

University of Vermont ScholarWorks @ UVM

Public Health Projects, 2008-present

Public Health Projects, University of Vermont College of Medicine

1-23-2008

A Survey of Motivations for 9/11, Hurricane Katrina and General Lapsed Donors in Northern Vermont

G Balderama

P. Chen

M. Clay

S. Dorsky

C. McIlree

See next page for additional authors

Follow this and additional works at: http://scholarworks.uvm.edu/comphp_gallery

Part of the Community Health and Preventive Medicine Commons, and the Health Services
Research Commons

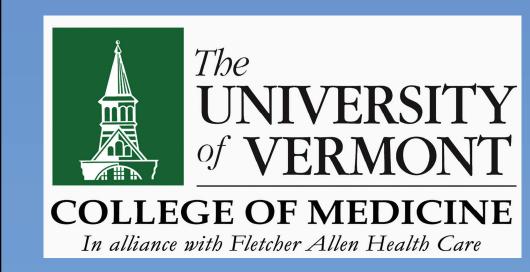
Recommended Citation

Balderama, G; Chen, P.; Clay, M.; Dorsky, S.; McIlree, C.; Sisemoore, J.; Stinnett-Donnelly, J.; Dembeck, C.; Nattress, P.; Carney, J.; and Fung, M.K., "A Survey of Motivations for 9/11, Hurricane Katrina and General Lapsed Donors in Northern Vermont" (2008). *Public Health Projects, 2008-present.* Book 1.

http://scholarworks.uvm.edu/comphp_gallery/1

This Book is brought to you for free and open access by the Public Health Projects, University of Vermont College of Medicine at ScholarWorks @ UVM. It has been accepted for inclusion in Public Health Projects, 2008-present by an authorized administrator of ScholarWorks @ UVM. For more information, please contact donna.omalley@uvm.edu.

ttress, J. Carney, and	na, P. Chen, M. Clay, S. Dorsky, C. McIlree, J. Sisemoore, J. Stinnett-Donnelly, C. Dembeck, P. Carney, and M.K. Fung					



A survey of motivations for 9/11, Hurricane Katrina, and General lapsed donors in Northern Vermont



Balderama, G.¹, Chen, P.¹, Clay, M.¹, Dorsky, S.¹, McIlree, C.¹, Sisemoore, J.¹, Stinnett-Donnelly, J.¹, Dembeck, C², Nattress, P.², Carney, J.¹, Fung, M.K.¹

1University of Vermont College of Medicine, Burlington, VT

²American Red Cross- New England Region, Burlington, VT

Introduction

Despite rising demand, blood donation has remained stagnant in recent years, except for donation spikes that occurred in periods after major national crises such as the September 11th attacks in 2001 and Hurricane Katrina in August 2005 [1]. During times between such events, the majority of blood donations are due to repeat donors. The remainder of the blood supply is supplemented by one time or infrequent donors who have since stopped giving blood, i.e. lapsed donors. A third group of donors, designated disaster donors has been identified. These are individuals who donated blood due to these disasters but who have since stopped giving blood. A vast body of information exists on the motivating factors that bring people to donate and the barriers that prevent them from coming back[2]. For the purposes of this study, three groups of lapsed blood donors were identified. A survey was conducted to investigate the perception these donors have of the current blood supply, motivating factors for their past donations, and their opinions on potential ways to bring them back as consistent repeat donors.

Methods

Study Population

- Post Katrina disaster donors (n = 133)
- Post 9/11 disaster donors (n = 635)
- Non disaster related donors (n = 900)

Survey Design

- Twenty-five question survey
- 3 demographic questions and 19 survey questions
- 5-point Likert scale (5=strongly agree; 1=strongly disagree)

Data Entry

• Data was entered two times by separate individuals. If any inconsistencies were found, the original data sheet was pulled for a third comparison to ensure data validity.

Statistical Analysis

- ANOVA with a 95% confidence interval between groups controlled for gender and age.
- Subject effects using the general linear model for general lapsed versus combined 9/11 and Katrina disaster groups, controlled for gender and age.

Results

Surveys

- •134 surveys from General Lapsed, 55 from 9/11 Lapsed, and 25 Katrina Lapsed.
- •Responses: 1) strongly agree, 2) agree, 3) neutral, 4) disagree and 5) strongly disagree.
- •Survey questions aim to answer our Research questions

Table 1. Survey questions grouped by Research questions

questions
Why haven't you donated since?
3. I do not think there is a shortage/need for blood donations at this time.
5. I had unpleasant physical symptoms during/after my last donation.

- 14. Travelling to the donation center is not convenient for me.
- 16. I no longer meet blood donor criteria

11. The time I spent donating took too long.

- 17. I am not pleased with the service provided by the Blood Drive staff.
- 19. Donation center hours of operation do not fit into my schedule.

Why did you last donate?

- 2. The last time I gave blood, it was because I felt it was something I could do to help in an emergency.
- 7. I last donated because a friend or family member asked me to go with them
- 3. I thought there was a blood shortage at the time of my last donation.

What would it take for you to come back?

- 1. If the blood center were open on the weekends, I would donate blood again.
- I. I would donate blood again if I knew how and when my blood was used.
- 6. I would be willing to donate again if a friend or family member asked me to go with them.

 9. I would be willing to become a regular donor in order to be part of a disaster donation response program. (This blood would be used within minutes to hours).
- 10. The only time I would donate blood again is during a national emergency.
- 12. I will never donate again.
- 13. If the Red Cross provided statistics to the public on the blood supply, and the blood supply was dangerously low. I would donate blood.
- 15. I would donate blood more regularly if I thought it was needed.
- 18. Donation center hours of operation do not fit into my schedule

Demographics

Table 2 describes subject demographics.

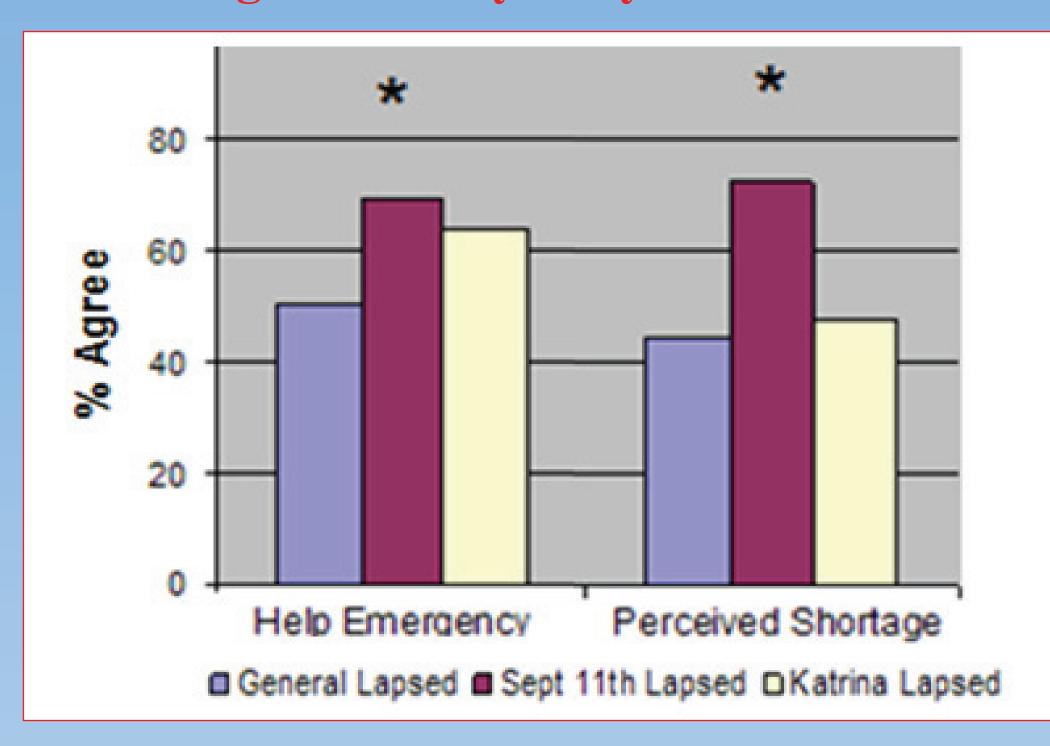
	General Lapsed Donors	9/11 Lapsed Donors	Katrina Lapsed Donors		
N	134 (40 males)	55 (19 males)	25 (11 males)		
Age Group	M=3.39, SD=1.3	M=3.73, SD=1.37	M=4.36, SD=1.32		
Our age groups were as follows: $1 = 18.25$ years: $2 = 26.35$ years: $3 = 36.45$ years: $4 = 46.55$					

Our age groups were as follows: 1 = 18-25 years; 2 = 26-35 years; 3 = 36-45 years; 4 = 46-55 years; 5 = 56-65 years; 6 = 66+ years

Group differences: General, 9/11 and Katrina Lapsed Donors ANOVA, gender and age controlled. Significant Findings in the "Why did you last donate" category:

- Q2: The last time I gave blood, it was because I felt it was something I could do to help in an emergency (F= 2.34, p<.05)
- Q8: I thought there was a blood shortage at the time of my last donation (F = 3.74, p < .05). Figure 1 summarizes.

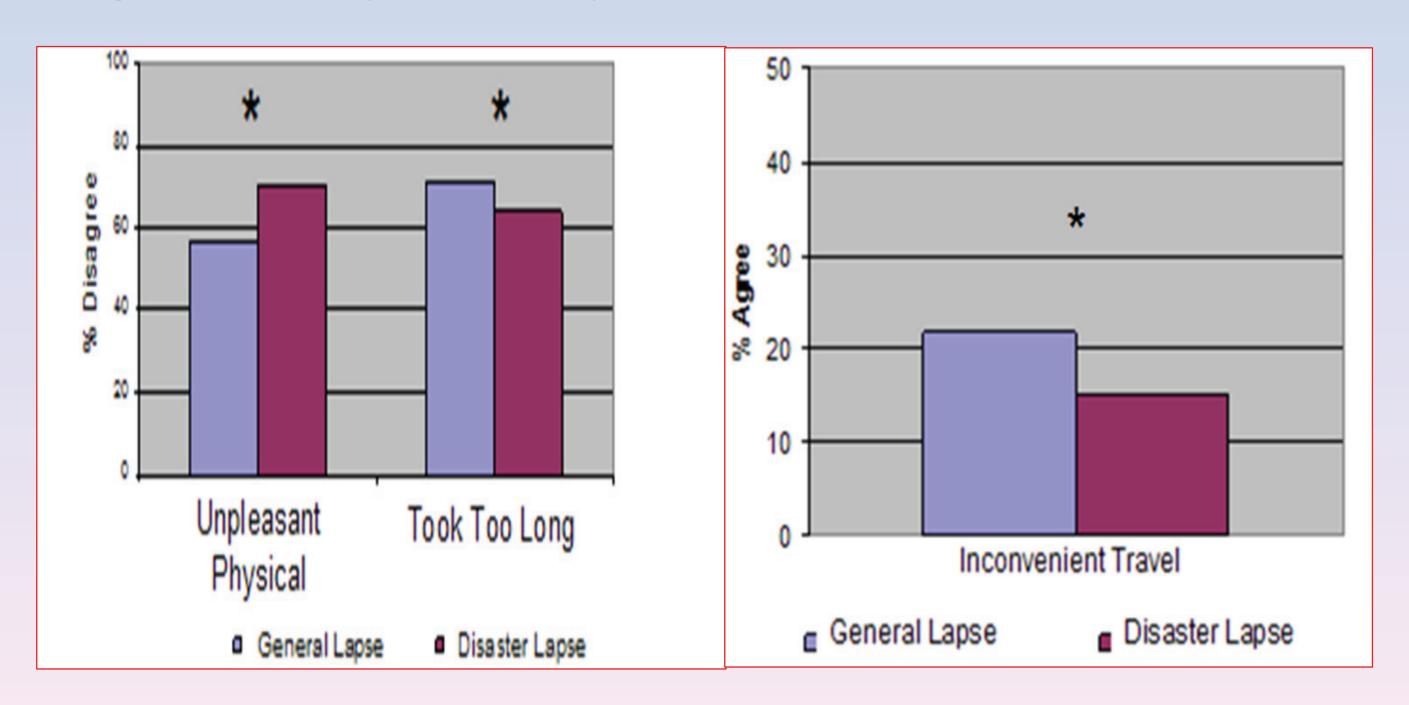
Figure 1: Why did you last donate?



Group Differences: General, collapsed Disaster Donors General Linear Model. Significant findings in the "Why haven't you donated since?" category

- •Q5 I had unpleasant physical symptoms during/after my last donation (F= 3.21, p<.05),
- •Q11The time I spent donating took too long (F= 3.29; p<.05)
- •Q14 Traveling to the donation center is not convenient for me (F= 3.14, p<.05). Results are summarized in Figure 2.

Figure 2: Why haven't you donated since?



Discussion

Perceived blood shortage was an important motivating factor for disaster donors during their last donation.

- Perceived shortage was more of a motivating factor for 9/11 donors than other lapsed donor groups. This may be due to different perceptions of the respective disasters.
- Raising awareness about routine blood shortages might encourage lapsed disaster donors to resume donation.
- Surprisingly, responses to why donation was discontinued (question 3) and what it would take to resume donation (questions 13 and 15) didn't identify blood shortage awareness as more important to disaster donors than general lapsed donors.

Disaster donors were more likely to stop donating due to prolonged donation time.

- Disaster donation circumstances responsible for an increase in donation time may be identified through further research.
- Controlling these factors might improve donor retention among disaster donors.
- Disaster donors appeared less affected by travel and unpleasant physical experience, factors shown by previous research to be important obstacles to donation.[3]

Learning Points

Obtaining significant findings for the Red Cross or catalyzing change in the community is difficult in such a short time period. However, the questions that result from the research are significant and may make impacts in unexpected ways.

Special Thanks to Carol Dembeck, Pete Nattress, Mark Fung, Jan Carney and The American Red Cross