

Saving a Life in Front of My Eyes

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Abstract

Background: World Health Organization (WHO) assigned voluntary non-remunerated donation as the safest form of Blood donation. Moreover, it emphasized on developing strategies and program to induct regular donors in large quantity to maintain the highest possible quality of blood supply. However, the major bone of contention is the number of drop outs in blood donor pool, hence the blood donor agencies always keeps this thought process moving that how to affiliate a long-term relationship with blood donors. There is continuous search and effort for the development of a successful program which can strengthen the long term relation between the blood donor club and blood donor.

Methods: It was therefore mandatory to put forward a novel idea which can bring a drastic change in blood supply campaigns and amalgamate the donors with the recipients through a humanitarian binding force. After an year of project development the concept of "SALIFOME - Saving A Life Infront Of My Eyes" " was coined by Dr Asim Qidwai which was then forwarded for rigorous pilot study and reviewed by a multidimensional team (MDT) comprising of Hematologist, Thalassemia experts, Blood Bank Experts, Nursing Educationist, Psychologist and Pharmacist.

Result: SALIFOME wherever implemented would provide the following benefits to the health care system specifically systems associated with chronic blood disorders including but not limited to: donor immediate satisfaction, lateral communication, long term engagement of donors, learning experience for others, establishment of large blood donors pool, community education, cost effective solution, better utilization of human model.

Conclusion: Our intention with SALIFOME was to start and initiate something which will provide the blood donor one strong motivational and sustain long term relationship among donors and donor club. This concept can be used as reference for other centers dealing with haemoglobinopathies.

Keywords: Blood donor; Chronic blood disorders; Community education

Background

Donating blood is recognized as an archetypal altruistic behaviour [1]. There are many factors which influence an individual to indulge in the noble act of blood donation. The attitude and mindset of blood donors have been studied rigorously and reported in literature in the form of multiple factors that affect and create an overall approach of population towards blood donation. These factors include age, gender, mindset, beliefs, political situation of the area, health structure, past experience of the blood donor [2-5]. However the most prominent reason reported in literature towards blood donation is altruism.

An act of donation is often selfless without any monetary gain. Many theories have been proposed by researchers discussing upon the motivating factors which instigate an individual to engage in an act of pure altruism [1, 6-8]. Multiple psychological and economic studies show that incentives tend to have a negative effect on pro social behavior like Blood donation and it also decreases the quantity of blood donors in long term. Abolghasemi, Hosseini-Divkalayi, & Seighali [9], therefore recruitment/retention campaigns emphasize altruism.

World Health Organization (WHO) assigned voluntary non-remunerated donation as the safest form of Blood donation. Moreover it emphasized on developing strategies and program to induct regular donors in large quantity to maintain the highest possible quality of Blood supply [10]. However the major bone of contention is the number of drop outs in blood donor pool, hence The blood donor agencies always keeps this thought process moving that how to affiliate a long-term relationship with blood donors. There is continuous search and effort for the development of a successful program which can strengthen the long term relation between the blood donor club and blood donor.

Without voluntary blood donations, it is not possible to carry out different health service provisions namely elective surgery. Despite this fact only approximately 5% of eligible population gives blood at any given time [11], resulting in blood shortage [12] rendering recruitment of blood donors mandatory. Chronic Blood disorders require continuous flow of blood products because it is not possible to run any blood diseases hospital without a Blood bank and blood donor club. It is always a difficult task to arrange; in time blood products of patient suffering with blood disorders. The difficulties are due to lack of information about factors which actually can keep blood donor intact. Henceforth is of the utmost importance to understand the motivating

favour which underlies altruism, so as to generate a strategy which ensures that appropriate motivation is targeted.

Global Data

The theme for 2011 Blood donor day by WHO was “More blood, More life” where it was emphasized that more people should get awareness regarding donating blood as they are carrying a precious gift which is beneficial to mankind. All over the world there has been a surge in blood usage resulting in Critical blood shortage. Countries which reached their 100% blood donation targets through voluntary non-remunerated donations have to now employ various incentives to recruit blood donors [9].

The need for blood increased dramatically in the 1990's. The supply and demand gap in United States decreased from 13.8% to 9.1% in 1999. [13] A latest survey report indicated an increase in the number of blood transfusion from 1.1 to 2.7 during 1997-2007 [14].

Developing word–scenario

In Pakistan Thalassemia is accounted as the major hematological disorder that requires regular blood transfusion to improve quality of life and overall survival. As per an estimate approximately 5000 children are born with thalassemia annually and around 70,000 patients are registered with this disease in the country. Along with Thalassemia, Hepatitis B virus (HBV) and hepatitis C virus (HCV) infections are the main transfusion-transmitted infections (TTIs) especially in Pakistan [15-17].

Reportedly there are 170 public and 450 private blood banks in the country but still lack of blood donor pool [16]. Due to the humanitarian assistance of non- governmental organizations (NGO'S) and Blood Donor organizations (BDO's) there has been some progression since 1970's [15, 18]. However being the country with highest prevalence of transfusion dependent thalassemia a regular supply of blood is required. Almost 1.5 million blood pints are collected annually in the country where majority of donation (65%) comes from replacement donors and a lesser percent from volunteer donors (i.e. 25%) [19,20]. This lack of blood donors has been studied by researches and different factors such as multiple factors including lack of knowledge, fear of getting positive screening results, hard access to approach blood donation area, fear of contracting an infection and other adverse health effects, including loss of vitality etc. [3,5,21-23] were found to be linked with the deferral toward blood donations.

Despite the hindrances there is a need to develop a solid strategic program directed to target altruistic behaviour, produce the motivation and desire to donate in voluntary non-remunerated donors.

AMTF helping blood disorder concept, Karachi, Pakistan

AMTF-Helping Blood Disorders program is working since 2003 on pure philanthropic basis. It is providing free of cost quality health care to children suffering from Haemoglobinopathies especially thalassemia and transfusion dependent blood disorders. AMTF is also facing the same challenges with reference to the availability of continuous flow of blood products for these patients. The retention of long term commitments from Blood donor side is of great value and to keep them intact with Blood donor pool is of great concern since the long term relation development is always difficult due to high chance of relapses.

It was therefore mandatory to put forward a novel idea which can bring a drastic change in blood supply campaigns and amalgamate the donors with the recipients through a humanitarian binding force. After an year of project development the concept of “Salifome” was coined by Dr. Asim Qidwai which was then forwarded for rigorous pilot study and reviewed by a multidimensional team (MDT) comprising of Hematologist, Thalassemia experts, Blood bank experts, Nursing educationist psychologist and Pharmacist.

SALIFOME: The concept “First Pilot Study Project of AMTF”

We have not seen in any blood donation area an environment, to express or demonstrate the donor what actually is going to happen with his/her donation of blood. They definitely know that there blood will help someone but the feeling of empathy, attachment, and emotional bonding is missing. Their act of donation is carried out as a social and moral responsibility without tapping on the aforementioned factors. These factors are proposed as the motivational triggers required to keep the donor intact. Hence AMTF came up with the concept of SALIFOME: Saving A Life In Front Of My Eyes, which encompasses the missing emotional cum motivational link between the donor and the recipient.

Operational definition

“By placing the blood donation area opposite to blood receiving area where we can actually show the blood donors in real time the immediate benefits of donating blood. This will in turn induce in donor a feeling of attachment and emotional bondage with the recipient and keep the donor pool intact.”

Rationale behind Development of SALIFOME

SALIFOME is a connection/ a link/ a bonding which will move between a donor and the beneficiaries and help a blood donor club to keep donor retention for longer period of time. Also on the other hand it will also enhance probably the number of donors since the lateral communication would be a product of such concept.

It is an effort to find out one strong link which is missing between a donor and recipient. SALIFOME will work as strong relation and a bond of highest level of care for a person who is most of the time stranger to a person who is receiving the blood products with courtesy blood donation

This concept can be replicated in number of ways where we can motivate people and change their previous beliefs from giving blood donation as social responsibility to blood donation as pure altruism.

The following factors work as the rationale behind theory SALIFOME:

1. To transform the occasional healthy blood donors in to regular volunteer blood donors.
3. To inculcate the empathetic concept of voluntary non-remunerated blood donors in Pakistan
4. To decrease the demand and supply gap within and outside AMTF.
5. To develop emotional bonding between donor and recipient, so that a long term relationship sustains.

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