Religious beliefs and attitudes to organ donation

Research Summary

This research set out to explore the relationship between religious beliefs and organ donation, with a particular emphasis on presumed consent.

The viewpoint of each religion was explored, before reviewing international research investigating the relationship between religion and organ donation across different consent systems. Findings from a small-scale survey of Christians in Wales are also presented, which aimed to address an information gap in engagement work being carried out with faith groups and BME communities across Wales.

The research sheds light on the complex interplay between religion, culture and ethnicity in forming attitudes to organ donation.

Religion and organ donation

In theory, all the major religions in Wales (Christianity, Islam, Hinduism, Sikhism, Buddhism and Judaism) support organ donation, although views within Islam and Judaism remain divided, with particular religious tenets about how the dead body should be treated and contention around brain death being the major issues. The latter concern may also be present within particular Buddhist traditions and among some Catholic theologians.

Religion and presumed consent

Little is known about the views of the major religions on presumed consent, although the limited evidence from faith leaders suggests that views may be unfavourable due to the perception that the legislation undermines individual choice. Furthermore, for Christian faith leaders in particular there is also the belief that the virtue of gift giving intrinsic to the act of organ donation is undermined by this legislation.
Christianity and organ donation

There is little in the way of conclusive evidence regarding the role of Christianity in organ donation. The predominantly Christian countries of Europe and the United States tend to have well-established transplantation systems, higher rates of donation and populations with positive attitudes towards donation. Evidence suggests that the Christian faith may not play much of a role in willingness to donate, with it being viewed as more of an individual matter.

In terms of what is known about the role of the Christian faith, research suggests that it may be strength of religious belief (or perhaps conservativeness of belief) rather than religious teachings that act as barriers to donation. Research has also suggested that interpretation of one’s relationship with God is more likely to be cited as a barrier to donation than interpretation of religious teachings.

Beliefs about the need for bodily integrity, or organ donation interfering with traditional funeral arrangements, were also found to be significant barriers to donation.

These barriers may be more significant among Black Africans and Black Caribbeans than among Whites (in UK and United States), with bodily integrity being a particularly significant barrier, transcending religious beliefs.

The influence of subjective norms (the perceived beliefs of those closest to you) on BME groups also means that religious beliefs may have an indirect influence on donation decisions. For example, perceiving parents to oppose donation, possibly on religious or cultural grounds, acts as a barrier for an individual who in theory has a positive attitude towards donation.

Christianity and presumed consent

Limited research among UK Christian faith representatives suggests attitudes to presumed consent may be unfavourable due to the legislation being perceived to undermine the ‘gift of life’ virtue and individual choice.

A small-scale survey of Christians in Wales, conducted as part of this research, found the majority of respondents in favour of presumed consent, believing that it will not undermine either individual choice or the gift of life virtue. However, those against the legislative change were opposed to it on grounds that they perceive the legislation as undermining individual choice, giving the government too much control.
Those who already experience multiple barriers to donation in general may be less likely to have favourable attitudes to such legislation.

**Islam and organ donation**

Whilst the majority of Muslim countries have sanctioned both living and deceased organ donation, opinion remains divided among scholars, largely due to differences in opinion about the definition of death.

Research suggests that questions of religious permissibility act as a major barrier to donation among Muslims in both Muslim and non-Muslim countries, despite fatwas approving organ donation.

Perceived impermissibility was more commonly expressed in research among South Asians. This may be due to the majority of Muslims in the UK being of Indo-Pakistani descent where scholars tend to hold more conservative attitudes towards donation.

Research in the UK found little knowledge of existing fatwas sanctioning donation, suggesting that their influence may be limited.

Religious texts and the advice from the local mosque were found to be the most influential in decisions about donation; followed by the influence of family.

Perceived religious impermissibility was grounded in interpretations of religious texts and centred on the need for bodily integrity and for the burial to be carried out as quickly as possible.

Barriers may be difficult to shift due to the influence of religious texts in guiding decisions about organ donation.

The limited research among faith leaders found similar views to the wider population. Faith representatives have argued that more needs to be done to ensure knowledge of organ donation permissibility filters down to the grassroots level.

**Islam and presumed consent**

Little is known on this, but research in the UK found faith representatives to be supportive of organ donation but opposed to presumed consent on ethical grounds, due to the perception it undermines individual choice.

Muslims in Singapore have been included in the Human Organ Transplant Act (HOTA) since 2008, following campaigns to be included in its presumed consent legislation. Prior to this, Singapore’s priority system put
Malay Muslims at a significant disadvantage due to non-pledgers being accorded a lower priority on the donor waiting list. However, improvement in donation rates from this group since their inclusion has so far been small. No research was found exploring public attitudes to organ donation and presumed consent in Singapore.

Hinduism, Sikhism and organ donation

There is nothing within Hinduism or Sikhism prohibiting organ donation.

Barriers to donation in India – which has large Hindu and Sikh populations – have been attributed to wider factors, including a lack of knowledge about donation and brain death, poor transplantation and public healthcare infrastructure and cultural acceptance of the illegal organ trade, making living donation the norm.

Research found barriers to donation were likely to be related to bodily integrity and family refusal rather than issues of religious permissibility, suggesting that concerns around donation are more cultural rather than religious in nature.

Research among Hindus and Sikhs in the UK supports this, with bodily integrity and family refusal being more likely to be cited as barriers than religious impermissibility.

However, questions regarding religious permissibility were still raised, albeit slightly more so among Hindus.

The consent of the family was identified as important for both Hindus and Sikhs, but was found to be particularly significant for Hindus, with deference to elders being commonly cited as a reason for unwillingness to donate.

Hinduism, Sikhism and presumed consent

The little research available among UK Hindu faith representatives suggests this consent system is not preferred due to the belief that it undermines individual choice.

Buddhism and organ donation

There is nothing within Buddhism prohibiting organ donation, although issues concerning the definition of death may be apparent within some traditions.

The predominantly Buddhist countries of south-east Asia have low donation rates, with limited transplantation infrastructure and public healthcare in general. However, huge cultural barriers to donation also exist due to a lack of acceptance of brain death, which is still not legally recognised in China, and was found to be a major barrier to donation in research conducted in Japan.
Cultural views associated with Confucianism such as the need for bodily integrity due to filial piety (the virtue of respect for one’s parents and ancestors), was a common barrier to willingness to donate in research conducted in China, despite there being positive attitudes towards donation.

These beliefs were also found to be barriers in research conducted among individuals of Chinese descent living elsewhere.

**Buddhism and presumed consent**

The little research available among UK Buddhist faith representatives suggests this consent system is not preferred due to the belief that it undermines individual choice.

**Judaism and organ donation**

Views on organ donation remain divided within Judaism, with some opposing donation due to beliefs about how the dead body should be treated, and differing definitions of death. Low organ donation rates in Israel have been attributed to the lack of acceptance of brain death.

Research shows that the belief that organ donation is prohibited under Judaism due to the Halachic definition of death acts as a significant barrier to donation.

Contention around brain death was also found to negatively impact on donation rates due to reluctance among medical staff in Israel to discuss donor related topics with families, particularly brain death, thereby limiting donation opportunities.

Research conducted elsewhere also found perceived religious prohibition and beliefs about the need for bodily integrity being cited as the reasons behind unwillingness to donate.

**Judaism and presumed consent**

Recent ministerial debates in Israel considering potential legislation to introduce presumed consent resulted in the Bill being rejected.

The little research available among UK Jewish faith representatives suggests this consent system is not preferred due to the belief that it undermines individual choice.

**Other barriers to organ donation**

Given that organ donation rates among Black and Minority Ethnic (BME) groups tend to be lower than for the general population, the review also identified a number of other barriers found to be significant among BME groups in the UK regardless of religious belief, including:
- Lack of understanding and fear about the transplantation process in general.
- Sensitivity or taboo surrounding the matter.
- Medical mistrust.

It is important that these barriers are addressed if communication strategies aim to tackle the current disadvantage BME groups experience in relation to organ donation, with BME groups being both more likely to need an organ transplant and less likely to be represented on the organ donor register.

**Recommendations for engaging with different faith groups**

In light of the findings, this review has helped to identify a number of messages and methods for engaging with different faith groups, for example:

- Providing information about the transplantation process to allay misconceptions with regard to bodily mutilation and interference with traditional burial processes.
- Engagement with faith leaders and grassroots networks among faith and

BME groups where their influence is important, or where there are high levels of medical mistrust. For example, the role of faith leaders could be used in Muslim communities to raise awareness regarding Islam’s stance on organ donation.

- Engagement with faith leaders is also important where they too have low knowledge of the organ donation process.
- A peer-led approach may be effective in communities where family relations are a particularly important source for gaining culturally sensitive health information.

**Current evidence gaps**

- Finally, this review has identified evidence gaps where further research could add value to communication and engagement strategies. These include:
  - The degree to which religious leaders’ views about organ donation and presumed consent influences or reflects that of lay followers. The survey of Christians living in Wales included in this report provides a small insight into this but more research may be useful.
More research with Muslims of different ethnicities would be helpful in order to disentangle cultural and religious beliefs.

Of the major religions, understanding attitudes to presumed consent among Buddhists, Hindus and Sikhs is particularly lacking.

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