

NATIONAL POLL REPORT ▪ JULY 2026

Americans and Global Childhood Immunization Programs

Findings from a July 2026 National Poll on Global Childhood Immunization, Malaria Control, and Global Health Programs

Conducted by Fraym in partnership with the Kyle House Group ▪ Released [MONTH DAY], 2026 ▪ fraym.io
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Executive Summary

78%

Support Global Childhood Immunization Funding (Baseline)

75%

Support Global Malaria Control Funding

50% to 28%

Prefer Multilateral, Matched-Funding Delivery

56%

Less Likely to Back a Member Who Cut Funding Before an Outbreak

A supermajority of Americans support maintaining or increasing U.S. funding for global childhood immunization programs, and that support edges higher once they learn factual information about what the programs cost and how many lives they save. Their motivations for supporting these programs, including outbreak prevention, moral responsibility, and global stability, are cited across the political spectrum. Americans' most common concern is potential waste or corruption in aid delivery (33%). Half of Americans (50%) prefer multilateral alliance funding models over direct U.S. bilateral models for delivering global childhood immunization programs, a near 2:1 preference that holds across political parties.

A majority or plurality say they would penalize a generic congressional candidate who voted to cut this funding (43-56% depending on framing). In a split-sample ballot experiment, the generic national congressional ballot shifts a net 9 points against a Republican who eliminates this funding and a net 16 points against a Democrat.

MAHA supporters and MAGA Republicans support these global childhood immunization programs at 77% and 70%, respectively, rising to 81% and 75% once given factual information.

The same patterns hold for broader global health assistance and global malaria eradication and control programs. The report focuses primarily on global childhood immunization programs, with malaria and broader global health program findings discussed wherever their results differ.

Takeaway #1: A Supermajority of Americans Spanning Every Sub-Group Support Maintaining or Increasing Funding for Global Immunizations.

A supermajority of Americans (78%) say the U.S. government should maintain or increase spending on global childhood immunization programs at the baseline ask (before hearing any facts about the programs). Nearly half (46%) want spending increased outright, and another 31% want it maintained at current levels. Only 16% favor decreasing the funding, and 6% are unsure.

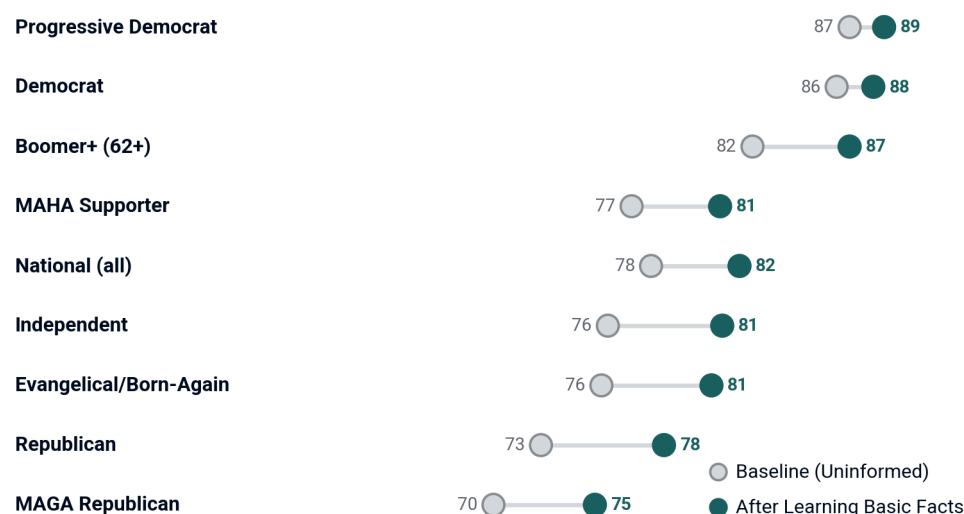
That supermajority holds across every group examined. Baseline support for maintaining or increasing funding stands at 70% among **MAGA Republicans**, 73% among **Republicans** overall, 76% among **Evangelical/Born-Again**

respondents and **Independents**, 77% among **MAHA supporters**, 86% among **Democrats**, and 87% among **Progressive Democrats**. No demographic or political segment in the survey falls below seven-in-ten.

Learning factual information pushes these already-high figures somewhat higher. Once respondents learn that the global immunization programs consume 0.2% of the federal budget (roughly \$550 million annually) and have helped vaccinate hundreds of millions of children and save over 21 million lives since 2000, support rises to 82% nationally.¹ Meanwhile, opposition to these programs (support for decreasing funding) falls from 16% to 13% nationally. The uplift is relatively modest in absolute terms, largely reflecting how high baseline support already is. By group, the uplift is +5 pp among **MAGA Republicans**, +6 pp among **Republicans** overall, +5 pp among **Evangelical/Born-Again** respondents, and +5 pp among **Independents**.

Maintaining or Increasing Funding Draws Supermajority Support in Every Group

Share who say the U.S. should maintain or increase spending on global childhood immunization programs (%)



Source: Fraym national poll of 16,131 U.S. adults, June 26-July 22, 2026. Conducted by Fraym in partnership with the Kyle House Group.

The same pattern holds for the two related program areas. Broader global health assistance moves from 67% to 81% maintain-or-increase support (the largest information-induced shift of the three at +14 pp).² Global malaria control programs move from 75% to 79% (+4 pp).³

Takeaway #2: Americans Want to Support Global Childhood Immunizations for a Mix of Moral and Pragmatic Reasons.

When asked to choose the single main reason the U.S. should support global childhood immunization programs, Americans most often select preventing disease outbreaks that could spread to the U.S. (33%), followed closely by moral duty (29%), economic benefits (16%), and global stability (14%). But the ranking of these motivations differs by political affiliation.

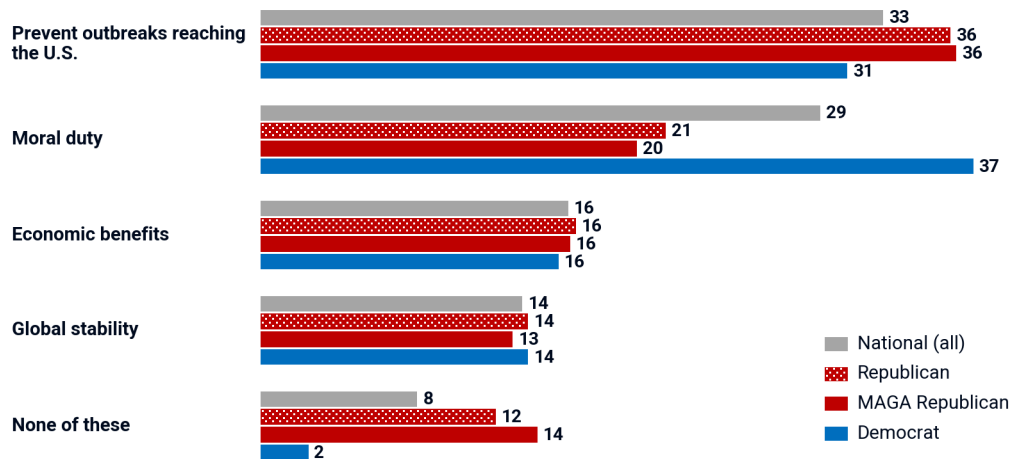
Outbreak-prevention leads among Republicans and MAGA Republicans. Among Republicans, outbreak-prevention leads at 36%, well ahead of moral duty at 21%. Among MAGA Republicans, outbreak-prevention leads at 36%, followed by moral duty at 20% and “none of these” at 14%.

Moral duty leads among Democrats and Progressive Democrats. Moral duty is cited by 37% of Democrats and 38% of Progressive Democrats, with outbreak-prevention second (31% and 29% respectively).

MAHA supporters track the national profile with outbreak-prevention leading (34%).

Outbreak Prevention Is the Most Common Main Reason for Support

Main reason the U.S. should support global childhood immunization programs, by group (%)



Source: Fraym national poll of 16,131 U.S. adults, June 26-July 22, 2026. Conducted by Fraym in partnership with the Kyle House Group.

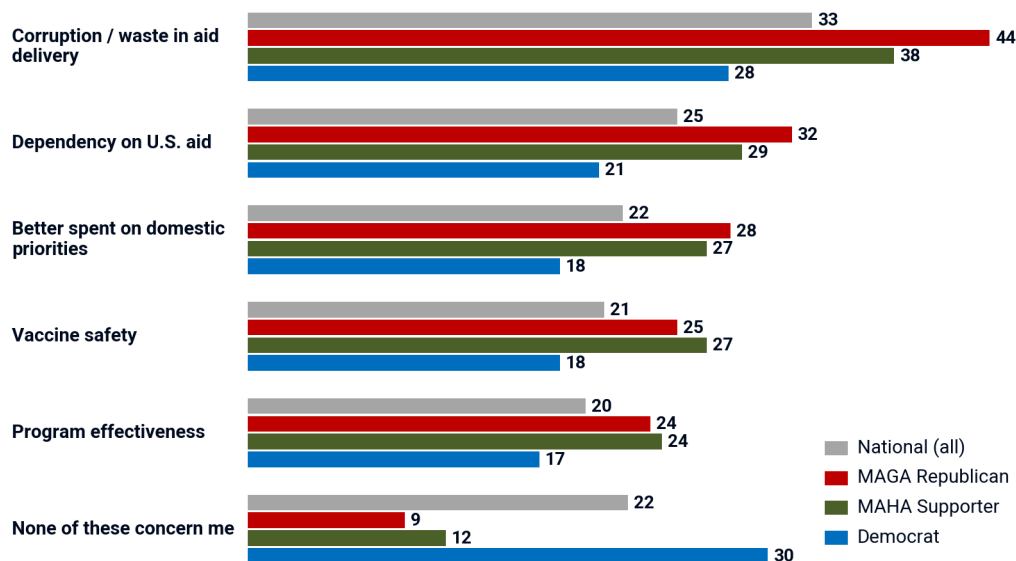
The parallel findings for global health assistance and malaria programs show the same top-two motivations (outbreaks and moral duty) with almost identical party splits.

Takeaway #3: Americans' Most Common Concern About These Programs Is Potential Waste or Corruption.

The most common concern Americans raise about U.S. funding for global childhood immunization programs is corruption or potential waste in delivery (33%), followed by countries becoming dependent on U.S. aid (25%) and the money being better spent on domestic priorities (22%). Concerns about vaccine safety (21%) and program effectiveness (20%) follow.

Waste and Corruption Is the Most Common Concern

Concerns about global childhood immunization programs; respondents may select multiple (%)



Source: Fraym national poll of 16,131 U.S. adults, June 26-July 22, 2026. Conducted by Fraym in partnership with the Kyle House Group.

These concerns are cited at higher rates among Republican-leaning groups. Among **MAGA Republicans**, corruption is named by 44%, dependency by 32%, and safety by 25%. Among **Republicans** overall, corruption is at 39%, dependency

at 30%, and safety at 24%. **MAHA supporters** follow the same profile with corruption at 38% and dependency at 29%, though their safety concern (27%) is somewhat higher than the Republican average.

Only 12% of Republicans and 9% of MAGA Republicans select “none of these concern me.” Among Democrats, 30% say none of the listed concerns apply to them.

Takeaway #4: Americans Identify Specific Consequences if the U.S. Cuts Funding for These Programs.

When asked what would concern them if the U.S. reduced or ended funding for global childhood immunization, Americans point to disease outbreaks reaching the U.S. (47%), preventable child deaths abroad (42%), danger to deployed U.S. military troops (31%), and rising Chinese or Russian influence in developing countries (22%). These concerns carry across party lines, though at different magnitudes.

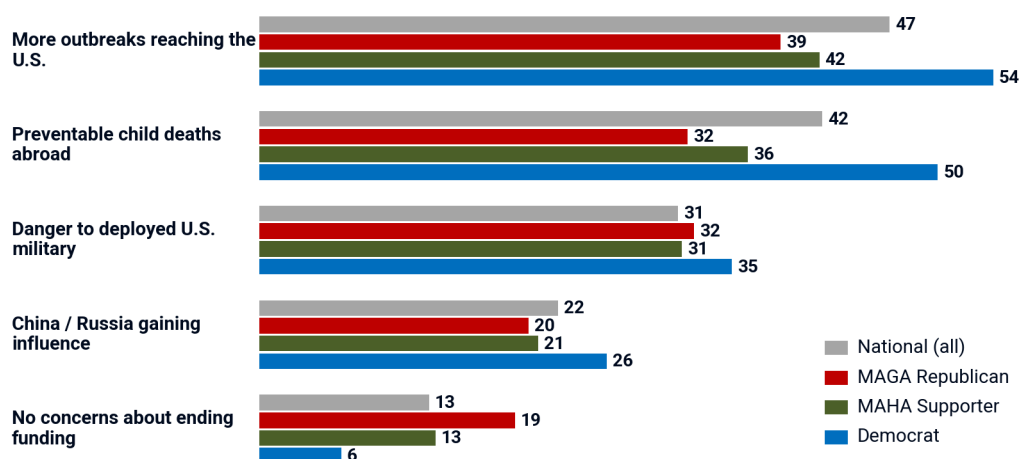
Among **Democrats**, 54% worry about outbreaks and 50% worry about preventable child deaths. Among **Republicans** and **MAGA Republicans**, the concerns rank in the same order but at lower intensities (41% and 39% respectively on outbreaks, 34% and 32% on preventable deaths). On the military-danger and China/Russia-influence frames, Republican and MAGA Republican concern rates are comparable to Democratic rates. **MAHA supporters** track close to Republican norms on all dimensions.

The subgroup that most consistently says “none of these concern me” is MAGA Republicans at 19%, followed by Republicans overall at 17%. Conversely, **81% of MAGA Republicans express at least one concern about ending the funding.**

The same concerns pattern holds for global health assistance and malaria control programs, with one notable exception. On the military-danger frame, concern is greater for malaria programs (33% nationally) than for either global immunization (31%) or broader global health (29%). Among Boomer+ voters, the gap is largest. 40% are concerned about military exposure under a malaria cut versus 36% under an immunization cut and 34% under a broader health-programs cut.

Americans Expect Tangible Consequences from a Funding Cut

Concerns if the U.S. reduced or ended global childhood immunization funding; multiple selections allowed (%)



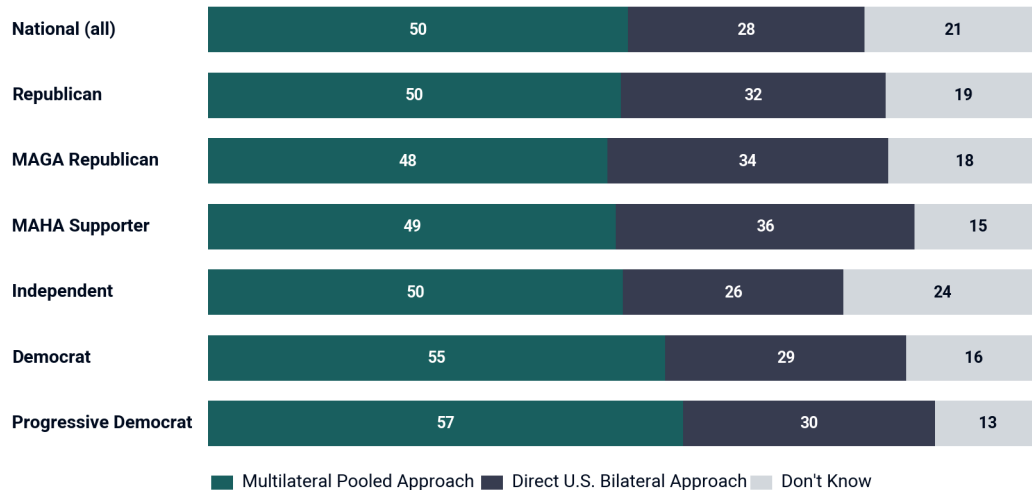
Source: Fraym national poll of 16,131 U.S. adults, June 26-July 22, 2026. Conducted by Fraym in partnership with the Kyle House Group.

Takeaway #5: Americans Prefer Multilateral, Matched-Funding Delivery Models by a Nearly 2-to-1 Ratio.

When told that the U.S. contributes roughly 13% of global immunization alliance funding, meaning every U.S. dollar is matched by close to \$8 from other countries,⁴ Americans prefer that pooled, multilateral structure by a 50% to 28% margin, with 21% saying they don’t know. The preference for the multilateral pooling model holds across every political grouping: **Republicans** favor it 50% to 32%, **MAGA Republicans** 48% to 34%, **Independents** in the same range, **Democrats** 55% to 29%, and **MAHA supporters** 49% to 36%.

Multilateral, Matched-Funding Model is Preferred Nearly 2-to-1

Preferred U.S. funding model for global childhood immunization programs (%)



Source: Fraym national poll of 16,131 U.S. adults, June 26-July 22, 2026. Conducted by Fraym in partnership with the Kyle House Group.

Roughly one-in-five Republicans (19%) and MAGA Republicans (18%) and about one-in-four Independents (24%) answer “don’t know,” compared with 16% of Democrats and 13% of Progressive Democrats.

Takeaway #6: There are Political Consequences for a Candidate Cutting Global Childhood Immunization Funding.

Five questions measure how voters would respond if a candidate voted to cut global childhood immunization program funding. Three questions ask respondents to react without specifying the candidate’s party (attitudinal). Two ask them to consider the vote in the context of a Republican or Democratic candidate specifically (behavioral).⁵ The two sets tell related stories.

When the candidate’s party is not specified, Americans broadly say they would penalize a program cutter.

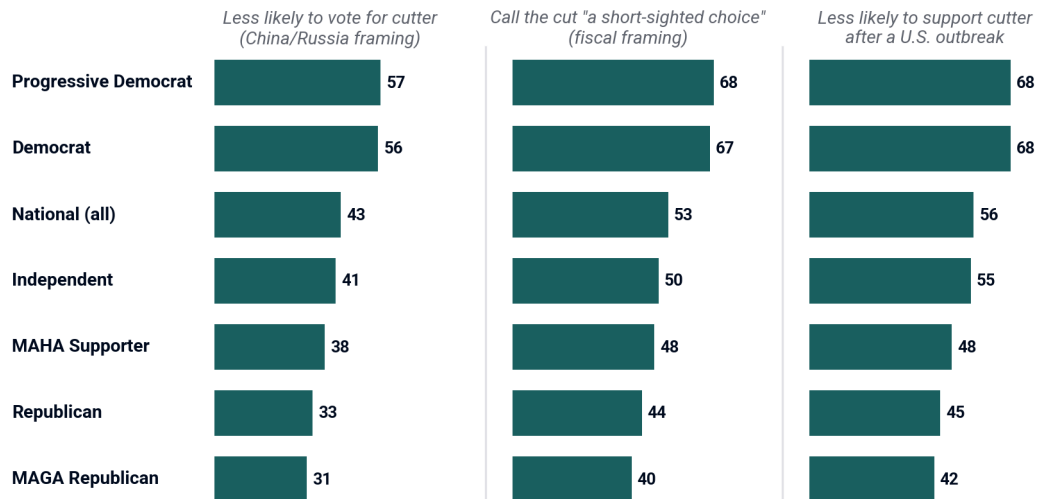
Across all three attitudinal framings, a majority or plurality of Americans say they would penalize a candidate who voted to cut funding for global childhood immunization programs:

- » **43% say they would be less likely to vote for the candidate** once told that China and Russia could step in to fill the vaccine funding gap if the U.S. exited, a national-security framing.⁶
- » **53% call cutting the \$550 million annual allocation to reduce the deficit “a short-sighted choice”** (against 29% who call it “a smart fiscal choice”), a fiscal framing.⁷
- » **56% say they would be less likely to support the candidate for re-election** if a major disease outbreak occurred and reached the U.S. after the funding cut, an accountability framing.⁸

The intensity of stated disapproval varies substantially by group. **Democrats and Progressive Democrats** express the strongest disapproval across all three frames (56-68% would penalize the candidate). **Republicans and MAGA Republicans** express lower disapproval across the three frames (33-45% and 31-42%, respectively, would penalize the candidate). Among MAGA Republicans, 40% call the cut “a short-sighted choice” on the fiscal frame, and 42% say they would penalize them following an outbreak.

MAHA supporters register attitudinal disapproval close to but slightly below the national average (38-48% depending on frame).

Majorities or Pluralities Say They Would Penalize a Candidate Who Cut This Funding



Source: Fraym national poll of 16,131 U.S. adults, June 26-July 22, 2026. Conducted by Fraym in partnership with the Kyle House Group.

When the candidate's party is specified, both parties' candidates lose support.

Nationally, the generic congressional ballot in this poll stands at 42% Democratic to 35% Republican, with 8% preferring an independent or third-party candidate and 15% undecided, a 7-point Democratic advantage.

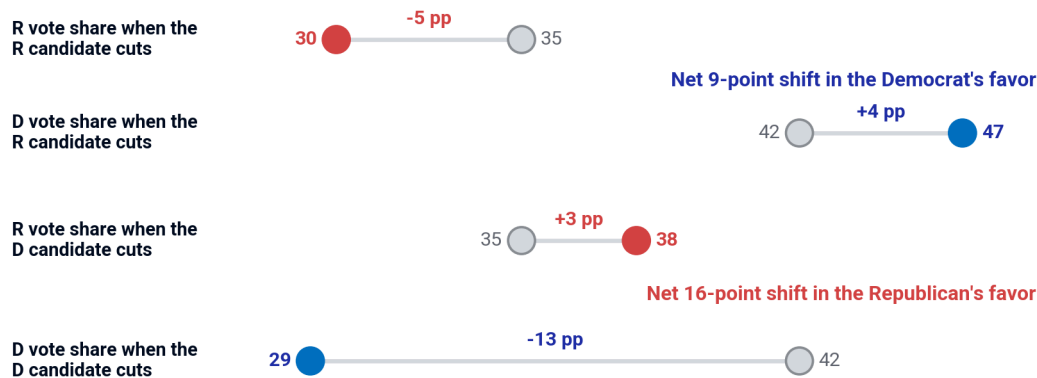
If the Republican candidate voted to eliminate global childhood immunization funding, the Republican's support falls from 35% to 30% while the Democrat's rises from 42% to 47%, a net 9+ point shift in the Democrat's favor, **moving the ballot from a 7-point Democratic lead to a 17-point Democratic lead.**

If the Democratic candidate voted to eliminate this funding, the Democrat's support falls from 42% to 29% while the Republican's rises from 35% to 38%, a net 16-point shift in the Republican's favor. **This moves the ballot to a 9-point Republican lead.**

Among Independents, the shifts are a net 9 points against a Republican who eliminates the funding and a net 19 points against a Democrat. Independents currently favor the generic Democratic candidate by 11 points at baseline (32% to 21%). A Republican who eliminates global childhood immunization funding sees that deficit widen to 20 points, a net 9-point shift. A Democrat who does the same converts an 11-point Democratic advantage into an 8-point Republican lead, a net 19-point swing.

Cutting This Funding Costs Candidates in Both Parties

Congressional vote share before and after the candidate's vote to cut funding is revealed (%)



Source: Fraym national poll of 16,131 U.S. adults, June 26-July 22, 2026. Conducted by Fraym in partnership with the Kyle House Group.

In this experiment, a funding cut carries a measurable electoral penalty for candidates of both parties.

Takeaway #7: MAHA Supporters' Views on Global Childhood Immunization Track the National Average.

Nearly half of survey respondents (47%) self-identify as supporters of the Make America Healthy Again (MAHA) movement.⁹

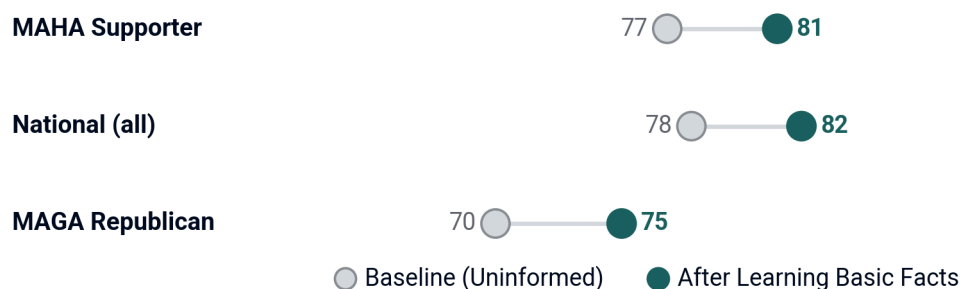
Among self-identified MAHA supporters, 49% identify as Republicans, 25% as Democrats, and 22% as Independents: Republican-leaning relative to the country as a whole (31% Republican), but with a substantial Democratic and independent presence. The 47% headline combines 21% who describe themselves as strong supporters and 26% who describe themselves as somewhat supportive.

MAHA supporters' baseline support for maintaining or increasing this funding is 77%, nearly identical to the national average of 78%. Informed support rises to 81% (national: 82%). Their motivations skew toward outbreak-prevention (34%) more strongly than moral duty (25%). Their concerns match the national profile: corruption and dependency lead, not vaccine safety. On the attitudinal frames, MAHA supporters would penalize a candidate cutter at 38-48% across the three framings. This is below Democratic rates (56% to 68%) and close to the national range (43% to 56%).

MAGA Republican × MAHA supporter shows baseline support in the low-70s and informed support in the mid-70s, closely tracking MAGA Republicans overall.

MAHA Supporters Track the National Average on Support

Share who say the U.S. should maintain or increase global childhood immunization spending (%)



Source: Fraym national poll of 16,131 U.S. adults, June 26-July 22, 2026. Conducted by Fraym in partnership with the Kyle House Group.

ABOUT FRAYM

Fraym is a population data firm that measures public opinion down to the neighborhood level across the globe. This report presents national findings from a July 2026 online opt-in poll. The same socio-demographically representative, geo-referenced polling data underpins Fraym's modeled estimates for every state and congressional district, allowing stakeholders to understand how attitudes on global childhood immunization programs vary across districts and states. Learn more at fraym.io.

ABOUT THE KYLE HOUSE GROUP

The Kyle House Group (KHG) is a Washington, DC-based international affairs consulting firm that provides hands-on and customized consulting services to a diverse portfolio of clients at the nexus of government and the business and philanthropic communities. Our experienced team of professionals specializes in government relations, policy advisory, partnership development, and strategic communications.

Survey Methodology

The poll was conducted by Fraym in partnership with the Kyle House Group. Interviews were completed online between June 26 and July 22, 2026, by 16,131 U.S. adults (age 18 and older). Respondents were recruited through multiple professionally managed national online survey panels, with quotas on age, gender, race/ethnicity, education, household income, and geography set to match the profile of the U.S. adult population. Responses passed

automated quality controls, including duplicate detection, multiple attention checks, straightlining, and completion-time screening. The survey was administered in English.

The completed sample was weighted to national population parameters for age, gender, race/ethnicity, education, household income, and geography (benchmark source: U.S. Census Bureau American Community Survey). Since respondents were recruited through opt-in online panels rather than through probability sampling, a conventional margin of sampling error does not strictly apply. Fraym instead reports a 95% credible interval: results for the full sample are accurate to within plus or minus 1.1 percentage points, reflecting a weighting design effect of 2.0 and an effective sample size of approximately 8,060. Intervals are wider for subgroups and for split-sample questions. The design effect primarily reflects a deliberate feature of the sample design: the survey set minimum sample sizes in every state and the District of Columbia and oversampled selected congressional districts to support state- and district-level estimation. Weighting these intentional oversamples back to their proportional national population shares increases the variability of the weights, and with it the design effect, relative to a strictly proportional national sample. As with all surveys, results are also subject to sources of error that cannot be directly quantified, including coverage error, nonresponse, and effects of question wording and order.

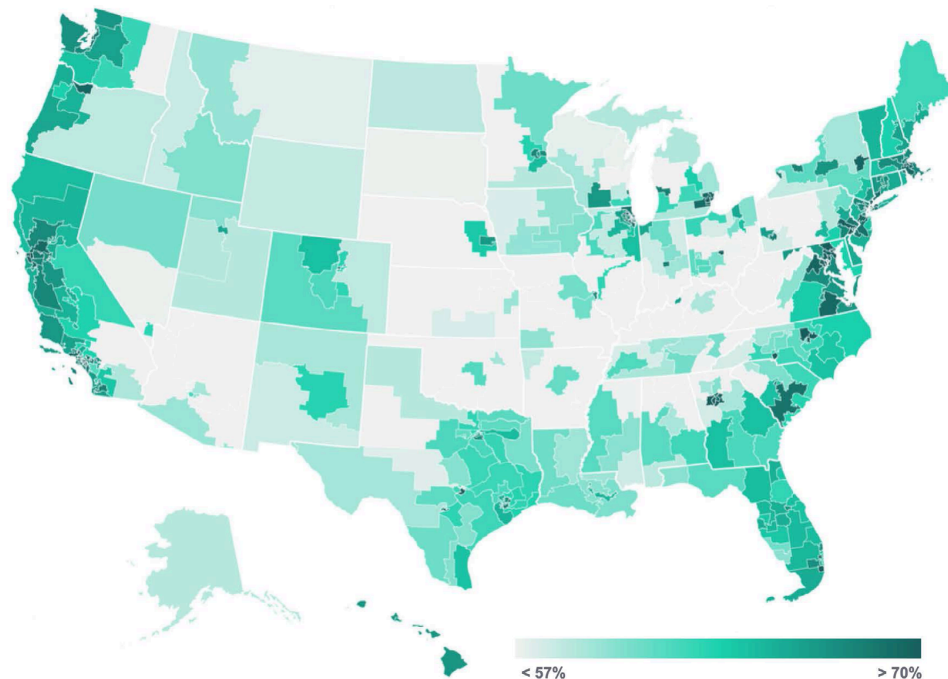
Certain questions employed a randomized split-sample design: the Republican program-cutter ballot question was asked of 7,930 respondents and the Democratic program-cutter version of 8,203 respondents. All political and movement classifications used in this report, including party identification, MAGA Republican, Progressive Democrat, and MAHA supporter, are based on respondent self-identification. Percentages are rounded to the nearest whole number; due to rounding, response categories may not sum to 100% and displayed differences may not exactly match differences computed from rounded values.

This report presents national results only. Fraym utilizes this socio-demographically representative and geo-referenced data, in combination with over 2,000 additional data covariates available at the census-tract level (or more granularly), to produce modeled congressional district- and state-level estimates with a synthetic margin of error between plus or minus 2-4 percentage points. An illustrative congressional district-level map is shown below. Full results are reported separately.

Full question wording, response options, and weighted national results for every item referenced in this report are available in the accompanying topline document.

Support for Global Health Programs, by Congressional District

Share of adults who say the U.S. should maintain or increase funding



Source: Fraym modeled congressional district-level estimates for baseline global health program support, July 2026.

Endnotes

1. Respondents read: "Out of the 0.2% of the federal budget that goes to global health, the U.S. government allocates approximately \$550 million annually to childhood immunization programs. These programs have helped vaccinate hundreds of millions of children and saved over 21 million lives since 2000. Knowing this, do you think the government should increase or decrease the amount it spends on global child immunization programs?"
2. Respondents read: "The U.S. government spends approximately two-tenths of one percent (0.2%) of the overall budget on global health programs. These programs have prevented over 90 million deaths since 2000. Knowing this, do you think the government should increase or decrease the amount it spends on global health programs?"
3. Respondents read: "Out of the 0.2% of the federal budget that goes to global health, the U.S. government allocates approximately \$800 million annually to combat malaria worldwide. Over the past twenty years, this funding has helped prevent over 640 million malaria cases and save nearly 13 million lives. Knowing this, do you think the government should increase or decrease the amount it spends on global malaria prevention and treatment programs?"
4. Respondents read: "Over time, the U.S. has provided roughly 13% of total funding for international immunization alliances. This means that every dollar provided has been matched by nearly \$8 from other countries, which has significantly increased the number of lives saved. Knowing this, which approach do you think is better for the United States?"
5. Respondents in one randomly assigned half of the sample read: "Suppose the Republican candidate for Congress in your district voted to completely eliminate all U.S. funding for international health alliances that support childhood immunizations in developing nations. Knowing this, if the election for U.S. Congress were held today, would you vote for the Republican candidate or the Democratic candidate in your congressional district?" The other half received the identical question with the party roles reversed (a Democratic candidate casting the vote to eliminate funding).
6. Respondents read: "Some national security experts argue that if the United States cuts funding for global immunization programs in developing countries, China and Russia could step in to supply those vaccines instead, growing their power and influence at America's expense. If a candidate running for U.S. Congress supported cutting U.S. funding for these global immunization alliances, would that make you more or less likely to vote for them?"
7. Respondents read: "As a reminder, the U.S. government allocates roughly \$550 million annually for global childhood immunization programs. If a candidate running for Congress advocates for cutting this specific funding to reduce the federal deficit, which statement comes closer to your view of that candidate?"
8. Respondents read: "Imagine a member of Congress voted to cut U.S. funding for global immunization programs. If a major disease outbreak later occurred and spread to the United States, would that make you more or less likely to support that member for re-election?"
9. Respondents read: "Do you consider yourself a supporter of the Make America Healthy Again movement, also known as the MAHA movement?" MAHA supporters are respondents selecting "strong supporter" (21%) or "somewhat a supporter" (26%). Party identification is self-reported separately.

MEDIA INQUIRIES

Ben Leo, Executive Vice Chairman and Co-Founder, fraym.io