




Advances in the recruitment and loyalty of blood donors: A critical outlook over the Brazilian scenario

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ABSTRACT

The growing need for more stringent methods of safe blood transfusion has engendered blood banks in Brazil. The transfusion appears, then, as an alternative path for blood-related pathologies and their components. Followed by the enforcement of altruistic principles, blood donation has become resistant within society due to its myths and prejudices. Thus, the implementation of public policies became more evident in tracing the social profile of blood donors, and the public power started regulating, supervising and controlling the rational use of blood and blood products. This way, the indices of blood donation in the Unified Health System (SUS) result from various means of interaction with both the potential donor and with the loyal donor, through digital media, school lectures, symposia, congresses and visual media. This process hitched the recruitment to the peculiarities of potential donors, mostly promoted by Health professionals. There is a need to gradually increase such measures to facilitate the donation process, adapting it to the reality of these people, to amplify the number of loyal donors.

Keywords: Hemotherapy service, Blood donors, Unified health system, Blood banks.

INTRODUCTION

Starting this last century, the scientific advances in Brazil have shown the exponential need for strongly secured blood transfusion, which provoked the engendering of blood banks¹. This pierces the scientific look due to the symbolism that surrounds it in the spiritual, legal, cultural and humanistic fields² and mainly corroborates to possibly determine the conduct of each individual in becoming a longtime donor, considering that the human being is a social construct, which enables personal experiences and thoughts tied in beliefs as well as in daily deconstruction about pre-established ideas without full knowledge of cause³.

With the law nº 1.075/50, Brazil started adopting the altruistic principles for blood donation, keeping in mind that blood banks offered remuneration. This, however, favored low purchasing power and marginalized individuals to show up for donation, and a high number of infectious diseases were noticed in the people receiving the blood^{1,4}. The creation of the state-owned program Pro-Blood with the conjunction

strategy of the Health Ministry and Social Security entailed its effective entry into the Unified Health System (SUS)⁵.

Several decrees were established to assure the blood receptor, the proper security system for transfusion, starting from hemotherapeutic actions⁶. The blood donation indexes in the Unified Health System (SUS) are marked by several means of interaction both with the potential donor and the loyal one, through social media, social networks, mobile apps, phone calls and emails⁷.

It is up to the management of public health providers in Brazil to establish new continuous attraction of blood donors goals because the population demands and the emergence of new blood-related pathologies fairly increased during the last few years⁸.

On the other hand, what is the profile of blood donors in Brazil? Today, the country faces the challenge of ensuring good, stable and safe blood distribution, through the capture of new donors and the loyalty of those who do it⁹.

The National Agency of Sanitary Surveillance (Anvisa) determines that, to be a trustworthy blood donor, one must do at least two donations

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every year. However, Brazilian culture has shown, through time, resistance to voluntary trustworthy donation due to the myths, prejudices and taboos ingrained in society¹⁰.

For effective loyalty, it is of utmost importance to understand the social profile of the donor, keeping in mind that the capture process is interwoven with the peculiarities of potential donors - since, currently, healthcare professionals need to build different and strategic ways to instigate these potential donors to become loyal, meaning sparking personal interest with regular donations to blood banks¹. According to Anvisa, this profile can be traced through the Brazilian regions, based on gender, age, race, civil and schooling status¹¹. Now, the donors can be classified between replacement donors and spontaneous volunteers, being this last one more prevalent¹².

EVOLUTION OF PUBLIC POLICIES FOR BLOOD DONATION

During 1980, there were huge advances in Brazil's science, mainly because of the exponential need for blood transfusion, which triggered a more solid process to the beginning stages of blood banks, starting off as private - which promoted reflection between the scientific community for the creation of a medical specialty turned to this new reality, which was named hemotherapy¹.

It can also be seen that, from its prime, blood runs through the scientific prism due to the symbolism that surrounds it in the spiritual, legal, cultural and humanistic fields². This mainly corroborates to possibly determine the behavior of the individual in being a long time donor, given that the human being is a social construct, which provides its own experiences and thoughts both rooted in beliefs and in daily deconstructions of preconceived thoughts, which favors the construction of their behavior, traditions, values, personality and emotions³. The human being builds, throughout their life, a cognitive structure of specific and global thoughts, called core beliefs, which becomes the driving force of their behavior¹³. These beliefs are so rooted in their experience with the external world that they foment automatic thoughts, which influence decision-making

and habits in a given situation, whether positive or negative, for individual shaping¹⁴.

Thus, blood transfusion appears as an alternative to treat pathologies related to blood and its components, which has provided decades of optimization of this process, as well as security measures, through both public and private policies¹⁵. With the Law No. 1,075/50, Brazil began to adopt altruistic principles for blood donation, considering that blood banks provided remuneration for those who did it; however, this favored the appearance of people marginalized, low-income people during the donation, and therefore, a large number of infectious diseases were noticed in individuals who received the blood, which prompted social condemnation many donation centers^{1,4}.

During the 1980s still, the Sanitary Reform was essential for the development and application of public policies for safety during blood transfusions; that is, the politicization of blood became an agenda in national policy to provide, or not, this right to the citizens, but the people's struggles reverberated in notorious achievements for that moment and posterity⁴. This was pushed, above all, after the creation of the state program Pró-Sangue (Pro-Blood) with the strategic conjunction of both the Ministry of Health and the Social Security, which led to the effective entry of this plan into the Unified Health System (SUS), based on notable investments in this area⁵.

The Federal Constitution of 1988 establishes that the public power must regularize, supervise and control the rational use of blood products and components, which made the commercialization of blood prohibited. In this direction, several decrees and laws were established to assure the blood recipient, principally, the proper transfusional safety system, based on hemotherapeutic actions⁶.

BLOOD DONATION IN BRAZIL'S UNIFIED HEALTH SYSTEM

Today, blood donation rates in the Unified Health System (SUS) are measured by various means of interaction with both the potential and the loyal donors through digital media, social networks, mobile apps, phone calls and E-mail⁷.

The internet currently has one of the greatest, never seen before reaches, which places the intention of creating campaigns and images that are based on persuading the reader at the center of attention of companies and communication institutions¹⁶. An app developed in Brazil provides the donor user with information on when the blood bank needs to replenish the stock, the break between donations, and user location - increasing loyalty more and more¹⁷.

However, has this been enough to ensure the permanence of the SUS loyal donor for a long time? It ought to be noted that the Ministry of Health's campaigns should, mainly, reinforce the strict criteria of transfusion safety and the quality of care given to the donor, since the person, even having donated several times before, always makes a self-analysis about the social commitment of the donation, as well as to that blood's recipient and the possible risks. In addition, establishing better donation time, adapting the snacks offered according to the season, encouraging each person in a particular way about the benefits of that act and, finally, motivating them to return, which requires a lot of skill from the team of professionals in emotion reflection and activation. Basically, an effective psychological process that warrants the donor's initiative¹⁸.

Therefore, it is up to the management of public health services in Brazil to establish new goals of continuous appeal to blood donors, since the population's demand and the emergence of new blood-related pathologies have grown significantly in recent years, which always requires new adaptations in the supply of quality health care, primarily based on the Unified Health System's doctrinal principles and with the action of the three governmental policy spheres; county, state and federal^{19,8}.

BLOOD DONORS SOCIAL PROFILE IN BRAZIL

In a worldwide context, blood donation represents a serious problem because, so far, any substance that, in its universality, can replace blood tissue is unknown⁷. According to a study carried out in Ethiopia, it is known that the

population's knowledge about blood donation is considerably high²⁰. However, this practice's exercise is considered to be minimal. Inserted in this context, Brazil faces a similar challenge, that is, it presents great difficulties in guaranteeing a good blood distribution, in a stable and safe way, through the attraction of new donors and the loyalty of those who already do it⁹. This is because, over the years, the total representative number of donors in relation to the Brazilian population has been below 3%¹¹.

Although the demand for first-time blood donors becomes progressively larger, the presence of repetition donors, meaning donors faithful to this practice, proves to be of paramount importance to guarantee the stability of blood supply bags to blood centers, superior security cover to the receiver and reduction of expenses at the time of collection²¹. It is worth noting that, in conjunction with the National Health Surveillance Agency (Anvisa), in order for a blood donor to be considered trustworthy, they must make at least two donations a year. However, Brazilian culture has shown itself, over time, to be resistant to voluntary and faithful donation due to ingrained myths, prejudices and taboos - which are widely observed in society¹⁰.

Healthy development, for the individual to become trustworthy for donations, requires a new critical paradigm about reality, in order to promote altruism and a civil and social commitment (since there is no bonus system as a monetary reward), in front of the fundamental guarantee of a rigid and effective control system for blood the collection and analysis, which will provide a change in the profile of today's donor in Brazil¹².

In order to obtain an effective result in donor loyalty, it is of cardinal importance to understand the donor's social profile, the capture process is interwoven with the peculiarities of potential donors - since, currently, healthcare professionals need to build different and strategic ways to instigate these potential donors to become loyal, meaning sparking personal interest with regular donations to blood banks¹. Today, campaigns with celebrities or people of important public opinion are done to attract attention in specific places in cities²², although,

often, trust in the institution and the donation method can determine whether the act will be carried out or not²¹.

According to Anvisa, the donor's profile can be traced by the Brazilian region, based on sex, age group, ethnicity, marital status and education. In the North, the prevalence of the donor profile is male, with approximately 76%, and age group from 30 to 39 years old (35%), single (47.5%), mixed race (74%) and with a high school degree (49.5%). In the northeast region, the male donor also stands out (71%), aged between 30 and 39 years old (30%), single (46%), mixed (46%) and with a high school degree (43%). In the south, males (64%), 30 to 39 years old (27%), single (44%), white (74%) and with a high school degree (38%). In the Southeast, males (61%), 30 to 39 years old (27%), single (51.6%), white (54%) and with a high school degree (38%). Finally, in the Midwest, most donors are male as well, but with the highest percentage among the regions of Brazil, representing 76%. The age group remains between 30 and 39 years old (29%), but, in the marital status discretion, single reaches 51.9%, being again the highest in the country. Ethnicity represented a percentage of almost 59% (mixed); however, it was the region with the lowest percentage of schooling, only 31.7% (with a high school degree)¹¹.

People who donate blood can also be classified as spontaneous voluntary donors or replacement donors. The latter represents 30% of cases and has the intent to donate blood due to a specific occasion, such as a family member or friend who needs blood donation at that moment, because of a trauma or even for chronic disease treatment. So then, when the family member is discharged from the hospital or when the need to receive blood ceases to exist, the replacement donor can break their loyalty, which requires continuous encouragement from health-care professionals on donation moments¹². Many countries use this type of donor a lot as a form of stock replacement, but occasionally it leads to coercing individuals to do it, which causes significant emotional conflict between peers and a waiver of state responsibility from the public health system²³.

In another scenario, the spontaneous voluntary donor (whose percentage is approximately 70%) donates their blood without necessarily being linked to a spiritual, family or logical belief, but rather, by intrinsic moral and ethical values, with the anonymous replacement of blood bags stocks²².

CONCLUSION

The donor's behavior over time is determined by the sum of factors extrinsic to the scientific prism, such as spiritual, legal, cultural and humanistic, but that has been positively influenced in recent years by new technologies, which have proven to be essential regarding the population's amplified interest in making blood donation faithfully.

Moreover, it is clear that blood donors' social profile in Brazil is basically made up of male individuals, aged between 30 and 39 years, single, mixed and with a high school degree. Although the number of donors in the country is below the ideal to ensure the maintenance of blood stocks at idealistic levels to meet the necessary demand and guarantee the recipient's safety, most of these subjects perform the donation guided by ethical and moral values.

Therefore, the hemotherapy centers, allied with the State, and with the support of health students and other citizens interested in multiplying the number of blood donors in the country, should intensify the campaigns in favor of this gesture in order to awaken the interest of individuals who do not fit that profile, namely, women, married people and individuals of other ethnicities, by breaking the myths, taboos and prejudices widespread between the population; and younger individuals with a lower level of education. This is based on awareness-raising actions in school and/or work environments, in addition, on the part of the State, to massively invest in the country's basic education in order to ensure that its population has greater contact throughout their lives with campaigns in favor of blood donation and, thus, are more likely to fit into the blood donors' social profile, causing it to expand.

Finally, hemotherapy centers' investment in technologies that bring the donor closer to the reality experienced in these centers becomes valid, in regards to blood stocks, in order to facilitate and make the donation process more flexible, adapting it to these people's reality, and, therefore, amplifying the number of loyal individuals.

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