Overview of Cultural and Religious Concerns

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Outline

1.1 Introduction
1.2 Religious
   Jewish
   Islam
1.3 Cultural
1.4 Lesson learnt
1.5 Conclusion
Introduction

- We live in a world full of diverse cultural, religious and political believes
- Often, our believes indirectly inform our attitudes towards certain issues, how we act and make decisions in our day to day lives.
- These believes do sometime influence how we perceive certain medical care, and organ donation is a good case to exemplify this point.
Introduction

There are several documented barriers (perceptions) in the literature associated with organ donations and transplants in general;

- Religious (uncertainties about religious standpoint)
- Cultural (body need to be buried intact, not comfortable with cadaveric organs, spiritual shift/superstitious)
- Lack of knowledge on rules and regulations of organ donation
- Mistrust on the health care providers (financial gains)


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Introduction

Content analysis done from 2005-2010, Television news coverage on organ donation - barriers to becoming an organ donor

- CNBC (n=2), CNN (n=402), ABC (n=161), CBS (n=126), FOX (n=30), MSNBC (n=22)
- Identified 17 barriers

Top of the list
- Religious
- Superstitious
- Cultural

(Quick et al, 2012)
Religious perspectives

According to an article published in NY times, Nov 2016: Medicine meets religion on organ donation

– Israel has the lowest rate of people willing to contribute organs (4%), while in countries like US, rate is 30%
Religious perspectives: Jewish law

Organ donation is only permissible if, the donor’s health will not substantially suffer - *altruistic reasons*

Donation of an organ from a dead person is also permitted for the purpose of saving a life, only when it has been proven beyond doubt that there are irreversible cardiac rhythm cessation

Although the definition of ‘death’ is a bit complex, to take an organ from a dying person is being regarded as murder. Patients who are brain dead, but the lungs and hearts are maintained artificially in viable state may be regarded as ‘alive’

(Encyclopedia of Jewish Medical ethics)
Religious perspective: Jewish

• Legal Definition of death:
  Irreversible cessation of all functions of the entire brain or the irreversible cessation of circulatory and respiratory functions- legal definition
  – Arguments: A patient who is brain dead, some part of the soul remains, how and when do you establish whether the soul is still in or has it left?
  – Albert Einstein College of Medicine: Rabbis from all over the world, discussion on religious views on organ donation
    • When can an observant jew donate loved ones organs for life saving transplant operations? When does life and death begins?

Almost unanimous conclusion: Life ends when brain stems stop functioning- Life is the context of the brain connected to the body

Consultation is still necessary with the Rabbis to decide: the when, why and where of the organ donation

(Medicine meets religion in organs donation debate, NY times article, Nov 2016)
Religious Perspectives: Islam


– The main constraint cited was interpretation of the religious scriptures (76.5%)
Religious perspectives: Islam
Rady & Verheijde, 2014: the moral code in Islam and organ donation in western countries

– Highlighted Controversies of Organ donation in Islam, *Barriers to organ donation*

• Scientifically flawed medical criteria of death determination
• Invasive procedures for preserving transplantable organs
• Incomplete disclosure of information to consenting donors and families
Religious perspectives: Islam

• Rady & Verheijde, 2014:
  – Proposal to counter the controversies
    • Reinterpreting religious scriptures = harmonized definition of death (permission of organ procurement from a dying patient for altruistic reasons)
    • Re-educating faith leaders
    • Utilizing media campaigns to overcome religious barriers in Muslim communities
Perspectives on Organ donation

• Reasons for unwillingness of Libyans to donate organs (Lib J of Med. Alashek et al, 2009)
  – Concerns about religious implications
  – Not comfortable with body manipulation
  – Lack of adequate knowledge
Why is organ donation taboo for many Africans? – Cultural perspectives

• BBC News- 10\textsuperscript{th} February 2015
  – Eye bank has never been full since set up
  – Cornea are being imported from the US- Highly expensive
  – Never had any single indigenous cornea from Africa
  • Religious beliefs....I have to see Heaven
  • For those who have pledged their organs before death, families can prevent extraction of the organs
  • Ancestral traditions and beliefs- transfer of spirits from the donor to recipient
  • Special rituals may be required- barriers to organ donation
Cultural Perspectives: Africans and organ donation

Another study related to this which was done in SA, Out of 826 black SA interviewed, only 23% were Ok with giving out their cornea, compared to 69% and 70% willing to donate heart and kidney (Pike et al, 1993, S Af Med J)
Indo-canadian beliefs

• Molzahn et al
  – Trust in the health care system
  – Knowledge about organ donation
  – Reluctant to discuss death or organ donation
  – Involvement of family as important
    • The views were mostly individual and do not reflect any culture
Australian’s Aboriginal and Organ Donation

- Viewpoints of Aboriginal on organ donation:

  - Lack of trust
  - Tension between contemporary and traditional perspectives
  - Perceptions on death and dying: acceptance of fate, death routines, body wholeness
  - Note, diversity of the opinions which does not represent any specific community
Lesson learnt: How to discuss organ donation in a culturally appropriate way

Discussing Organ and Tissue Donation
Within the Aboriginal and Torres Strait Islander Community

Many Aboriginal and Torres Strait Islander people are hesitant or fearful about registering as an organ and tissue donor. Due to various cultural beliefs, the fears around the process of organ and tissue donation and transplantation can be very confronting for Aboriginal and Torres Strait Islander families.

It is important for GPs to have an understanding of Aboriginal and Torres Strait Islander people and their cultural beliefs as this knowledge is instrumental in assisting Aboriginal and Torres Strait Islander families in making decisions about becoming organ and tissue donors.

Cultural awareness in this area can also assist GPs to respond appropriately to any questions or concerns Aboriginal and Torres Strait Islander patients may have regarding organ and tissue donation and help family members faced with difficult decisions to be better prepared, should the situation arise.

Some tips for GPs on better supporting your Aboriginal and Torres Strait Islander patients during the decision making process:

- All Aboriginal and Torres Strait Islander patients should be treated as individuals, (beliefs can vary greatly)
- Spend time explaining the implications of consent
- Be sensitive to cultural beliefs around death by referring to death as passing away
- Speak slowly and clearly, and remember not to mistake silence as not understanding (Aboriginal and Torres Strait Islander people may delay in expressing a firm opinion even though they may hold one)
- Keep technical words to a minimum, or if used, they should be fully explained
- Be familiar with common Aboriginal and Torres Strait Islander patient questions and on-referral to an Aboriginal health worker where appropriate
- Explain to your patients that a transplant coming from an Aboriginal person is more likely to benefit another Aboriginal person. This is particularly important given the numbers of Aboriginal and Torres Strait Islander people currently receiving dialysis, who would benefit from an organ donation.

GPs can also contact the Perth North Medicare Local Aboriginal Health Team for assistance with dealing with Aboriginal and Torres Strait Islander patients, culturally appropriate resources, or on-referral to an Aboriginal health worker.
Phone 9201 0044 or email info@pnml.com.au.
Lesson learnt: Rady & Verheije Proposal

In Tanzania: How we can actively change the perceptions,

1. Collect empirical evidence on community perceptions towards organ donation
   - Cultural
   - Religious
   - Social
   - Resource

2. Educating healthcare workers, faith leaders, community leaders

3. Engaging stakeholders: NGOs, develop relevant policy and guidelines documents, MoH (BUY IN), Patient representatives

4. Launch ‘highly informed’ mass campaigns and education programs (TVs, Radios, social media platforms)
Conclusion

• Religious and cultural beliefs play a vital role in the formation of beliefs about organ donation

• Contribute to higher negative attitudes about organ donation, hence, lower rate of organ donors

• Opportunity to work with religious and community leaders is vital in providing education about organ transplants