



USING SHARED VALUES AND BELIEFS TO ENGAGE CANADIANS: A COMPREHENSIVE REPORT

A COMPREHENSIVE REPORT



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ABOUT US

The Canadian Partnership for Women and Children’s Health (CanWaCH) catalyzes Canadian collaboration among 100 Partners who are improving women’s and children’s health in 1,000 communities worldwide. We do this by capitalizing on the data revolution, connecting experts, and communicating impact to stakeholders.

VISION

The Power of Partnership: Organizations you know, united together and working alongside women and children around the globe for their right to survive and thrive.

MISSION

We connect, collaborate and communicate to strengthen our members’ work in reproductive, maternal, newborn, adolescent and children’s health. In planning, in the field, in sharing expertise, our members know they can do more and do it even better together!

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A close-up photograph of a group of Indigenous children, likely from the Pacific Northwest, smiling warmly at the camera. They are wearing traditional beaded jewelry and patterned clothing. A white geometric line pattern, resembling a network or constellation, is overlaid on the image. The text is positioned in the lower-left area of the image.

**“CANADIANS ARE PART OF A MOVEMENT
THAT WILL ALTER THE COURSE OF THE
21ST CENTURY.”**

DAVID MORLEY

FOREWORD

This past year has been transformational for our network: from new and strengthened domestic and international relationships, to a newly named partnership, now more than ever we are positioned to catalyze collaboration to improve women and children's health worldwide.

Recently, Canada announced its commitment to a new feminist approach to international assistance that seeks to support the economic, political and social empowerment of women and girls. With the introduction of Canada's Feminist International Assistance Policy, it is our belief that understanding how to effectively communicate with Canadians is even more important.

As outlined in our 2015-2016 Annual Report, two of our strategic pillars include capitalizing on the data revolution and communicating impact to stakeholders. With this framework in mind, CanWaCH undertook extensive research that will help us understand Canadian's perspectives on maternal, newborn, child and adolescent health with a vision to empower Canadians to share in our mission.

It is our belief that the research enclosed in this report will provide meaningful data on how to effectively communicate with Canadians. We want to demonstrate our unwavering commitment to championing health and rights for women and children. While Canada's Feminist International Assistance Policy is an important step in the right direction there is more work to be done. Collectively, our 100+ organizations can realize meaningful impact that can lead to improved programming and policy, ensuring accountability to the women and children we support.

I am confident together we can, and will, achieve better results for a world where every woman and child survives and thrives.



Helen Scott
Executive Director

LETTER FROM OUR CHAIR

Canada has a long standing history of commitment to and investment in women and children that spans all political parties and governments.

Day in and day out, our 100+ organizations are fueled by a desire to support women and children's health globally. As I reflect on our work, I wonder how many Canadians know about our efforts, and importantly, how many would be moved to further engage or support if they knew how they could get involved?

While progress has been made there is still much more work to be done. With the recent announcement of Canada's Feminist International Assistance Policy that is aligned with Agenda 2030 and the Paris Agreement, the government is focused on investments, partnerships and advocacy efforts that have the greatest potential to close gender gaps, eliminate barriers to gender equality and help achieve the Sustainable Development Goals (SDGs).

Given the government's emphasis on SDG 5—achieving gender equality and empowering all women and girls—and that Agenda 2030 is now one year into its mandate, our renewed vision to achieve the SDGs means we all must act now: government, civil society organizations, private sector, and importantly every citizen.

Through collective action we are best positioned to engage and activate Canadians to support the promotion of health equity for women, adolescents and children in the world's most fragile places.



David Morley
President and CEO, UNICEF Canada
Chair, Canadian Partnership for Women and Children's Health

EXECUTIVE SUMMARY

Since its inception in 2016, the Canadian Partnership for Women and Children's Health (CanWaCH), formerly known as the Canadian Network for Maternal, Newborn and Child Health, has worked to educate and inform Canadians about the importance of supporting women and children in developing countries.

Our advocacy is showing results.

The "2017 CanWaCH Report"—a major study on Canadians' understanding of and attitudes toward women and children's health—found that 91% of Canadians agree there are strong connections between improving the health of women and children in the developing world and poverty reduction, improvements to the environment and making the world a more peaceful place.

This is a key finding. Our study also reveals that Canadians believe there is a clear need for investment in this area.

Insights from our new report dovetail with the current government's recent announcement of its "feminist" approach to foreign aid, as it also recognizes the importance of international assistance in promoting the well-being of women and children.

Earlier this year, we commissioned this study as a follow-up to our 2015 report, again bringing in the expertise of Ipsos, a globally recognized public opinion research firm, and to help provide insights into how Canadians' views on women and children's health were evolving. We also integrated those learnings with that of B3 (Belief-Based Behaviour) research. Through B3 research we identified the various audiences, and their perceptions and interest in maternal and children's health. By taking this deep look, we can target the best ways to reach Canadians, and choose the best channels to do that.

Our 2017 report re-examines the challenges associated with Canadians' becoming aware of and engaging in these issues. From the benchmarks set from our 2015 report, we looked to review and identify if there were any shifts in priorities of Canadians around investment and funding; the ways in which we could engage Canadians, both on-line and off-line; and we examined if there were any new insights into how we could help our more than 100 partners talk about their work.

While much has been accomplished, there is much more work to be done. While many people in this country are open to the need to support women and children's health in developing countries, our research uncovered several challenges associated with that task.

From the majority of Canadians—64%—not being able to name even one NGO that provides programs or funds to support the issue of women, maternal and children's health to revelations that Canadians maintain a belief that the country should focus on women and children's health within Canada rather than internationally, it is clear that we need to come together as a sector to take immediate action to demonstrate the value of investing in women and children's health and rights.

These are pressing challenges, but not insurmountable ones.

As a sector we must redouble our efforts to ensure our voices are heard, and our organizations are recognized as the leaders in the field of international development as it relates to the issue of women, and maternal and children's health. Moreover, we must recognize that there are enormous opportunities within Canada itself to make our mark. We must not pass by the occasion to join in and help lead the momentum being built by Canadians as they seek to face head-on the issues associated with vulnerable and marginalized communities within Canada.

There is strength in numbers, and we have over 100 organizations in our partnership. Speaking with a consistent message, and in plain language, is key to furthering our success.

Overall, we see a lot of optimism in the findings for 2017. They are prescriptive, pointing to the challenges we face but also providing a clear, exciting road map for the way forward.





BACKGROUND

In 2015, CAN-MNCH undertook extensive research to:

- Understand Canadians' perspectives on maternal, newborn, and child health (MNCH) and fill any gaps in the understanding of the public's emotional state of mind
- Identify opportunities to raise awareness about MNCH
- Seek the underlying trigger towards advocacy

This research involved two streams:

Belief-Based Behaviour (B3):

This research methodology involves analysis of audience behaviour on-line in a natural and unobtrusive way through the observation of more than 4,000 conversations by a team of PhD level anthropologists. This methodology allows researchers to immerse themselves into the lives of target audiences and understand the lens through which they view their world – their beliefs and values, both conscious and unconscious. The results are an understanding of what drives or influences perceptions around a topic. Audience profiles were developed and validated through Ipsos.

Ipsos:

A nationally representative sample of 1,171 Canadians 18 years and older, in English and French. Ipsos identified 4 key target segments that would be most likely to advocate for maternal and child health in the developing world (representing 41% of the general population). In addition, Ipsos conducted a small follow-up qualitative exercise to bring the segment profiles to life: telephone interviews with selected survey respondents identified in each segment.

METHODOLOGY

Following the same methodology used in 2015, Ipsos conducted the survey on-line among panelists. It is important to note that while the survey questions remain the same for comparative purposes, additional language and questions relating to women, instead of "maternal," were included to reflect a global shift in lexicon surrounding women's and children's health with a focus on sexual and reproductive health and adolescent health.

The survey was in field between May 1 and May 8, 2017 (the 2015 study was conducted between June 18 and June 26).

The total sample for the on-line survey was n=1,004 among a nationally representative general population, 18 years and older. The "credibility interval*" for a sample of this size is ± 3.5 percentage points, 95% of the time.

Survey was 12 minutes in length and conducted in both English and French.

The data were weighted to the Canadian population data by age, gender and region.

**The precision of Ipsos on-line surveys is measured using a credibility interval. This is similar to standard confidence limits assigned to traditional phone and other surveys, but has been tailored for on-line surveys.*

B3 METHODOLOGY

Using the previously prepared segmentations, targeted monitoring was conducted to assess current Canadian values as it relates to women, maternal, newborn and child health. The primary objective was to assess a shift in values or beliefs related to the aforementioned topics.

KEY INSIGHTS AND FINDINGS

In terms of global priorities, Canadians rank issues related to women's rights, access to sexual and reproductive health and maternal and child health in the developing world below that of other global issues, including: climate change, global economic stability, poverty and hunger, and even gender equality.

However, 91% of Canadians agree that addressing women and children's health can be a vector (or means) to address climate change, economic stability, and global security, showing a clear need for investment in this area.

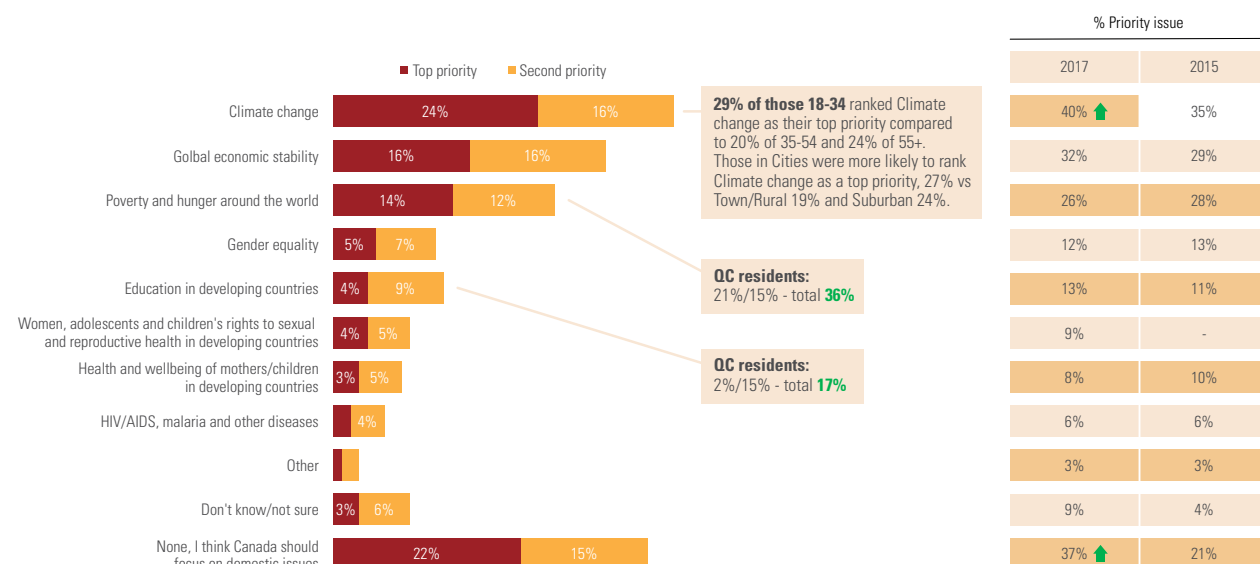
There has been little change in how maternal and child health is perceived in terms of global priorities for Canada. The overall ranking of priority global issues remains the same over the past two years. The ranking of maternal and child health is ranked seventh (out of 8 issues listed) in terms of what respondents viewed should be a priority for the Canadian government,

with 8% saying it is a priority focus. Ranked first is climate change (40%), followed by global economic stability (32%), poverty and hunger around the world (26%), education in developing countries (13%), and gender equality (12%).

This year we also added on the issue of women, adolescents and children's rights to sexual and reproductive health in developing countries to the list. This was ranked sixth in terms of global priorities for Canada. There is little to no difference between how Canadians rank the importance of sexual and reproductive health of women and children in developing countries and the health and well-being of mothers and children as top overseas development aid priorities.

PRIORITY GLOBAL ISSUES

The overall ranking of priority global issues remains the same over the past two years; however, concerns over climate change have increased by 5 percentage points. There is little difference in how Canadians rank the importance of the sexual and reproductive health of women and children in developing countries vs. the health and well-being of mothers and children as top overseas development aid priorities.



Q6. The following are all important global issues. Which two issues do you think the Canadian government should focus its efforts on the most? Base: All respondents (n=1004)

Green and red arrows denote significant difference between the 2017 and 2015 study, at 95% confidence level.



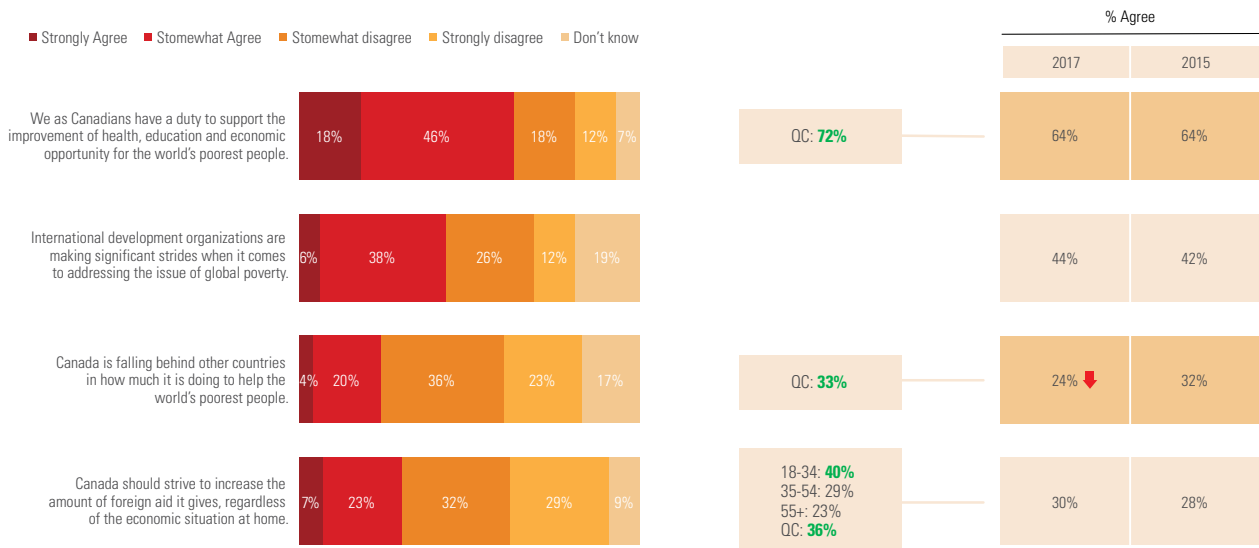
Canadians think Canada is doing better than other countries in supporting overseas development aid.

There is little change in Canadians' attitudes about Canada's role in supporting overseas development aid: two-thirds continue to see it as our country's duty; and, the same proportion as in 2015, 3 in 10, think Canada should strive to increase the amount of foreign aid.

However, more Canadians currently believe Canada is ahead of other countries in how much it is doing in this area. This is not surprising in the context of global current events. While there has been no growth in aid spending in Canada over the past two years, the global context has changed over the past two years with the Syrian refugee crisis, the current government's work in shifting the tone of Canada's international engagement, and US plans for drastic cuts in development assistance (driven by perceptions of Trump).

ATTITUDES ABOUT INTERNATIONAL DEVELOPMENT

There is little change in Canadians' attitudes about Canada's role in supporting overseas development aid: two-thirds continue to see it as our country's duty; and, the same proportion, 3 in 10, think Canada should strive to increase the amount of foreign aid. However, fewer currently (down 8 percentage points) believe that Canada is falling behind other countries in how much it is doing in this area.



Q7. To what extent do you agree or disagree with each of the following statements?
Base: All respondents (n=1004)

↑ Green and red arrows denote significant difference between the 2017 and 2015 study, at 95% confidence level.



KEY INSIGHTS AND FINDINGS

Engagement in social issues, global foreign aid priorities, and engagement in issues of maternal and child health.

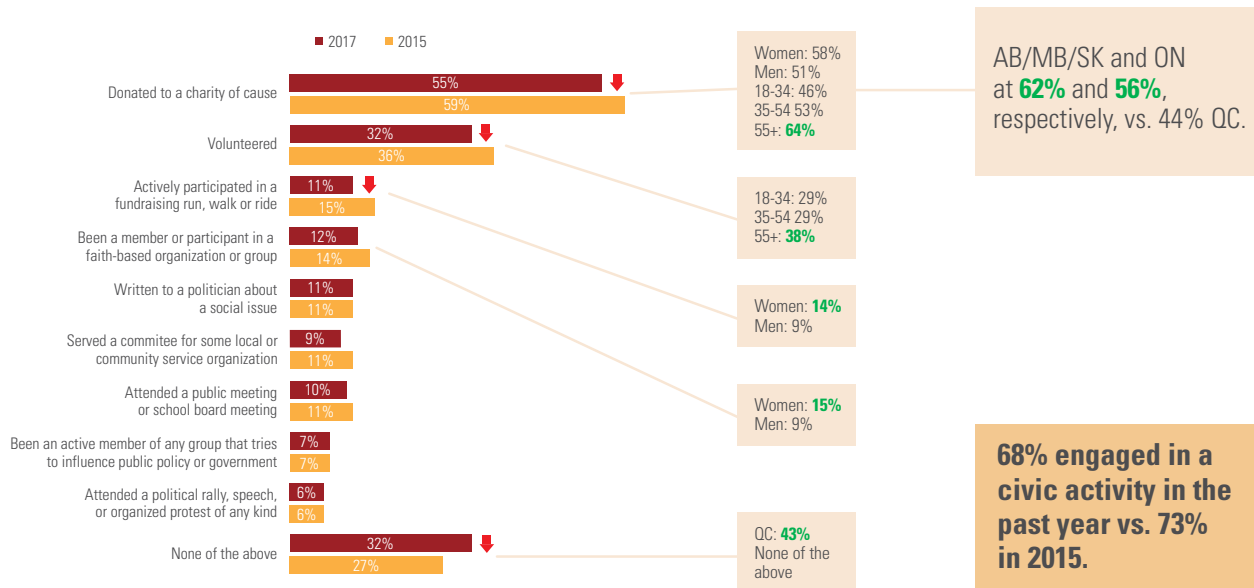
Overall, there has been an increase in levels of engagement with social issues over the past two years, particularly through social media platforms.

The overall ranking of priority global issues remains the same over the past two years; however, concerns over climate change have increased by 5 percentage points (particularly among the younger generation). There is little difference between how Canadians rank the importance of sexual and reproductive health of women and children in developing countries and the health and well-being of mothers and children as top overseas development aid priorities.

Interestingly, overall civic engagement has decreased among Canadians (68% who engaged in at least one activity, down from 73% in 2015), particularly in donating, volunteering, and participating in a fundraising activity. But engagement in issues relating to maternal and child health in the developing world has remained the same since 2015: 54% engaged in an activity in support of maternal and child health in the past year. The good news is that this is an issue that has not diminished in the minds of Canadians.

CIVIC ENGAGEMENT IN THE PAST YEAR

Interestingly, overall civic engagement has decreased among Canadians (68% who engaged in at least one activity, down from 73% in 2015), particularly in donating, volunteering, and participating in a fundraising activity.



Q5. Have you done any of the following activities within the past year? Check all that apply. Base: All respondents (n=1004)

Green and red arrows denote significant difference between the 2017 and 2015 study, at 95% confidence level.



Interestingly, when respondents were provided with more information about issues related to women's health inequality, overall interest and engagement in issues related to women, maternal and child health increased significantly.

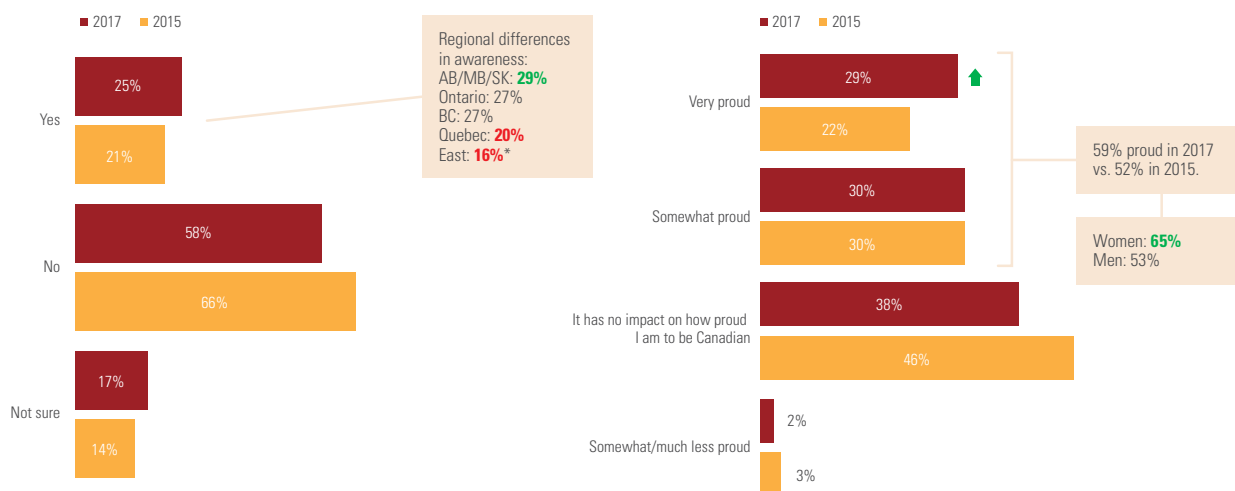
One quarter of Canadians (up 4 percentage points) say they are aware that improving the health of women and children is Canada's top international development priority, and that Canada spearheaded summits in 2010 and 2014 on maternal, newborn and child health.

In addition, armed with more knowledge about the global issue, 6 in 10 Canadians say they feel a sense of pride in Canada's role, significantly higher than two years ago (59% vs. 52% in 2015). In follow-up questions, Canadians also express significantly greater interest in learning more about Canada's role and about the root cause of global inequality as it relates to the well-being of women and children than in 2015.

AWARENESS OF CANADA'S ROLE AND IMPACT ON CANADIAN PRIDE

Awareness of Canada's leadership role in improving the health of women, mothers and children in the developing world has increased since 2015. Armed with this knowledge, 6 in 10 Canadians feel a sense of pride in this, significantly higher than two years ago.

Improving the health of women, mothers and children in the world's poorest countries is Canada's top international development priority. Canada has taken a global leadership role in ensuring that women, maternal and child health remains a priority on the global international development agenda. Canada spearheaded summits in 2010 and 2014 on maternal, newborn and child health.



Q9. Before this survey, were you aware of this? Base: All respondents (n=1004)
 Q10. Does knowing this make you feel proud to be Canadian? Base: All respondents (n=1004)

Green and red arrows denote significant difference between the 2017 and 2015 study, at 95% confidence level.



CANADIANS: SOCIAL MEDIA AND NEWS CONSUMPTION HABITS

In 2017, we saw an increase in social media usage among Canadians.

Overall, levels of engagement with social issues over the past two years has remained relatively similar; however, there has been a significant increase in engagement via social media platforms – 77% have read what others have posted on-line (vs. 72% in 2015), and 47% have commented on a story on social media (vs. 41% in 2015).

Higher levels of engagement with social issues through social media platforms is not surprising, as the incidence of Canadians using social media has increased significantly since 2015 (up by 14 percentage points). That said, this increase in social media usage is characterized by relatively passive engagement (reading and ‘liking’ items, and following posts only).

SOCIAL MEDIA IS A PRIMARY CHANNEL FOR NEWS CONSUMPTION FOR MANY CANADIANS.

In this year’s survey, we asked about social media and news consumption.

While social media users are most interested in following updates about friends (57%) and humour (50%), they are also interested in following the news on social media platforms – local (55%), national (48%) and international (47%).

TV (49% access daily) and radio (43%) still lead as the core media channels for news consumption, but social media news feeds follow very closely in reaching news consumers (43%), particularly among youth (18-34 years old) – at 54%.

In fact, over one-third of on-line news consumers (35%) say they mostly come across news first through social media news feeds – this is much higher among women (39%) and among 18-34 years olds (51%). Slightly fewer Canadians (32%) go directly to news organization websites, while 20% access the news first through news aggregation sites.

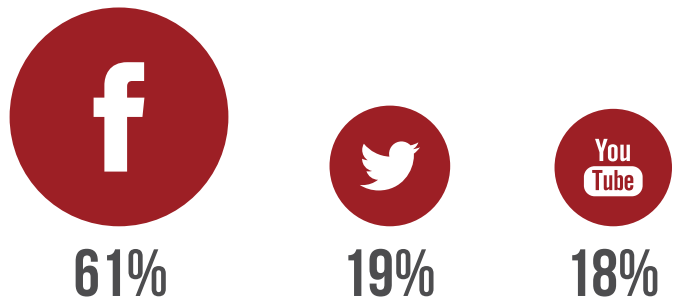
Across social media platforms, Facebook leads by a large margin, with 61% of the general population getting news or news headlines from the platform. Twitter and YouTube come in second with 19% and 18% of Canadians, respectively, getting their news on these sites. All others show a reach of 10 percent or less.

Awareness of NGOs that provide programs or raise funds to support the issue of women, maternal and children’s health is currently low.

UNICEF (14%) and Red Cross (11%) were the most frequently mentioned organizations, top-of-mind, that would provide programs and raise funds to support women, maternal and children’s health in the developing world. This is followed by World Vision (6%), Doctors Without Borders, and Oxfam (5% each).

This is a key insight and one that was surprising. It indicates that there is a substantial need to improve the general awareness of NGOs to Canadians. It is clear that we need to be our own cheerleaders and speak more directly to the work that is being accomplished in a way that will resonate with Canadians, the media, government and other key stakeholders.

IMPORTANTLY, 64% OF CANADIANS COULD NOT NAME ANY ONE ORGANIZATION THAT WORKS IN OUR SECTOR.



SOURCES FOR NEWS AND HEADLINES FOR 61% OF CANADIANS.

CANADIANS' BELIEF SEGMENTATIONS

Updated B3 research shows that the primary segmentations are still valid, but passion for particular issues have become more pronounced.

KEY FINDINGS

NGOs, scholars, policy analysts, and politicians post about MNCH more than people who do not have a professional stake in the issue.

THE PARTICULAR LANGUAGE (SEARCH TERMS) USED TO DISCUSS MATERNAL AND CHILD HEALTH DISCOURAGES DIALOGUE BETWEEN PROFESSIONALS AND NON-PROFESSIONAL STAKEHOLDERS.

- Professional terms: MNCH, postnatal care, prenatal care, development, SDGs (sustainable development goals)
- Non-professional terms: abortion, public funding, family planning

Whether pro or con, arguments are based in either moral or fiscal rationales. In some cases, both themes are invoked.

The level of support in 2017 must be understood in the context of the rise of American nativism and protectionism. The current US administration rise has had a direct effect on certain segments of the Canadian population who aspire to 'Make Canada Great Again.' This is an homage to 'Make America Great Again' by Canadians who aspire to keep their taxes in Canada.

Debate flash points that spark conversation stem from media reports of new government funding initiatives for child and maternal health.

- A recent flash point in the debate is the news from January, 2017 that the Canadian federal government is pledging additional funding to fill the gap left by US administration reinstating the Global Gag rule which cuts funding to organizations that provides, mentions or supports abortion
- Another flash point is that the Canadian government will give \$650 million for international reproductive health and rights

Social media platforms are not equal.

In terms of audience reach, Facebook is at 400 million while Twitter is at 75 million. Moreover, time spent on both sites indicate that Facebook users spend much more time engaging on Facebook than on Twitter. Facebook allows for rich conversations that stem from news articles, whereas Twitter conversations require a maximum of 140 character thereby restricting flow of debate and opinion.

MOST OF THE PARTICIPANTS ON TWITTER ARE INSIDERS, SUCH AS NGO LEADERS, POLITICIANS, AND POLICY ADVISORS. VERY LITTLE ENGAGEMENT FROM THE PUBLIC IS EVIDENT WITH OFFICIAL CHANNELS OF POLICY MAKERS (@CANADADEV, @MCLAUDEBIBEAU).



CANADIANS' BELIEF SEGMENTATIONS

THE SOCIALLY CONSCIOUS ADVOCATE

“WE ARE A DEVELOPED COUNTRY AND WE CAN HELP OTHERS.”

SOCIALLY CONSCIOUS ADVOCATES RECOGNIZE THE VALUE OF MATERNAL AND CHILD HEALTH.

- 96% are interested in issues of maternal and child health
- In a subset with a slightly higher proportion of women:
 - 85% agreed that breastfeeding is best for their child
 - 80% strongly agreed that children should be vaccinated against infectious diseases

While Canadians in general see poverty as a more pressing issue than maternal and child health (top 3 issues were climate change 35%; economic stability 29%; poverty 28%), socially conscious advocates recognize that addressing issues of maternal and child health could directly reduce global poverty and inequality (78%+ agree). **However, a majority believe that the government should focus on maternal and children's health initiatives within Canada's own marginalized communities instead of on international efforts (68%).**

PROFILE

These advocates are confident and outgoing (95% agree). They consider themselves leaders (87%), but not rule-breakers (94% would follow rules). A majority feel that they've sacrificed many things to succeed (78%).

In general, they are optimistic about change. They believe that a better world is possible (97% totally agree). A substantial proportion believe that the world's problems can be solved in their lifetime (37%), with 47% of one subgroup believing this to be possible.

They strive to be accepted and respected by their peers, but may differ in how they want to achieve this outcome:

- 40% would keep opinions about social and political issues to themselves, while 60% are very outspoken about such opinions
- 41% prefer to fit in, but 40% preferred to stand out

HOW TO REACH THEM

THESE ADVOCATES ARE VERY ACTIVE ON SOCIAL MEDIA (77%). FACEBOOK (83%) AND TWITTER (37%) ARE PLATFORMS OF CHOICE. GOOGLE+ (16%), PINTEREST (14%), AND SNAPCHAT (10%) ARE SECONDARY PLATFORMS TO CONSIDER.

On social networking sites, they look for news/current events (68%); health and wellness information (45%); humour (31%); and information about social issues (32%). A notable subgroup also subscribe to hard copies of magazines (23%) and newspapers (31%).

DEMOGRAPHIC



22%
of Canadians



48%
men



52%
women



33%
are parents



44%
are between
18 and 34



46%
live in
city centres



47%
hold a bachelor's
degree or above



16%
hold graduate
degree



\$82K
average house-
hold income

A close-up photograph of a woman with dark hair, smiling warmly at the camera. She is wearing a red turtleneck sweater and a grey cardigan. A vibrant, multi-colored striped cloth is wrapped around her waist and shoulders, serving as a sling for a young child. The child, with dark hair and rosy cheeks, is looking down and slightly to the side. The background is a warm, textured wall. Overlaid on the image is a faint, white geometric pattern of interconnected lines forming a network.

CANADIANS' BELIEF SEGMENTATIONS

THE OPTIMISTIC SUPPORTER

**"CHILDREN ARE THE FUTURE AND MOTHERS NEED TO HAVE
THE MOST HELP SO THEY CAN PROVIDE FOR THEIR CHILDREN."**

LIKE SOCIALLY CONSCIOUS ADVOCATES, OPTIMISTIC SUPPORTERS ALSO RECOGNIZE THE VALUE OF MATERNAL AND CHILD HEALTH.

- 87% are interested in the issue of maternal and child health
- 62% agree that the federal government should focus on maternal/child health initiatives within Canada's own poor communities instead of on international efforts
- 58% have read or watched a news story on maternal/child health issues in developing countries; 39% have discussed such issues with friends and family

These supporters believe that it is Canada's duty to support the improvement of opportunities for the world's poorest people (88%, 25% strongly agree). **A vast majority believe that poor governments are currently not doing enough about maternal and child health (79%),** and agree that addressing issues of maternal and child health could directly reduce global poverty and inequality (90% agree).

PROFILE

These supporters are confident and outgoing (87% agree). They consider themselves leaders (82%), but not rule-breakers (91% would follow rules).

In general, they are optimistic about change. They believe that a better world is possible (100% agree). However, 2 out of 3 believe that the world's problems cannot be solved in their lifetime (66%).

They like to be heard and respected:

- 80% are outspoken about opinions on social and political issues
- 74% prefer to stand out rather than fit in

HOW TO REACH THEM

These supporters are very active on social media. 81% access social networking sites several times a day or at least once a day. Facebook (84%) and Twitter (32%) are platforms of choice. 14% also visit blogs at least once a month.

On social networking sites, they look for updates about friends, news/current events, humour, information about social issues, and health/wellness information.

DEMOGRAPHIC



8%

of Canadians



51%

men



49%

women



36%

are parents



39%

live in
the suburbs



30%

live in
city centres



45%

are between
35 and 54



39%

are from Quebec



42%

hold a bachelor's
degree or above



\$78K

average house-
hold income



CANADIANS' BELIEF SEGMENTATIONS

THE CONSCIENTIOUS PRAGMATIST

"I WANTED TO DO WORLD VISION, BUT I DID
SOMETHING CLOSER TO HOME INSTEAD."

CONSCIENTIOUS PRAGMATISTS BELIEVE THAT MATERNAL AND CHILDREN'S HEALTH IS A WORTHY CAUSE TO SUPPORT, BUT FEEL THAT THEY CAN ONLY DO SO MUCH TO HELP.

- 77% are interested in the issue of maternal and children's health
- 58% think more highly of the federal government for having led maternal and children's health initiatives
- In a subgroup, a majority (75%) was not aware of Canada's leadership role in prioritizing international improvement of maternal and children's health before the survey, but it made them proud to be Canadian

These pragmatists feel that Canada has a duty to support the improvement of health, education, and economic opportunity for the world's poorest people (70%). In general, they also believe that addressing the issue of maternal and child health directly could reduce global poverty and inequality. However, a majority (62%) agree that the federal government should focus on maternal and children's health initiatives within Canada's own poor communities instead of internationally.

PROFILE

These pragmatists are not very confident and outgoing (63%). Few would consider themselves leaders (26% think they are leaders).

In general, they are optimistic about change. They believe that a better world is possible (94% agree). However, a vast majority believe that the world's problems cannot be solved in their lifetime (70%).

They try to avoid offending people whenever possible:

- 71% prefer to keep their opinions about social and political issues to themselves
- 75% prefer to fit in rather than stand out

HOW TO REACH THEM

These pragmatists frequently access social networking sites (74%). However, a core proportion is not active (38%) and only read what others post. Facebook (80%) and Twitter (21%) are platforms of choice. In one subgroup, 35% report that they regularly watch videos on-line or access video-sharing sites (e.g., YouTube).

On social networking sites, they look for news and current events, humour, information about social issues, health/wellness information, or inspiration.

DEMOGRAPHIC



28%
of Canadians



42%
men



58%
women



31%
are parents



38%
are 55+



38%
hold a bachelor's
degree or above



>14%
live in
rural towns



>15%
live in
the suburbs



>12%
live in
city centres



\$75K
average house-
hold income



>49%
are either retired
or not employed
full-time



CANADIANS' BELIEF SEGMENTATIONS

THE “CANADA FIRST” POPULIST

“I SEE SO MUCH NEED LOCALLY.
CHARITY BEGINS AT HOME.”

THIS IS A DIVERSE GROUP OF INDIVIDUALS UNITED BY THE BELIEF THAT CANADA SHOULD FOCUS ITS EFFORTS DOMESTICALLY, RATHER THAN ABROAD.

They are relatively uninterested in issues on maternal and children's health.

- Only 30% are interested in issues on maternal and children's health
- 51% think that Canada does not have a duty to support the world's poorest people
- 72% believe that the Canadian government should focus on maternal and child health initiatives in our own poor communities instead of on international efforts
- >32% think that Canada should stop 'interfering' in the affairs of other countries

PROFILE

These populists are a diverse group in terms of behavioural patterns. While >46% are confident and outgoing, 34% are more introverted. >32% consider themselves leaders, but >36% do not.

In general, they are relatively more pessimistic about change. Fewer believe that a better world is possible relative to other groups (83%). Most believe that the world's problems cannot be solved in their lifetime (76%).

>40% have no problem standing out in a group, while >32% would make efforts to fit in.

HOW TO REACH THEM

These populists frequently access social networking sites (70%). However, a notable proportion is not active (43%) and only read what others post. Facebook (72%) is the platform of choice. In one subgroup, 19% also report that they regularly watch TV on-line, and access video-sharing sites.

On social networking sites, they look for friend updates, news/current events, humour, and information on social issues.

DEMOGRAPHIC



41%

of Canadians



53%

men



47%

women



37%

are parents



>23%

are 55+



32%

hold a bachelor's degree or above



>14%

live in rural towns



>15%

live in the suburbs



\$81K

average household income

CANADIANS' BELIEF SEGMENTATIONS

THE CYNICS



CYNICS ARE PASSIONATE ABOUT ISSUES ABOUT POLITICS AND SOCIAL EQUALITY.

However, as the name suggests, cynics are pessimistic about international aid projects. They consider such initiatives to carry overtones of colonialism or even racist attitudes about Western superiority.

They have a high interest in maternal and child health, and healthcare in general but this is deeply rooted in their interest in policies and political issues first and foremost. They believe strongly that the Western world has done more damage than good when attempting to help the developing world achieve a western standard of living. For some in this group, international aid work is viewed negatively and as a way for western governments to influence the development of other countries for the wrong reasons. Even in situations where intentions are positive, cultural missteps and the unintended consequences of development work are often seen as more harmful than helpful. As such, cynics believe the government should not invest abroad, and should focus resources at home.

DEMOGRAPHIC

This group did not appear widely in the national IPSOS survey, but was a considerable segment represented in the digital ethnographic research (B3). Two factors contribute to this discrepancy.

First, this group is often aware their opinions are not widely supported and will temper their opinions when engaging in surveys or focus groups. Secondly, the Internet provides a powerful opportunity for them to find like-minded individuals who support their beliefs and also a platform to share unpopular opinions anonymously or at least one step removed from more direct interactions.

For this reason they comprise a high percentage of on-line conversation but not necessarily a high percentage of on-line influence; however, they are an important group to understand. They are often highly educated, vocal, and can organize effective on-line opposition.

PROFILE

These cynics can be thought of as activists. They strongly believe in speaking out about their values and morals. They are known to share posts about controversial topics, and are not afraid to argue on-line.

They prefer critical or negative messaging to positive messaging.

HOW TO REACH THEM

Facebook, Twitter, Forums/blogs, YouTube.

ACTIONABLE INSIGHTS

Overall, while there has been progress made, the 2017 CanWaCH report finds that Canadians take maternal, newborn, child and adolescent health for granted and worry about issues that impact them more directly. Moreover, they believe that the government should focus on women and children's health initiatives within Canada's poor communities instead of on international efforts (68%).

Today's conversations about aid focus on health outcomes in developing nations and occasional elements of national pride. The findings indicate that Canadians don't immediately realize that solving issues related to women, newborn and children's health address the root cause of many other issues. It causes a chain reaction whose positive impact is almost inconceivable.

That being said, when asked about the root causes of poverty, inequality, security, and climate change, Canadians see a strong connection to maternal and children's health.

**WE MUST REMIND CANADIANS OF THIS CONNECTION;
IT IS WHY THIS FIGHT MATTERS. IT MAKES IT
A REAL AND TANGIBLE OBJECTIVE THAT 91%
OF CANADIANS WOULD SUPPORT.**

RECOMMENDATION #1:

Tell Canadians in one voice why development abroad is more than the right thing to do, it matters here at home just as much.

Educating Canadians about the full value of international development may not be realistic, but small changes in narrative can have a broad impact on support for investments abroad. To do so we need to make the "so what" tangible for Canadians. This will enhance and continue support amongst Canadians and therefore governments at all levels and regions, we must connect CanWaCH's mission back to the most pressing concerns for Canadians.

How? When reminded that addressing women and children's health issues is a foundational contributor to global security, economic inequality, and environmental degradation, 91% of Canadians agree we must address the root causes to see long-term improvement. Everyday, CanWaCH partners are working on that foundation – but we must do a better job connecting with Canadians based on values and not simply facts.

As a network of over 100 Canadian organizations we have a powerful and credible voice. To maximize our potential impact we must agree to common messages and priorities that will connect with Canadians in real and tangible ways. Through collective elevation of our mission as a group we can measurably increase the volume of the conversation about aid and its benefits to Canadians.





RECOMMENDATION #2:

Speak and appeal to Canadian values and desire for a better world.

Canadians expressed strong interest in learning more about Canada's role abroad when they learned we are leaders in the areas of women and children's health. We must make it easier for Canadians to engage in conversations and stories about that work. Today, we speak about goals or objectives, success rates and health sciences. These are difficult conversations for the average Canadian to engage with and will cause them to turn away.

Support could be increased amongst engaged Canadians by making our stories understandable. Many organizations are doing great work in this area, so we should continue to encourage and support each other to do more. International development work and healthcare outcomes are often complex and technical conversations are made even more complex by how we measure success. If topics are difficult for an average consumer of that information to understand, they are less likely to engage.

Speaking to Canadians about their shared values and beliefs is an easy way to begin a dialogue with groups that have an interest in learning more but are intimidated by the narrative around development goals. Relationships will form by addressing shared values and belief systems, before building awareness of other goals.

Before any of this work can move forward, we must address the fact that particular language (internet search terms) used to discuss maternal and children's health currently discourages dialogue between professional and non-professional stakeholders. In order to change this perception, as leaders in women, children's, and adolescent's health, we need to communicate in a way that will connect with Canadians. Consistent language and terminology is essential to ensure our collective communications will resonate with Canadians.

RECOMMENDATION #3:

Create a national framework for all partner organizations to use when engaging Canadians.

Canadians believe Canada is doing better than other countries in supporting issues related to women and children's health abroad. Over the last year, government announcements highlighting Canadian investments made globally have drawn significant media and public attention. While we are all pleased to see issues related to women and children's health up front and centre in Canadian news cycles—there is an opportunity to leverage this attention and expand the narrative to include challenges, such as, the lack of much needed new funding.

Collectively we can develop a cohesive language, mission statements, and goals to include in our individual communications with Canadians ensuring our messaging breaks through the clutter that exists in a world.

RECOMMENDATION #4:

Acknowledge the realities faced by indigenous women and children within Canada and find ways to support these communities. Given this is a timely and important initiative for the federal government and Canadians, it provides new opportunities for us to take leadership in this area, share our key learnings from the success we have had in developing countries and help move this issue forward in the public with Canadians.

We should not ignore that Canadians are rightfully concerned with our own marginalized communities. Sadly, indigenous communities face significant health disparities when compared to non-Indigenous Canadians. While our report does not specifically address indigenous communities, the reality is Indigenous children in Canada, for example, are more than twice as likely to live in poverty than non-Aboriginal kids (according to the Canadian Centre for Policy Alternatives).

RECOMMENDATION #5:

Leveraging national pride effectively.

When they learn about the work of Canadian aid organizations, Canadians are rightly proud of our nation. In a country always hungering for a sense of national pride and identity, this opportunity should not be overlooked.

As the United States steps back from its role as world leader a vacuum is naturally created. Together, we have the scale of influence required to ensure that Canadians view our role on the global stage as having a positive impact, and we can take pride as a nation for our role in creating a better world abroad and at home.

Our goal is one and the same; by working together we will build national support for today, tomorrow and for years to come.

HOW CAN WE ACCESS CANADIANS?

One of the most interesting insights uncovered was that 64% of Canadians could not name any one NGO in our sector. Given this understanding, each organization could benefit from an awareness program targeting Canadians that would deliver key messages with direct calls to action.

It is important to note that advocates are very active on social media (77%) and that social media is a primary channel for news consumption for Canadians. What that means is that any program built will need to involve social media in order to effectively communicate messages.

Moreover, Facebook (83%) is by far the channel of choice for Canadians, followed by Twitter (37%). Google+ (16%), Pinterest (14%), and Snapchat (10%).

RECOMMENDATION #6:

Engage the right communication channel to deliver our messages to the right audience. When communicating with government and direct stakeholders, Twitter is an effective tool. However, when attempting to reach the general population, Facebook and Youtube are superior channels. In addition, new tactics should continue to be explored to create new channels of communication. For example, Snapchat and Pinterest create interesting communication opportunities that should not be overlooked when creating a strategy to engage a specific audience.





CONCLUSION

From the introduction of the federal government's new feminist approach to international assistance that places renewed attention on issues that affect women and children's health, to our new members and partnerships, we are better positioned today to come together and create real positive change.

The information gathered in this follow-up study sets out specific actions that we can take immediately. From providing key insights into how we can more effectively engage Canadians on the topic of women and children's health to identifying specific communication channels to reach Canadians with our message, this report informs how we can move forward.

Thus, one determinant of success will depend upon our willingness to collaborate. As we each seek to champion women and children's health in our own ways, it is in the coming together of our approach that will help us all achieve better results for a world where every woman and child survives and thrives.

“THE CANADIAN NETWORK FOR MATERNAL, NEWBORN AND CHILD HEALTH PROVIDES LESSONS FOR HOW CONNECTIVITY AND CAPACITY CAN BE BUILT ACROSS RESEARCHERS, PRACTITIONERS, POLICY-MAKERS AND THE PRIVATE SECTOR. IT EXEMPLIFIES HOW PAN-CANADIAN APPROACHES CAN MAXIMIZE IMPACT AND BOLSTER GLOBAL LEADERSHIP.”

Policy Options, September 2016

Since 2010, the Canadian Partnership, led by an esteemed Board of Directors, as well as three peer-nominated Working Groups have focused on the core pillars of Knowledge Exchange, Measuring Results and Stakeholder Engagement. CanWaCH has seen significant accomplishments, including a steady growth in Partners, the establishment of a Metrics Portal to track impact globally, landmark funding announcements including \$3.5 billion from Canada for MNCH from 2015-2020 and involvement in global events including the United Nations General Assembly.

CanWaCH Partners are working together every day to end all preventable deaths of women, newborn and children around the world.

CanWaCH
Canadian Partnership for
Women and Children's Health



CanSFE
Partenariat canadien pour
la santé des femmes et des enfants

N|A|T|I|O|N|A|L