

ESSAY

An intercultural and semi-confessional reflection on blood donation

As health care workers, we, the authors, identified here as Younger Sarah and Older Sarah, know how important safe blood products are, so we donate here in Canada. Recently Younger Sarah went to donate in Australia. (Sarah was in Australia and went to give blood. She did not actually go to Australia for the purpose of donating blood. That would be silly.) As we Sarahs were talking about our experiences, we came to appreciate that there are emotional nuances and intercultural differences between Canadian and Australian blood donation. We share our observations now to enrich understanding and — we hope — to motivate people to donate.

The chosen one

Feeling wanted or, better yet, needed is a really great motivator. As an O-negative donor, Older Sarah feels especially needed as she is periodically reminded by phone at supper time by the Canadian Blood Services how important O-negative blood is. At social gatherings, she has been known to drop the fact that “O-negs” — as she claims they like to be called — can donate blood without a booked appointment. She compares it to having the Fastpass at Disneyworld. (She is, of course, rarely invited anywhere a second time.)

Despite her very smart A+ blood, Younger Sarah does not feel quite as special. Moreover, as a “slow donor,” she feels somewhat judged for having blood that does not seem to want to come out quickly. (For yet-to-be donors, here is a fun fact: Donations are timed. You can use the data to be competitive and can talk about your personal best and soon be every bit as interesting as your friends who discuss their marathon times!)

The religious experience

Blood donation, especially in Canada, is a quasi-religious experience. For those who have not donated (and, shame on you, by the way, unless you have a good reason) we outline the ritual of confession in the Church of Donation.

After a quick check of your identity and a hemoglobin test by fingerprick (think of it as the equivalent of lighting a candle), you are sent to complete a printed questionnaire in privacy at a little desk. The warm-up questions are easy — things like whether you are feeling well, have taken any medications recently or travelled out of the country. The questions then become a bit more personal, including things such as



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whether you’ve had a recent tattoo or electrolysis, but they stay out of the bedroom, if you know what we mean.

The experience starts to get a little more intense when you physically move into a “private” area (padded partitions arranged to form a cubicle), where you sit face-to-face with a nurse and are asked a series of increasingly personal and syntactically complex questions. It is basically confession without the kneeling. We feel it would be faster, in fact, if we could use the Catholic approach: “Nurse, it has been 12 weeks since my last donation. In that time I have not had sex with anyone new, taken drugs, had cancer, or received a dural graft. I did fail to wash my hands after handling hamburger, but that was a month ago and I feel fine.”

We Sarahs have wondered why in Canada the questions on drug use and sexual activity aren’t part of the written questionnaire, as they are in Australia. Is the idea that the interview will be a better method of detection? Are Canadian blood service nurses trained in identifying liars, like customs agents? (By this we mean that the nurses are like the customs agents, not that we

think customs agents are liars. We have enormous respect for customs agents and would, moreover, never lie to one. Ever.) Are they watching for tell-tale body language? Does scratching one's nose in a certain manner give away that one might have been born in or might have lived in Africa since 1977?

We aren't convinced that the nurses even look at the donors. Frankly, the confessional nurses seem bored. The old hands recite the questions, like experienced waiters rifling off the night's specials, but without any vocal inflection. In this setting the sex doesn't sound too exciting. Maybe the nurses should suggest wine pairings.

Also, why do we have to go through *all* the questions every single time, even though it may have only been a couple of months since the last donation? Some things can't have changed. Our grandmothers still were not born in Central America.

A moment for self-reflection

The questions posed by both Australian and Canadian blood donation organizations give occasion for self-reflection. Older Sarah varies between a holier-than-thou attitude ("Of course I have not paid for sex. I am hematologically pure!") and puzzlement ("Am I living life to its fullest?") Older Sarah notes that in Canada she's asked if she has had sex with someone born in Africa after 1977, which is actually kind of flattering — at least the Canadian Blood Services thinks she is attractive enough to hook up with a man 23 years her junior.

Younger Sarah, on the other hand, has felt a bit pathetic and judged while attempting to donate blood. In Australia (where, by the way, the nurses are referred to as "sister," which makes the event even more confessional) Younger Sarah had a moment that called into question both her character and her desirability.

"I bring your attention to item 10. You indicate that you have not had sex with a foreigner in 12 months. This question is meant for Australians. So, by answering this question, you are saying that you have not had sex with a Canadian in the past 12 months. You told me that you came to Australia only seven weeks ago, so this must be a lie." With her cheeks blazing crimson Younger Sarah stuck by her original answer.

"No, I have not had sex with a foreigner — not even a Canadian one." A look of pity crossed the sister's face. Younger Sarah was tempted to defend herself by explaining her "quality over quantity" approach to men. In the end, she had too much discretion. (We see an opportunity here. We would like to suggest that blood services start offering matchmaking to single donors. This would work as an incentive and, with a little planning, could help breed the next generation of most-needed blood types.)

Questions above and below the equator

Comparing the questions asked by Canadians with those asked by Australians reveals differences between our styles and our disease worries (Box 1). Australia has a cool question about abattoir work and asks about a disease we Sarahs had never even heard of: fatal familial insomnia. (We are pretty sure it doesn't end well, what with the "fatal" part, and all.) In Canada, on the other hand, we are very worried about monkey body fluids. Blood donors in Canada need to answer this ques-

tion: *Have you, in your past or present job, taken care of or handled monkeys or their body fluids?* We have wondered: Who are these professional monkey handlers? Are there a lot of Canadians donating who are monkey laboratory techs, monkey trainers, The Man with the Big Yellow Hat? And what about people who handle monkey body fluids recreationally? Are they not of concern? We suppose at one level it makes sense. The Canadian questions suggest that sex for money is hematologically riskier than sex for fun (or social status or security or revenge on that "friend" who slept with your last boyfriend, but we digress.) We can accept that monkey body fluid handling for money could take one down a more sordid path, and the question will screen out the all-too-common monkey escort service provider. Speaking of monkeys, it is curious to think about where the degrees of separation stop. They care if you had sex with a man who had sex with a man, and they care if you are yourself a professional monkey body fluid handler, but not if you had sex with somebody who is a professional monkey body fluid handler. Unless you paid him.

There is also an interesting intercultural difference in the questioning that explores for bisexuality. In Canada we ask female donors: *In the last 12 months, have you had sex with a man who had sex, even one time since 1977 with another man?* Clearly the message is: Tell us only if you KNOW he did. No surmising. In Australia, there is room for more judgment, as the question is: *Have you had sexual activity with a male who you think might be bisexual?* We picture the Australian Sheilas pondering before answering. "He did seem terribly interested in my David Beckham calendar."

The greater good

In spite of the strangeness, the redundancy, and the judgement that come with blood donation, in the end it is all worth it. Why? In both countries you get cookies and juice. For being a first time donor in Australia, Younger Sarah also received a first aid kit and a shell with mother of pearl. And — blood donation burns calories! Really! We found on the Internet that donating blood burns about 650 calories. So you can eat the cookies and still lose weight doing this.

Oh yeah — you will also probably save somebody's life.

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Box 1: Sources

- Australian Red Cross Blood Service Questionnaire: www.donateblood.com.au/files/images/Donor%20Questionnaire%20sample%20July%202010.pdf
- Canadian Blood Services Donor Questionnaire: [www.blood.ca/CentreApps/Internet/UW_V502_Main_Engine.nsf/resources/Can-I-Donate/\\$file/ROD_2010-01-27.pdf](http://www.blood.ca/CentreApps/Internet/UW_V502_Main_Engine.nsf/resources/Can-I-Donate/$file/ROD_2010-01-27.pdf)