Understanding organ donation attitude-behaviour discrepancy

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Abstract:
This study explores the underlying belief values influencing attitudes to posthumous organ donation, intention to sign a donor card as a sign of behavioural willingness. Extending the Theory of Reasoned Action this study integrates four external explanatory belief factors, altruism, perceived benefit, perceived risk and familial subjective norm to more fully explain organ donation intentions to sign a donor card. The data was collected from a convenience sample of 423 via an online questionnaire. The relationships between the constructs of the proposed conceptual model were tested using SEM and bias correct bootstrapping techniques. Several alternatives models were compared to confirm the mediation effects. Findings provide critical insight for marketers to design and implement culturally relevant strategies promoting the acceptance of posthumous organ donation. The contribution of this paper stems from the simultaneous modelling of a range of mediation effects which can better help explain people’s organ donation decision-making processes.

Keywords: posthumous organ donation, donation, the Theory of Reasoned Action

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Background and research aim
A single donor has the ability to contribute to the life of at least eight recipients and improve the lives of countless others (Schnitzler et al., 2005). Critically, there is a rising global demand for organ transplants, yet a lack of supply (Theodosopoulou, Dor, Casanova, Baskozos, & Papalois, 2018). Despite the intrinsic and extrinsic value of posthumously donating organs and many individuals possessing positive attitudes towards donation, there remains a global shortage of people making the positive choice to actually donate their organs. This lack of consistency between overall favourability toward donation and organ donor registration behaviour results in an attitude–behaviour discrepancy which has left researchers wondering why donor registration rates do not align with overwhelming support (Siegel, Navarro, Tan, & Hyde, 2014). Therefore, gaining an understanding of which beliefs potential donors are more likely, or less likely, to deliberate is critical for policy makers and researchers seeking solutions for organ donation behavioural change. Furthermore, a greater understanding of individuals’ belief values encouraging or discouraging posthumous organ donation attitude formation, and subsequent behavioural intentions, is paramount in order to increase the number of transplanted organs and reduce the organ transplant waitlist. The objective of this study is to explore factors motivating or inhibiting individuals to donate organs posthumously.

Adapting the Theory of Reasoned Action (TRA), incorporating four external variables explaining organ donation attitudes, this research aims to provide a more encompassing explanation of posthumous organ donation behavioural intention. Morgan, Stephenson, Harrison, Afifi, and Long (2008) contend that decision-making is not necessarily entirely reasoned in nature as decision-making processes are also strongly influenced by an individual’s values or beliefs which, in turn, effect attitude formation and behavioural intention. These additional external factors altruism, perceived benefit, perceived risk, familial subjective norm were integrated into the TRA model to more fully explain attitude towards donation and the intentions to sign a donor card. Organ donation attitude is expected to mediate the effects of perceived altruism, perceived benefit, perceived risk and familial influence on intention to sign an organ donor card. Therefore, this study explores the following research questions:

RQ: What are the factors that influence an individual to become a posthumous organ donor?

Research method
This research utilised a convenience sampling approach via an online questionnaire through the Twitter website. A total of 423 usable surveys were collected. Respondents were aged between 18 and 65 years; complying with legal requirements for organ donation. Given low donor card registration rates the sample, as expected, was largely representative of non-registered organ donors 77%. In addition to the Main Research Model (MRM), this study tests three alternative models by using SEM with maximum likelihood estimation. Bias correct bootstrapping was conducted to assist the mediation test, with altruism, perceived benefits, perceived risks of organ donation and familial subjective norm acting as initiators in the development of the intention to sign a donor card.

Finding and discussion
Overall, the model explained 67% of the variance in attitudes toward donation ($R^2 = .67$) and 65% towards the intention to sign a donor card ($R^2 = .65$). This study suggests the most important predictor of organ donation attitudes is altruistic humanitarian reasoning ($\beta = .44$, $P < .001$, $t = 8.33$). General altruistic values relating to organ donation benefiting humanity and saving lives are key motivational triggers influencing individual’s attitude formation. This finding consists of previous research evidencing altruism as a strong predictor of organ
donation (Cohen & Hoffner, 2013; Hill, 2016; Mostafa, 2010). The second most significant predictor of organ donation attitudes is individuals’ perceptions of the risk associated with a donation ($\beta = -0.32$, $P < .001$, $t = -4.52$). Participants were concerned about issues of body disfigurement, use of organs for medical research purposes, issues related to maintaining an intact body in death and issues of fear and anxiety about one’s own death. This finding concurs with previous organ donation research where anxiety associated with death can intensify and become activated when individuals consider organ donation decision-making (Afifi et al., 2006; Siegel et al., 2010). Familial subjective norm was also revealed as another significant negative influence on attitudes toward donation ($\beta = -0.07$, $P < .001$, $t = -3.31$). Discussing organ donation intent is a potentially taboo issue and carries with it high risk, such as, upsetting the family members, feeling pressure to change behavioural intent, alongside challenges associated with commencing a conversation (Lambert South & Elton, 2017). Therefore, most people are more likely to avoid taking such a risk if they do not have enough confidence in their ability to discuss the subject. Interestingly, perceived benefits of organ donation were found to be insignificant ($\beta = 0.28$, $P < .099$, $t = 1.65$), thus, weak predictors of organ donation attitude formation, which is contradictory to previous research (Cohen & Hoffner, 2013; Mostafa, 2010).

In addition, the strong positive relationship between organ donation attitudes and intentions to sign a donor card ($\beta = 0.82$, $P < .001$, $t = 6.23$) supports previous research exploring organ donation behaviours suggesting positive attitude formation is a critical step in organ donation decision-making (Quick, Anker, Feeley, & Morgan, 2016; Sharpe, Moloney, Sutherland, & Judd, 2017). This research concurs with previous organ donation studies finding a significant attitude-behaviour discrepancy with many respondents reporting positive intentions to donate organs, however, are not willing to sign an organ donor card (Britt, Britt, & Anderson, 2017). As such, an in-depth understanding of beliefs influencing organ donation attitude formation is critical to enhancing consumer’s behavioural action enabling positive posthumous organ donation choices. Therefore, communication strategies need to not only refute common negative misperceptions about organ donation (Miller, Currie, & O’carroll, 2019) but also balance the value of organ donation with content leveraging the perceived benefits and altruistic nature of potentially saving the lives of others (Joshi & Stevens, 2017).

Contributions and future research direction
Theoretically, this research confirms the value of extending TRA to include belief-based antecedent variables influencing attitude formation as means to provide a more encompassing explanation of posthumous organ donation behavioural intention (Wong & Chow, 2017). As such, the rational decision-making process of people organ donation behaviour can be more fully explained by perceptual belief-based reasoning. This study advances and contributes significantly to the organ donation and marketing literature by identifying underlying belief values that act as key motivator and inhibiting factors impacting attitude formation and behavioural intention. Establishment of the mediation model enriches marketing and organ donation context, as well as, provides insights into the target audience’s motives and barriers towards organ donation by incorporating factors influence individual intention to sign donor cards. Further, the contribution of the study stems from simultaneously estimating the number of alternative structural models. As the perceived risk was identified as a key barrier impacting organ donation attitude formation future research is required to explore and define risk typologies related to posthumous organ donation behaviour. In relation to perceived benefits, future research could explore perceived self-benefits, as opposed to benefits to others, which may motivate organ donation behaviour, thus contributing to the knowledge of intrinsic selfrelated motivator characteristics.
References


