VOL)
- 1 Undesignated

D12. Last year, that is in 2008, what was your total family income from all sources, BEFORE taxes?
Just stop me when I get to the right category. (READ)

- 14 Less than \$20,000
- 14 \$20,000 to under \$30,000
- 12 \$30,000 to under \$40,000
- 9 \$40,000 to under \$50,000
- 15 \$50,000 to under \$75,000
- 10 \$75,000 to under \$100,000
- 13 \$100,000 or more
- 5 Don't know
- 8 Refused

D13. In general, how much attention do you pay to issues related to global health? (READ)

- 22 A lot of attention
- 52 Some attention
- 19 Not much attention
- 6 No attention at all
- 1 Don't know/Refused

D14. Have you ever traveled to a developing country, such as those in Africa, Asia, and Latin America, or not?

- 26 Yes
- 73 No
- * Don't know/Refused

QUESTION D15-D27 PREVIOUSLY RELEASED.

TREND INFORMATION

4/06 trends from Kaiser Family Foundation 2006 *Survey of Americans on HIV/AIDS* conducted 3/24-4/18/2006. N=2,517 national adults, age 18 or older.

5/04 trends from Kaiser Family Foundation 2004 *Survey of Americans on HIV/AIDS* conducted 3/15-5/11/2004. N=2,902 national adults, age 18 and older.

10/03 trends from Kaiser Family Foundation *September/October 2003 Health Poll Report Survey* conducted 10/3-10/5/2003. N=1,206 national adults, age 18 and older.

6/02 trends from Kaiser Family Foundation 2002 *Survey of Americans on HIV/AIDS* conducted 6/13-23/2002. N=1,402 national adults, age 18 and older.

10/00 trends from Kaiser Family Foundation 2000 *Survey of Americans on HIV/AIDS* conducted 8/14-10/26/2000. N=2,683 national adults, age 18 and older.

3/97 trends from Washington Post/Kaiser Family Foundation/Harvard University *Entitlements Survey* conducted 3/13-23/1997. N=1,309 national adults, age 18 or older.



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The Kaiser Family Foundation is a non-profit private operating foundation, based in Menlo Park, California, dedicated to producing and communicating the best possible information, research and analysis on health issues.