

How to motivate plasma donors?

Insights from Flanders (and elsewhere)

Based on ...

How to motivate blood and plasma donors
in Flanders (and elsewhere)?¹

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1. Introduction

It is widely recognized that blood products should not be treated as commodities that can be bought and sold. Indeed, according to the World Health Organization (2009), the European Blood Alliance (2013), the Council of Europe (1995), and the International Society for Blood Transfusion (2015), blood and plasma donations should be voluntary and unpaid. This position is based on a mix of ethical and practical arguments against the commodification of blood products.

Introduction

- Plasma demand exceeds supply in the EU
- Reliance on imports is constrained by the need for self-sufficiency, esp., in case of
 - critical medical supplies
 - geopolitical disruptions to international trade
- The plasma shortage in the EU – combined with medical and geopolitical risks – is sometimes used to justify donor ‘payments’, based on at least three claims:
 1. payments increase supply
 2. ‘There Is No Alternative’
 3. other concerns, such as the long-term erosion of important social norms and values (e.g., solidarity & citizenship), are not valid and can thus be ignored

Testable claim 1:
payments increase supply

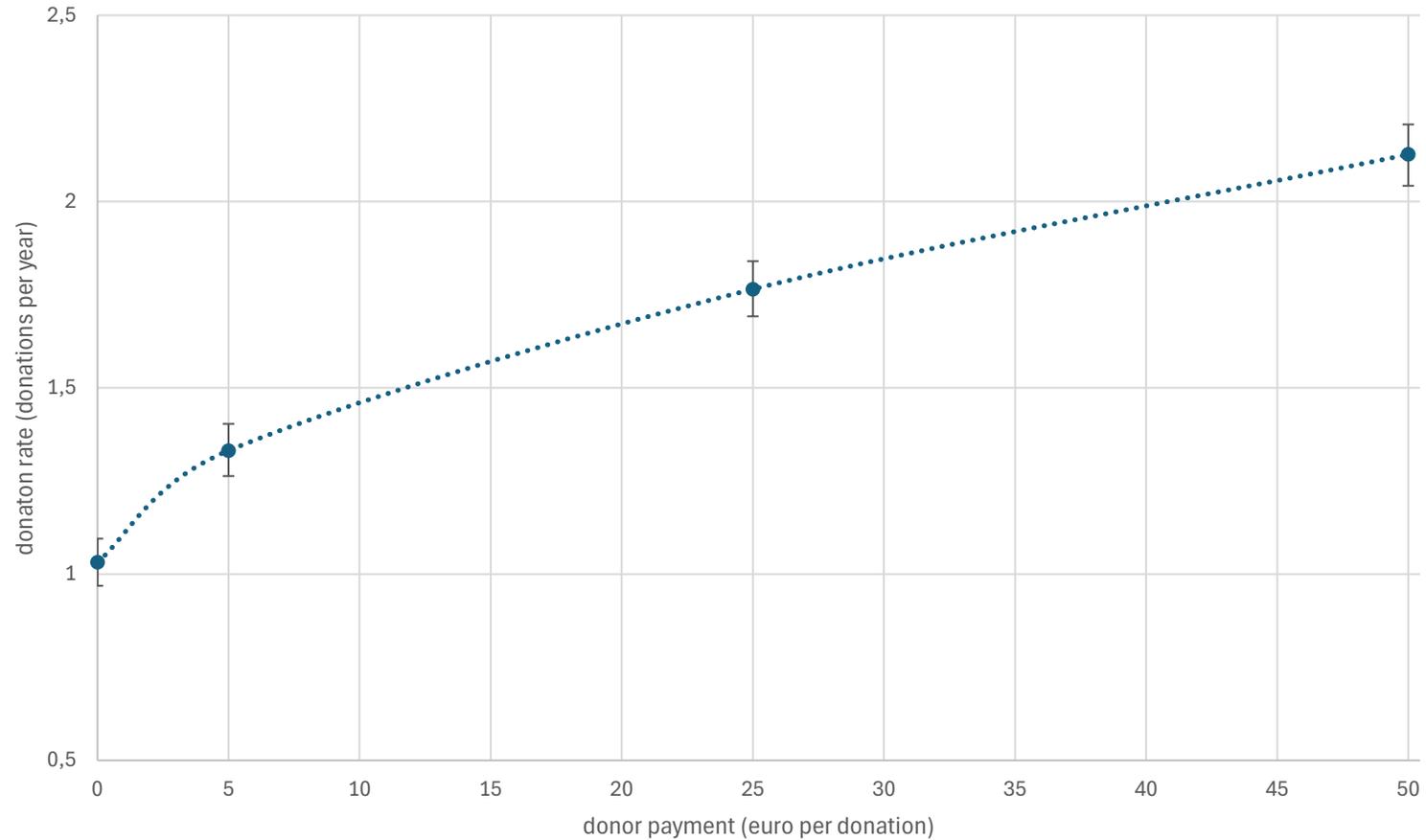
Design & evidence

- Design matters:
 - Reward **type** (cash, quasi-cash, or in-kind) may invoke different motivations
 - Reward **value** may matter too (e.g., too small & too large could backfire)
- As we cannot test the impact of **large cash** payments in Flanders, we will focus on
 - **International** evidence based on **large cash** and **quasi-cash** rewards for **blood**
 - **Flemish survey** evidence based on **large hypothetical cash** rewards for **blood**
 - **Flemish field study & experiments** with **in-kind** & **small quasi-cash** rewards for **blood & plasma**

International evidence

- Based on a meta-analysis (Bruers, 2022) of the impact of **large** (\$3.6-\$38) **cash & quasi-cash** rewards on **blood donations**
- Most estimates show a **positive effect** on blood donations
 - Combined estimate is **+0.36 extra blood units per 1000 inhabitants per \$1**
 - The resulting **marginal cost** of one extra unit of blood is **\$22–\$121**
- Two remarks:
 - **Large variation** among studies – **context & design** matter
 - **Short-term** impact **only**, no evidence on long-term impact

Flemish survey evidence: (hypothetical) large cash



Source: computations based on Flemish survey '21 (n=3000)

Flemish survey evidence: (hypothetical) large cash

- Intentions to donate **increase** with cash payment in a **concave** way
- While **stated intentions** and **real behavior** can be **different**, the survey-based marginal cost per extra donation (€22–€97) is fairly **similar** to the international evidence (\$22–\$121)

Flemish field study/experiment: small in-kind

- Summer ice cream (€0.5; June-September; DiD estimate):
 - Attendance (blood & plasma) increased with +3.4%
 - Marginal cost is €15 per extra attendance
- Valentine candy (€1; week of Valentine; randomized newsletter):
 - Attendance (blood & plasma) increased with +0.27 pp
 - Marginal cost is €12 per extra attendance

Flemish field experiment: small quasi-cash

	year	2022						2023								
	month	...	08	09	10	11	12	01	02	03	04	05	06	07	08	...
	treatment	pre			info			reward						post		
control	info about coupons	no			no			no						no		
	coupons for plasma	2			2			2						2		
information	info about coupons	no			(1, 2, 3)*			(1, 2, 3)						no		
	coupons for plasma	2			2			2						2		
reward	info about coupons	no			(1, 2, 3)**			(1, 3, 3)***						no		
	coupons for plasma	2			2			3						2		

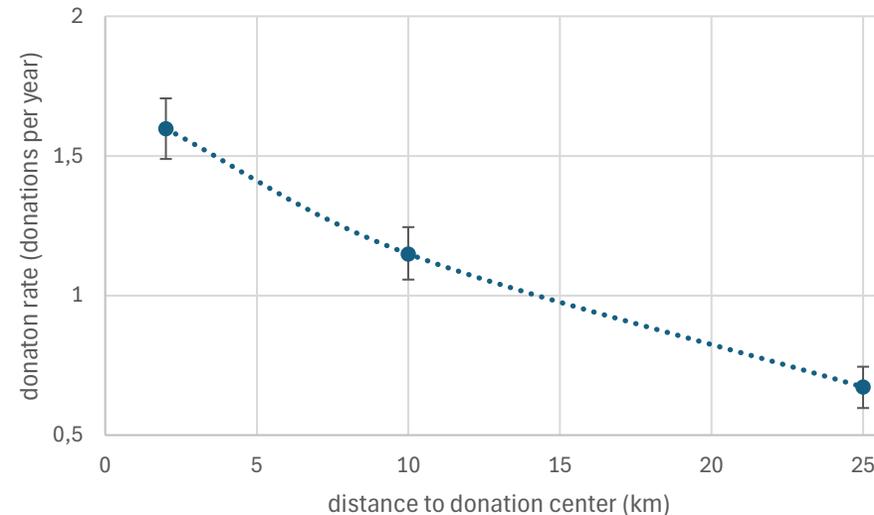
Flemish field experiment: small quasi-cash, ctd.

- Information only:
 - +4.6% plasma donations
 - effect fades out over time
- Information & extra voucher for plasma:
 - +11.7% plasma donations
 - effect strengthens over time
 - displacement = -3.3% blood donations
 - marginal cost is €10 – €16.5 per extra plasma donation

Testable claim 2: 'There Is No Alternative'

Alternative measures

- Opening more donation centres reduces **travel distance**, which in turn strongly affects **donation intentions**



- Marginal cost is \approx €7 per extra donation in case of a **new centre**

Conclusion

Conclusion

- If the EU wants to be more self-sufficient, then ‘paying for plasma’ could increase plasma donations, but
 - negative impact on blood donations
 - “There Is a Cheaper Alternative”:
 - extra donation centres (to reduce travel distance), combined with
 - low-cost marketing techniques (including in-kind & small quasi-cash rewards)
 - opened by (regulated) institutions will increase supply in a cheaper way