

Encouraging new blood drive partnerships by understanding the sociocultural backgrounds of minority donors in pluralistic societies

Research Chair on the Social Aspects of Blood Donation

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Blood Donation – 2.1 Blood Donor Recruitment
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Research Project on Minority Communities and Blood Donation in Québec

Why study minority donors and their communities?

- ➡ In Montreal, Canada, as in many ethnically and culturally diverse societies, minority donors tend to give proportionally less blood than the majority population (Boulware et al. 2002; Glynn et al. 2006; Grossman et al. 2005; Murphy et al. 2009; Price et al. 2009; Shaz et al. 2010);

Objective of the study

- ➡ To qualitatively examine motivations, practices and cultural beliefs of minority donors and their communities so as
- to better understand the socio-cultural background of blood donation
 - in order to develop strategies to seek their collaboration and recruit more donors of diverse origins.

Presentation outline

Methodology

Part I: Minority donors

- Minority donors' motivations
- Health implications of donating blood

Part II: Minority partners and community leaders

- Current minority partners' motivations
- Minority leaders not currently involved in blood drives :
- Barriers to blood donation

Practical Issues

Introduction

A qualitative methodology

Can reveal the complexities of donors' and their communities' blood donation beliefs and overcome problems such as:

- a) Minority donors are supposedly very few: not possible to select a sufficiently large group in order to carry out a survey;
- b) Information pertaining to the donors' ethnic background was not available before January 2010;
- c) General mistrust from the part of minority informants = need of face-to-face interaction;
- d) Sensitive topics (discrimination, racism).

Limitations

Specific historical, social, cultural and economic environment in which the interviews took place.

Introduction

Methodology

Our research team conducted 83 1 ½ hour long semi-structured qualitative interviews with:

- a) 6 Héma-Québec representatives who work with minority blood drive partners;
 - b) 31 blood donors from an array of backgrounds;
 - c) 46 leaders from minority communities (associations/churches):
 - 9 of whom are already holding blood drives (Héma-Québec partners)
 - 37 of whom do not currently organize blood drives
- 23 key informants were also blood donors or had been blood donors at some point in their country of origin and/or in Québec

Donors

19 men and 12 women

Age repartition : 20-29 = 8; 30-39 = 7; 40-49 = 7; 50-63 = 9

Region and country of origin

All informants

Region and country of origin		Donors	Leaders/Donors O = Country of origin; Qc = Québec; R = refusal in Québec	Leaders non-donors	
Africa	Congo	1	2 (O)	1	
	Senegal	1			
	Benin			1	
	Cameroun		1 (O+Qc); 1 R	1	
	Ivory Coast		1 (O+Qc); 1 R		
Latin-America	Venezuela	1			
	Chili	3			
	Colombia	1			
	Guatemala	1			
	Honduras		1 (O+R)		
	El Salvador		2 (Qc)		
	Peru			1	
	Dominican Rep.			1	
	Brazil		1 (O)		
	Haiti	4	1 (O+Qc); 1 (O+R)	1	
English Caribbean	Barbados	2	1 (Qc)	1	
	Jamaica	1		3	
	St-Vincent	1			
	Tunisia	1			
North Africa& Middle East	Lebanon	4	2 (O+Qc); 1 (Qc); 1 R		
	Iran	1			
	Vietnam	4	1 (O+Qc); 2 (Qc); 1 R	1	
Asia	Hong Kong		1 (O)	3	
	Taiwan	2			
	China (mainland)	1	1 (O+R)	3	
	Laos		1 (Qc)		
	Sri Lanka			1	
	Others	Greece	1		
		Poland	1		
France			1 (Qc)		
Spain			1 (O)		
Canada			1 (Qc); 1 R		
Total	(32)	31	23 (O and/or Qc); 5 R	18	

The Organizational Model of Blood Collection in Quebec

Héma-Québec is the province's unique blood supplier.

All donations are unpaid, anonymous and volunteered by the population.



86% of the blood supply is obtained through **2000 annual** mobile blood drives across the province (Héma-Québec 2009)



These mobile blood drives are organized on a volunteer basis, usually by community associations, municipal services, the educational sector or local enterprises.

There are more than **16,000 blood drive volunteers** (Charbonneau et al. 2010)



In Québec, only 1% of community blood drives are held in partnerships with minority associations



Associations' main mission and activities

Mission and activities	Nb
Church – religious services	20
Immigrant support and integration	4
Community services	6
Sociocultural activities	6
Advocacy group	3
Specialized vocation (media, health cause, professional)	4
Multifunctional centre	3

Methodology

Interview guides themes:

- Symbolic meaning of blood and blood donation;
- Informant's blood donation practices;
- Practical aspects of blood donation in the informant's (or his/her family's) country of origin;
- Respondent's sense of belonging to Quebec society;
- Obstacles to, and motivations for donating blood/organizing blood drives.

Data analysis:

- 5 individual reading of interview transcriptions
- Identification of grid categories
- Team discussions
- Return to the literature
- Revision of grid categories
- Manual codification of transcriptions
- Synoptic tables for each theme

Results. Part I: Minority Donors

Understanding minority donors' socio-cultural background

Why do minority donors give blood?

- ➡ Like other donors, they see blood donation as: personal decision, individual act, civic duty. They give blood for the common good and want to contribute to saving a life;
- ➡ Minority donors who give in school or work environments are positively encouraged by their fellow students or colleagues;
- ➡ Some were previously acquainted with blood donation in their country of origin as replacement donors, or have lived through times of great need, such as war;
- ➡ Some find that blood donation has **health implications**:
 - they want to offer the gift of health for someone in need;
 - they might benefit from the regeneration of their own blood;
 - giving blood reassures them of their overall state of health.

Results. Part I: Minority donors Health implications of donating blood

Vicente, 46-year-old Chilean immigrant:

“It motivates me that I lead a healthy way of life; it’s an important value to me. Héma-Québec’s [nurses] ask very personal questions that warrant very intimate answer: if I’ve ever been in prison, if I’ve ever injected myself with drugs. Those are dangerous things to do and I keep away from them, but I know that some people do practice those activities.”

Binh Minh, 41-year-old Vietnamese donor:

“I understand that I might feel weak but when I’m done [donating blood], I feel fine, I feel good. That gives me an indication that I am okay, that I am healthy. I know that through my daily activities, I haven’t done anything bad. If they don’t call back, it’s because everything is all right. [our translation]”

Results. Part II: Minority partners and community leaders

Who are the current minority community partners?

- All partners initiated contact with Héma-Québec
- A majority are cultural or religious groups
- Their intentions in seeking to collaborate with the agency on blood drives:
 - To commemorate a particular political or religious event in their community;
 - To fight perceived discrimination against members of their community.

Marwan, a Christian Lebanese leader:

“We organize the blood drive to celebrate...to **remember our martyrs**. I don't want to forget their sacrifices and neither does the Lebanese community. Some people hold church services, other people organize a party but **we hold an event where people can give...** It's also a way to **show our integration** into Canadian society, that we aren't parasites, that we're not only here to work, sleep and eat: we have a **noble social involvement**. I call it noble work.”

Nasir, from the Iranian community:

“Mostly we emphasize on the subject of humanity, on those ads, and a **responsibility that we have towards the society of Quebec**. Because we came here as a full participant of the society, we must be able to participate and that is a good way to our receiving society that we are good citizens, we are **trying to be part of this society**.”

Most successful drives

The most successful drives are by well-organized communities with a strong sense of identity and a broad mobilization capacity, who hold blood drives for commemorative purposes

Characteristics of minority partners

- ➡ Strong sense of identity;
- ➡ Broad mobilization capacity and broad member base;
- ➡ Intention in holding a blood drive not only altruistic in nature but also socially, culturally, religiously or politically driven;
- ➡ Volunteers are supported by their leaders and members of their community;
- ➡ Members of their association are able and willing to give blood.

Results. Part II. Minority leaders not currently involved in blood drive: What do they have to say about the blood donation process?

- ⇒ General lack of knowledge about the blood donation process in Québec
- ⇒ Total absence of familiarity in the community with the idea of giving to a blood bank
- ⇒ Others reasons related to their specific community

Anthony, born in Barbados :

Because we came from the Islands and **we didn't have blood banks** so to speak and one did not just go and give blood how they do here. They didn't have regular blood drives. And so we are not used to it. It's **not part of our culture** to give blood. People from the Islands usually give blood when a family member needed it or a friend. So we are **not in the habit** of just going to give blood.

Minority leaders not currently involved in blood drive: What do they have to say about blood donation process ?

No immediate urgency

No war

No natural catastrophe

No calls made out to the population



NO NEED FOR
BLOOD

Jiao, from a Chinese cultural centre :

In Canada, it's a peaceful country, **we don't have a civil war** and **who needs blood?** Maybe some people they have a very serious disease in the hospital, but how many of that people have? Not a lot. I don't think we have over ten thousand or twenty thousand that really need blood, every day. So we want to know what is going on.

Minority leaders not currently involved in blood drive: What do they have to say about blood donation process ?

Anonymous and non-anonymous system

- ➡ Many in favour of a double system, anonymous and non-anonymous or initial inclination to donate blood to a family donor;
- ➡ Most were surprised that giving blood to a family member, in case of emergency, was generally not possible in Québec.

Scott, born in Jamaica :

Not to say that people aren't interested in giving blood, off the top of their head but... You grow up in our communities where resources are few, **you learn to share**, to split your pieces of bread in two, **it's different when it goes to an abstract, intangible act like giving blood in case someone may need it**. It's different, there's no urgency. There is no immediate need; to someone they don't know... So, if I would try to get blood from the community, **I would like to make it like your community is in need**.

Reluctance and barriers to blood donation

The influence of traditional beliefs

- ⇒ Blood is seen as a vital fluid, a source of life;
- ⇒ Folk medicine in many regions and cultures, such as for the Caribbean, Chinese and Vietnamese dictates that balance within the body will help maintain overall health, and therefore discourages giving bodily fluids;
- ⇒ In this frame of mind, giving blood is almost seen as a sacrifice.
- ⇒ Paid donations = less healthy poor people ⇒ blood donation = illness.
- ⇒ Giving blood can result in discovering one's potential illness. Preference to not be informed.

Social exclusion and doubts about the use of collected blood

- ⇒ Community fall-back;
- ⇒ 'White people do not want black blood';
- ⇒ Fear of being turned down;
- ⇒ Haitians : resentment for having being excluded in the 1980's.

Kevin, from the Jamaican Community :

"I think that it's a **combination of racism and a combination of a resistance to integrate** [...] After a while, when you face racism, experience racism, I think **people from older generations pass on this idea** of, I guess it's not directly, it's like: 'don't try, don't bother getting in, that's not for us, you're not getting into that role.' People just sort of **keep away from public agencies** because it's like: 'they don't like me, it's not for me.' So, when it comes to things like giving blood, talking about Héma-Québec, people don't, in general...."

Paul, from the Jamaican Community :

"I think it's something culturally, because I remember **once when it was said that white people do not want black blood** and all that. **That stayed with me and is still with me.** My blood is precious. I'm not going to give my blood to a person who doesn't like me. I prefer, like many Jamaicans I know from Jamaica here [...] giving to a member of the family or wife. [...] It's normal if you know the person and the person is sick. I think if you ask **most Jamaicans, they are not in keeping with just going to give blood to the blood bank.**"

Practical Issues

- ⇒ Target well-organized, well-anchored communities
- Count on religious altruistic values
- Associate the event with a particular commemoration
- Make it a social event

Nasir, from the Iranian community :

In my community, regularly, we have gathering, we do it **as a festivity**, we try to do it as a **social gathering and it's also blood drive**. It's different because I know my people are more social activity driven, then **if we have strictly this hour we give blood, they say, I won't come.**

- ⇒ Emphasize particular medical needs
- Use ethnic media to target minority donors
- Develop the blood agency's cultural competence
- Continue and develop blood drives in schools and workplaces