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Fairness Judgments of the Allocation of Organs Findings of a Factorial Survey

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Agenda

- 1. Introduction
- 2. Theoretical implications
- 3. Data collection
- 4. Respondent and vignette sample
- 5. Results
- 6. Conclusion
- 7. Discussion

1. Introduction

- Distinction between *living donor* and *donation after death* (so called "cadaver donor")
- Statistics of *Eurotransplant* (Benelux, Austria, Germany, Slovenia, Croatia) for the year 2006:
 - 904 persons waiting for a donor *heart* 539 heart transplantations
 - 11,069 persons waiting for a donor kidney 3,239 kidney transplantations
- National coordination of organ transplantation in Switzerland (Swisstransplant)
- Lack of organs destined for organ procurement
- Legal distinction between presumed consent (Austria, Belgium) und extended consent solution (Switzerland, Germany)

1. Introduction

distributive justice norms:

Brink et al. (2006): allocation based on

- ➢ Exchange
- Need
- Equality/equal chances

Bayerl/Mielck (2006):

- Egalitarian perspective
- Individualistic perspective

Rawls (2003):

- Justice as fairness
- Fair rules should be accepted by the population

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1. Introduction

Implications:

- It is impossible to realize the egalitarian principle because of the lack of available organ donors.
- The problem of organ allocation can be seen as a moral dilemma (Ohlsson 1993).

Questions:

- Which fairness norms are being preferred by laypersons?
- Do the evaluation strategies of laypersons differ?
- Which personal characteristics determine a privileged position on the waitlist of organ recipients?

2. Theoretical Implications

Fairness norms of rational actors:

- Actors adjudicate organ procurement in a rational way in terms of polity economics (Elsen 1998):
 - Reproduction and care (sex, marital status, children)
 - Contribution to the national economy (employment)
 - Optimal use of resources
 (age, acuteness, chance of success)
- Homophilia and ,,taste for discrimination" (Becker 1957)
- Helpfulness depending on sex and age

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3. Data collection

Dimension 1: gender of organ recipient
(1) Mr.
(2) Mrs. (if married) / Ms. Smith is ...

Dimension 2: age of organ recipient (1) 25 (2) 40 years old, ... (3) 55

Dimension 3: marital status of organ recipient

(1) married

(2) close-partnered and has ...

(3) single

Dimension 4: children of organ recipient

(1) no children.

(2) children living in the same household.

(3) children who do not live in the same household.

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3. Data collection

Dimension 5: occupation of organ recipient He/she

(1) has been employed for a few years.

(2) has not been employed for a few years.

Dimension 6: acuteness

Because of his/her

(1) serious heart disease he/she is being treated in a hospital.

(2) critical heart disease he/she is being treated in an intensive care unit.

Dimension 7: probability of success

This patient has a

(1) 50 %

(2) 90 %

chance of surviving the first year after transplantation.

3. Data collection

Please waitlist the following 10 fictive persons to receive an organ.

<u>Mrs.</u> White is <u>25</u> years old, is <u>married</u> and has <u>no children</u>. She has been <u>employed</u> for a few years. Because of her <u>serious heart disease she is being treated in a hospital</u>. This patient has a <u>90%</u> chance of surviving the first year after transplantation.

| 1 – 10 | 11 – 20 | 21 - 30 | 31 – 40 | 41 – 50 | 51 - 60 | 61 – 70 | 71 – 80 | 81 - 90 | 91 –100 |
|--------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| | | | | | | | | | |

➤ 7 vignette dimensions

(Cartesian product of $432 = 2 \times 3 \times 3 \times 3 \times 2 \times 2 \times 2$)

- ➤ random sample of 120 vignettes (12 sets, 10 vignettes each)
- reorganization to avoid order effects

3. Data collection

- > questionnaire with two parts:
 - each respondent 10 vignettes
 - personal questions
- ➤ use of an example vignette
- > pretest at full length (n=60)
- respondents of two student classes (sociology and economics)

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4. Respondent and vignette sample

Table 2. The respondent sample

| Variable | Observations | Mean | Std. Dev. | Min | Max |
|--------------------------|--------------|-------|-----------|-----|-----|
| R_FEMALE | 200 | .41 | .493 | 0 | 1 |
| R_AGE | 200 | 23.92 | 4.283 | 19 | 66 |
| R_ECON ^a | 200 | .69 | .465 | 0 | 1 |
| R_PARTNERED ^b | 200 | .59 | .494 | 0 | 1 |
| R_HEALTH ^c | 199 | .61 | .489 | 0 | 1 |
| R_TOPIC ^d | 200 | .23 | .422 | 0 | 1 |
| R_DON_CARD | 200 | .12 | .325 | 0 | 1 |
| R_PATTERN ^e | 200 | .41 | .492 | 0 | 1 |

^a Ref. subject Sociology

^b Ref. single

^c personal general health (1=very good/excellent)

^d Ref. not engaged with the topic organ donation

^e Ref. did not keep in mind the example (Ms. Pattern)

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4. Respondent and vignette sample

Table 1. The vignette sample

| Variable | Observations | Mean | Std. Dev. | Min | Max |
|----------------------------|--------------|-------|-----------|-----|-----|
| V_FEMALE | 2000 | .423 | .494 | 0 | 1 |
| V_AGE40 ^a | 2000 | .384 | .486 | 0 | 1 |
| V_AGE55 ^a | 2000 | .315 | .464 | 0 | 1 |
| V_PARTNERED ^b | 2000 | .293 | .455 | 0 | 1 |
| V_MARRIED ^b | 2000 | .368 | .482 | 0 | 1 |
| V_CHILDREN ^c | 2000 | .335 | .472 | 0 | 1 |
| V_CHILDREN_HH ^c | 2000 | .283 | .450 | 0 | 1 |
| V_{JOB}^{d} | 2000 | .529 | .499 | 0 | 1 |
| V_ACUTENESS | 2000 | .454 | .498 | 0 | 1 |
| V_PROB90 ^e | 2000 | .464 | .499 | 0 | 1 |
| WAITLIST-NO | 1995 | 3.908 | 2.244 | 1 | 10 |

^a Ref. age 25 ^b Ref. single ^d Ref. no job

^e Ref. 50% chance of surviving the first year

^c Ref. no children

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5. Results

| Model | RIO Coeff. (T-ratio) | RIV _{all} Coeff. (T-ratio) | RIV _{sign} Coeff. (T-ratio) | |
|---|--------------------------------|---|---|------------|
| Fixed effects | | | | |
| INTERCEPT V_FEMALE | 3.91 (40.87) | 3.91 (41.94) -0.04 (-0.54) | 3.91 (41.90) | |
| V_AGE40 ^a V_AGE55 ^a V_PARTNERED ^b V_MARRIED ^b V_CHILDREN ^c V_CHILDREN_HH ^c V_JOB ^d | | $\begin{array}{c} 1.00 (10.60) \\ 1.52 (15.68) \\ 0.13 (1.31) \\ 0.05 (0.51) \\ -0.13 (-1.44) \\ -1.07 (-11.11) \\ -0.24 (-3.26) \\ 0.23 (-2.12) \end{array}$ | 1.01 (10.98) 1.54 (16.35) -1.06 (-12.57) -0.23 (-3.08) | |
| V_ACUTENESS V_PROB90 ^e | | -0.23 (-3.12) -1.32 (-17.34) | -0.23 (-3.07) -1.29 (-17.69) | |
| Random effects | | | | |
| δ_{im} (error variance between) | 1.473 | 1.491 (0.000) | 1.495 (0.000) | |
| ε_{ij} (error variance within) | 3.569 | 2.472 | 2.471 | <u>31%</u> |
| deviance | 8528.36 | 7880.40 | 7872.02 | |
| # parameters / # random p. | 3 / 2 | 13 / 2 | 9 / 2 | _ |
| N_V / N_R | 1995 / 200 | 1995 / 200 | 1995 / 200 | |

^a Ref. age 25 ^b Ref. single

^d Ref. no job ^e Ref. 50% chance of surviving the first year

^c Ref. no children

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| Model | RIVR Coeff. (T-ratio) | RIRS Coeff. (T-ratio) | RIRS _{cross} Coeff. (T-ratio) |
|--|---------------------------------------|---------------------------------|--|
| Fixed effects | · · · · · · · · · · · · · · · · · · · | · · · · · | , , , , , , , , , , , , , , , , , |
| INTERCEPT | 3 91 (42,84) | 3 90 (42 62) | 3 90 (42 49) |
| RAGE | -0.04(-2.02) | -0.04(-2.54) | -0.04(-2.23) |
| R PATTERN ^a | 0.39 (2.07) | 0.39 (2.39) | 0.38(-2.32) |
| R FEMALE | -0.40 (-2.16) | -0.31 (-1.91) | -0.29 (-1.78) |
| R HEALTH ^b | | | 0.04 (0.23) |
| V FEMALE | | | -0.00 (-0.07) |
| V ⁻ AGE40 ^c | 1.00 (10.96) | 0.99 (10.64) | 0.99 (10.58) |
| V ⁻ AGE55 ^c | 1.54 (16.32) | 1.52 (13.12) | 1.52 (13.17) |
| V CHILDREN HH ^d | -1.06 (-12.57) | -0.96 (-10.91) | -0.94 (-10.73) |
| V JOB ^e | -0.23 (-3.05) | -0.23 (-3.23) | -0.24 (-3.30) |
| VACUTENESS | -0.23 (-3.03) | -0.31 (-3.27) | -0.31 (-3.33) |
| V PROB90 ^f | -1.29 (-17.69) | -1.29 (-11.25) | -1.28 (-11.16) |
| V AGE40*R AGE | | | -0.02 (-0.79) |
| V AGE55*R AGE | | | 0.02 (0.65) |
| V FEMALE * R FEMALE | | | -0.10 (-0.79) |
| V_ACUTE.*R_HEALTH | | | -0.14 (-0.81) |
| Random effects | | | |
| δ_{im} (error variance between) 7% | 1.419 (0.000) | 1.516 (0.000) | 1.528 (0.000) |
| ε_{ij} (error variance within) | 2.471 | 1.297 | 1.267 |
| V_FEMALE | | | 0.083 (>.500) |
| V_AGE40 slope | | 0.564 (0.000) | 0.524 (0.015) |
| V_AGE55 slope | | 1.561 (0.000) | 1.545 (0.000) |
| V_CHILDRENHH slope | | 0.582 (0.001) | 0.589 (0.044) |
| V_JOB slope | | 0.254 (0.000) | 0.296 (0.000) |
| V_ACUTENESS slope | | 1.082 (0.000) | 1.075 (0.000) |
| V_PROB90 slope | | 1.969 (0.000) | 1.998 (0.000) |
| deviance | 7867.24 | 7467.97 | 7476.97 |
| # parameters / # random p. | 12 / 2 | 39 / 29 | 53/37 14 |
| N _V / N _R | 1995 / 200 | 1995 / 200 | 1995 / 200 |

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5. Results

- On <u>vignette level</u> fictive persons are favored depending on...
 - low age
 - high chance of success in case of a transplantation
 - children, who live in the same household
 - acuteness of transplantation
 - employment
- ...not depending on...
 - sex
 - marital status
 - children, who do not live in the same household

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5. Results

- > On <u>respondent level</u> privileged ranks have been allocated by
 - older respondents
 - women
 - persons, who do not take into account the given example
- Women take the given example into consideration more often.
- Respondents follow different evaluating strategies.
- There are no tendencies of homophilia <u>between respondent</u> <u>and vignette level</u>.

6. Conclusion

- ➤ Laypersons follow the distributive justice norms of ...
 - need (acuteness of transplantation)
 - equality (no effect of sex and marital status)
- ➤ Laypersons decide in a rational way, accounting for ...
 - reproduction and care (sex, marital status, children in household)
 - contribution to the national economy (employment)
 - optimal use of resources (age, acuteness, chance of success)

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7. Discussion

- Limitation on student population:
 - small variance of respondents' age
 - no verification of homophilia to people with and without jobs possible
- Test of reciprocity norms
- Cross-national comparison of evaluation strategies in further planning (US – Germany)
- Factorial design study with living donations would be interesting, but could hardly be arrange.

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Thank you for your attention!

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