

## **Donors Associations and Blood Organisation in France: Conflicts and Differences about Blood Gift (1940's-1990's)**

Sophie Chauveau (Lyon II et IUF)

NB: This paper is a draft. I have to complete endnotes. For more details, please see: *Du don au marché. Les politiques du sang en France (années 1940-années 2000)*, mémoire pour l'HDR, EHESS, 2007

1. Since the end of WWII, the Blood Collection in France relies on unpaid gift. This principle remained for a long time a habit that wasn't unequivocally registered in law. The first law about Blood Organisation in 1952 prohibits profit on blood products and excludes those from the market: it was implicit that blood gift couldn't be paid.

In 1993, the law about Blood prohibits paid gift (Code de la Santé Publique, art. L1221-1). The law sets this rule as the paid and unpaid gifts of blood are discussed in Europe (EC): in several countries, the paid gift is allowed when the product is plasma. The French government, with the lobbying of donors associations, refuses paid gift even for plasma that is more difficult to collect and for which the needs exceed the collection.

2. As Blood collection develops in the interwar, with the discovery of new devices (preserved blood), new organisations appear. In France, the collection relies on voluntary donors: nurses, policemen, firemen, physicians are registered on donors lists and may be called even in emergency. Obstetricians need blood when a birth turns into difficulties. Donors received compensations as they accepted to give at every time in the day or the night but this wasn't a payment for their blood. At the end of the 1930's, when the device for keeping blood several days was safer, some physicians claim that donors shouldn't be paid (see X.Servantie). The unpaid gift becomes a politician or civic commitment when several donors offer blood to Republican army fighting in Spain. It is a civic or patriotic act during WWII when donors offer their Blood to people belonging to "Resistance". On the contrary, donors registered on lists that accepted to give in hospitals, where their blood may save the life of a German soldier, were considered as "collaborators". These donors used to receive compensations for their gift. As they didn't want to be judged as "collaborators", they create in 1940 a mutual association (friendly society) that collects their compensations: the "Mutuelle du Sang".

Opposition between paid and unpaid donors remains till the end of the 1940's: as the associations of unpaid donors grow up and gather into a federation, they succeed to set the unpaid gift as the only rule of Blood collection in France. This principle relies on an argumentation of Blood gift as a kind of Civic service. The federation of donors' associations claims that the law about Blood organisation voted in 1952 is a whole success: as Blood Organisation is a non-profit organisation, blood couldn't be paid to donors. But the federation lobbies in the same time to obtain free blood transfusion, when needed, for the donors.

3. Unpaid gift of blood isn't the only issue to collect blood. Other organisations develop since the Interwar. The first one is the "Blood bank": people give blood and are registered into a Bank that allows them to receive free blood if they need it later. People that don't give before can also receive blood as they accept to give blood when they will be able to or they ask their relatives to give blood. The Blood Banks organisation develops mainly in the United States. Blood Banks are set up in some hospitals in France: the Assistance Publique in Paris develops blood collection from Blood Banks in the 1950's.

Paid gift is a second issue to collect blood. Payment was the rule in several case of emergency. Even in the end of the 1940's, French Government publishes a tariff for "fresh blood transfusion": the whole price was the sum up of a payment for the donor and the cost of the blood preparation. The payment for fresh blood becomes very rare, with the diffusion of

new devices for preserving blood. Paid gift appear in the organisation of plasma collection. For the donor, the collection of plasma isn't pleasant: it lasts several hours, it's tiring, even if people can give more plasma than whole blood. Plasma is rich of several proteins that have different therapeutic uses: prophylaxis of infectious diseases, surgical needs (albumin) and later anti-haemophilia treatment. The demand for plasma products grows up since the WWII — the first use in a great scale was for the Marines —: to increase the collection, compensations were necessary. Pins, medals and later money help to collect huge and huge quantities of plasma in the US. Industrial firms specialised in the manufacturing of plasma products appear in the 1940's and set their own organisations of plasma collection: they open "plasma centres" where the voluntary donors were paid but also have to accept regular check-up to warrant the safety of plasma. These companies are Cutter, Armour, Alpha and Baxter in the US, Immuno in Austria.

4. Discussions about paid and unpaid gift appear in the 1960's when the demand for blood products increase faster than the offer of blood. Argumentation relies on ethical values, on economic reasons and on health criteria.

*Ethical values:* as Blood is part of human body, many can't acknowledge that blood could be paid to donors. Blood Gift is a civic task; it's citizenship evidence. These two arguments appear in France during the debates about the first law on Blood organisation in 1952. In England, discussion mixes ethical and *economic reasons*. R. Titmuss tries to show that unpaid gift is better than paid gift. What should be the better organisation to provide all the blood that is needed, with the lower costs and of course with the highest level of safety? As Titmuss concludes that the profit is destructive for the social relationship, other economists stand up for market rules in the medical organisation to supply it. Another point of discussion is the safety of blood: paid gift provides tainted blood with the hepatitis virus.

*Health criteria:* the risk of contamination with the hepatitis virus (A, B, non-A and non-B) and more recently AIDS provokes new debates about paid or unpaid gift. The payment for plasma gift encourages poor people, sometimes ill people or with a bad health, and also drug-users to give their blood. The problem is more where the blood is collected than paid or unpaid gift if we consider what happens in French jails in the end of 1970's and the beginning of 1980's.

5. Despite of controversies about paid or unpaid gift, lobbying for unpaid gift is today very strong in the EC: what should be the rule should be unpaid gift. The fear of tainted blood remains and explains the opposition to paid gift. But the need for blood products, and products manufactured from plasma can't be satisfied without payment of blood. The label "paid" / "unpaid" may be an issue: it concentrates all the critics of the donors associations.

6. Unpaid gift is the ethic rule for which donors create and gather into associations since the 1950's in France. These associations helped the donors to stand as actors and co-managers of the Blood Organisation in France when the shortage of Blood was frequent. As blood organisation changes into an industry during the 1960's and the 1970's, the influence of the donors' associations is challenged.

We would like to explore and analyze the relationships between these associations and the management of Blood organisation in France. We would like to show how the lobbying for the respect of the ethic of blood gift raises conflicts inside the Blood organisation. The birth of a blood industry during the 1970's, the emergence of new risks (AIDS) in the beginning of the 1980's and the reform of Blood organisation in the beginning of the 1990's offer different examples of controversies. Before the analysis of the debates, we should explain how the

donors associations appear and why they become co-managers of the Blood organisation in France.

## **I. Associations and co-management**

During the 1950's, donors associations are involved in the setting of Blood organisation and the development of Blood collection. The representatives of the associations participate to the management of Blood organisations.

### What is the part of donors' associations ?

First many of the associations appear with the meeting of several donors who wish to promote gift and blood gift. They also want to organise regular blood collections even when there is no permanent organisations. Blood transfusion services opened at the end of the 1940's in several cities (chief department): the creation relies on the interest of physicians or nurses for Blood transfusion. These teams organise regular collections. It happens that in a place the donors are quite numerous and interested with blood gift promotion that they create an association, published a letter of information and sometimes succeed in opening a permanent service for blood transfusion. In other cases, the opening of the service is thanks to the mobilization of physicians, but they rely on donors' willingness.

Many of the associations were created at the end of the 1940's and the beginning of the 1950's: they were influent in the promotion of unpaid gift and the growth of blood collections.

Then they play an important part:

- *In the organisation of blood collections.* Donors associations used to send invitations to give blood, they have relationships with local newspapers where are announced the collections, they have also links with local administration and civil councils (it is usual that the mayor has honorific mandate in donors associations). Municipalities offer rooms or gymnasium or school yard to install beds and seats and all the equipment need to collect blood. In return, the blood organisation gives grant to the associations those help to the organisation of blood collections. Grants are very important for the associations as it is the more often the most important income.
- *In the management of blood transfusion services.* Several decrees define the organisation of blood collection and transfusion in France in 1954, taken in application of the law voted in 1952. These decrees are about the administration of blood transfusion services but also technical aspects (how to collect the blood, how to control the blood, how to preserve it, etc.). Physicians held the administration of blood transfusion services: the Health ministry, considering their knowledge and abilities in transfusion processes, selects them. Blood transfusion services are also administered by council where are present donors representatives. The majority of these representatives are issued from donors association: that is the way the donors associations become co-managers of blood organisations.

### The values of donors' associations.

At the beginning of the 1950's the majority of donors associations is in favour of unpaid gift. This position is also the choice of the federation of donors associations.

*Unpaid gift* relies on charity, solidarity, citizenship, fraternity, generosity, altruism, patriotism: a whole ethic inspired by Christian and socialist ideas that influenced a part of public opinion after WWII in France. All these values associated to unpaid gift are recalled in donors' associations' bulletins. Blood gift is a voluntary, anonymous and intentional act.

Blood gift has also a social dimension during the 1950's, when physicians fear shortages of blood.

Donors become examples to follow: journalists show images of well-known people offering their blood like Ministers or the wife of the French President of Republic, Madame Auriol. Donors may be examples for other people: they commit themselves to follow the "Code du Donneur", where they promise to be good and tempered people, and so on.

*Unpaid gift* is an unselfish act for which donors look for recognition and rewards. Some of the donors associations suggest offering pins, medals or certificates to donors. The rewards will help to persuade more and more people to give blood. Pins and medals are also a kind of advert for blood gift: that's why donors associations ask donors to wear it. Among the donors, the rewards drive to emulation. But outside the associations, and in relationship with Blood organisation, the donors don't like that one may say that they give blood to get rewards.

*Unpaid gift* offers a better blood than paid gift. When blood is paid, it lowers the altruistic value of blood gift. Poor people who are sometimes ill may offer paid blood: there is a risk that their blood transmits viruses. But on the other hand, paid blood helps to avoid shortages.

*Unpaid gift* is part of a non-profit organisation of Blood collection in France. As blood products can't be sold — what patients pay is the cost of the preparation of Blood products (testing, addition of preservatives) — blood can't be paid to donors. The choice of non-profit organisation results of several reasons, in my point of view. The first one is the influence of the ideas of the Resistance and the Catholic and Socialist values. People want an altruistic organisation. This may be similar to the "altruism" that R. Titmuss considers as a foundation for social organisations. The second one is the economic situation of France at the end of the 1940's. Unpaid gift is consecutive to the lack of means in the organisation of blood transfusion. Blood organisation in France is not a public service and organisation as it is in England, where Blood organisations are part of the National Health Service. In France, the organisation of blood collection and transfusion is given to associations, hospitals, sometimes Red Cross: there is no public means or investments in the Blood organisation. In such conditions as the organisation is a non-profit one; it isn't possible to pay the donors. The only compensation occurs in some emergency cases. A third reason is linked to the characteristic of blood itself: blood is part of the human body, of what some lawyers call "out of market" (chose hors commerce). Respect to human condition prohibits the payment of blood: that is one of the arguments of the Health Ministry when was discussed the first law on blood organisation in 1952. The choice of unpaid gift results from the dominant values and ethics in the end of the 1940's and from the material conditions of the organisation of Blood collection in France. Unpaid gift influences in return the whole organisation of Blood collection in France.

As the uses of blood diversify, as new devices help to manufacture different blood products, we can describe the change of blood into therapeutic products as a kind of "commodification". This movement changes the relationship between donors' associations and blood organisation. Before we analyse these changes, we need to precise what are the relations we call "co-management".

#### The influence of donors associations: co-management.

Blood collection relies on associations or hospitals as there is no public service of blood collection and distribution in France. French government delivers authorizations to these associations.

The organisation of blood collection may satisfy individual and collective interests. The organisation involves different group interests: physicians, donors, patients. Patients don't have influence for a long time, except haemophiliacs from the 1970's. Physicians consider they're the only ones able to hold the organisation as they're professional, qualified and concerned. Donors, and mainly donors' associations, want to be associated to the holding of the organisation: this is an issue to make sure that the ethic of blood gift is respected. The longing for co-management is also a way to get recognition: it may change donors' associations into institutions or "actors" like physicians. The declaration of public interest and the distribution of rewards offer recognition to the donors and their associations. The co-management of blood collection gives them a higher legitimacy.

### Who manage?

Donors' associations are created at the end of the 1940's and the beginning of the 1950's. Associations are local organisations and begin to federate since the end of the 1940's. There are also professional associations: people working in the railways (SNCF) and for example at the French post office have their own donors' association. In the beginning of the 1960's, teachers are invited to give blood and to promote blood gift by the new association ADOSEN, with the support of their mutual insurance (MGEN). In 1950, about 150 000 individuals give their blood, in 1960 they are around 800 000 (and today 2 millions): one third of these donors belong to associations. Men are a little more numerous than women, and people give more blood as they are older. Donors belong to lower middle classes and middle classes.

### How to manage?

Donors' associations participate to the organisation of blood collections. Before the collection, they call the donors, sending letters, publishing articles in their bulletins and also in local newspapers. They also put posters in public places. During the collection, donors' associations are present: they offer a quick lunch after the gift (you need to regain your strength after giving blood). Sometimes some of these donors help physicians and nurses: they remove the needle from the arm. The participation at the blood collection is an opportunity for donors' associations to promote gift, to invite other donors to join the associations. The members of donors' associations also wear their pins.

All this propaganda isn't unselfish: it helps the associations to be considered as necessary partners in blood organisation. It contributes to the promotion of unpaid gift. People are convinced to give their blood by the influence of the donors' associations and their arguments: the organisation of donors and their views are really influent in the promotion of unpaid gift as a model and a foundation for blood organisation (K. Healy, *Last Best Things. Altruism and the Market for Human Blood and Organs*, Chicago, The University of Chicago Press, 2006). What I mean is that people don't give their blood only because of their intimate conviction but because donors' associations promote an ideal of blood – and of course unpaid – gift.

The co-management of blood organisations isn't restricted to blood collections. The decrees on blood organisation provide for a representation of donors in the board of governors of the local blood services. The donors selected as representatives don't always belong to donors' associations. Last, in 1967, the president of the federation of donors' associations is appointed member of the "Commission Consultative de la Transfusion Sanguine", that is the board of physicians and public officers who manage the blood organisation in France.

Donors' associations wish to increase blood collections and the number of donors. They are very preoccupied with the protection the ethical values of blood collection. In the administration of blood services, the associations try to be more influent. They want to

organise the collections and choose the days of collections, the place of collections. They try to act upon

the choice of the physician that held the blood service. Physicians worry about the influence that donors' associations can get: in some places, relations with donors become strained.

The donors' association management of blood collection is well established since the 1950's. The blood services used to give some grants to the associations: it is the payment of the propaganda and the help that associations provide (by calling donors, writing to the members of associations and so on). These grants change the associations into partners and co-managers of blood collection.

Donors' associations promote unpaid gift and consider blood gift is an unselfish act. But as we see, the relations with the physicians and officers in blood organisation rely on a mutual recognition. As a compensation for their unselfish act, donors receive grants and rewards. The organisation of blood collection is founded on unpaid gift but it doesn't exclude several kind of exchanges.

## **II. Blood industry and the ethic of blood gift**

### Controversies about unpaid gift

In the 1960's economists and sociologists in the UK and the US debate about unpaid gift or paid gift, what is the better issue for the blood organisations? See: Ph. Fontaine, "Blood, Politics and Social Science: Richard Titmuss and the Institute of Economic Affairs, 1957-1973" » *Isis*, 2002, 93.3, p. 401-434.

Paid gift helps to avoid blood shortages: that's the opinion of the authors of *The Price of Blood* (1968) who consider the market works better than non-profit organisations. The Price of Blood is an answer to the works on Health organisations by R. Titmuss (socio-economist, contributes to the Labour program). Titmuss refers to K. Arrow works: he explains that the health field can't be analysed with the only words of market like supply and offer and prices. Titmuss analyses Blood organisation: he shows that the altruism and the non-profit may give the same result as a market organisation. Titmuss considers blood organisation is an example of a social organisation: it may challenge market organisation. But the authors of *The Price of Blood* underline that unpaid blood doesn't help to prevent shortages. They explain that unpaid blood provokes some waste. Last unpaid blood causes higher costs for the Health system

Three years later, Titmuss describes different blood organisations in *The Gift Relationship* (1971). He analyses the US organisation: commercial firms manage the plasma collection and rely on paid gift. Collection by commercial firms may increase risk of transmission of viruses. On the contrary, unpaid gift provides a safer blood. Titmuss considers paid gift drives away unpaid gift like bad currency drives away good currency. Last Titmuss argues for unpaid gift because it preserves social relationships. In response, economists (see A. Alchian) criticize that Titmuss doesn't differentiate altruism and generosity: he doesn't distinguish economic and social values. For the opponents to Titmuss the market makes the organisation work better than the voluntary and the non-profit principles. The market contributes to the change of blood collection into an industry.

Those discussions take place in the UK and the US in the beginning of the 1970's. In France the debates deal with the "commodification" of blood. It refers also to the industrialisation of blood collection, but at another level. We call "commodification" the change of blood into good (consumption goods) like C. Waldby used the concept (C. Waldby, *Tissue Economies*). Some of the blood products like Factor VIII concentrates look like drugs and are sold as drugs. Such a change is worrying for the donors: the ethic of unpaid gift and non-profit is

jeopardized. Industrialisation of blood collection provokes serious tensions in French blood organisation.

### Industrialisation of blood collection

French economists and sociologists don't debate about paid or unpaid gift during the 1970's. Some of them study the French blood organisation and underline its weaknesses (Bastin-Vieillard). The organisation has to supply an increasing demand for sophisticated products like Factor VIII concentrates. This production requires more and more plasma: the plasma is obtained from whole blood, but if the "red" products are not used, this is a waste. Plasma can also be collected by special device: plasmapheresis. The prices of blood products are controlled by French state: each rise of prices is discussed with the Health ministry. To get some surplus, the organisation has to increase the development (increasing value) of blood packs. The existence of a market for some blood products (FVIII) and the need of surplus (as it is necessary to get surplus for investments or funds) change the French blood organisation into an industry or a business. What are the positions of the donors?

The change in the market of blood products provokes a decrease of the demand of whole blood and a growth of the demand of plasma. Donors don't understand this change and many worry about it. They fear to be considered as "blood retailers". In the same time, donors' associations tighten about the compensations and the rewards offered to donors. The associations become institutions, with their bureaucracy. The federation of donors' associations get higher grants in return for its support to propaganda about blood gift. Changes in blood organisation like in donors' associations create rigidities.

Donors go on promoting blood gift, educating young people about blood gift and so on. Critics about paid gift in non-developed countries are more common during the 1970's. Donors' associations and blood organisation expose paid plasma collection by the Institut Mérieux in the middle of the 1970's. Donors' associations refer to ethic value, blood organisation attacks unfair competition.

At the end of the 1970's, the tensions in blood organisation develop (crisis of the organisation): all the attempts to modify the organisation don't succeed. Donors are very critical about reform projects: it may have consequences on the management of blood collection and it may challenge the part of associations. Physicians and other people in the blood organisation are opponents to reform projects too. They are also more and more critical about donors' associations and their interference in the management of blood services.

All these tensions are revealed during the meeting of donors' associations in 1980. First the patients associations (Association Française des Hémophiles) criticize the blood organisation that is unable to provide enough FVIII concentrates. Patient associations in the same time thank the donors for their altruism. Second some of the physicians of the blood organisation underline the weaknesses of the management, the waste of blood and the selfishness of several official who prefer to obtain surplus than to preserve the solidarity of the whole blood organisation. Last donors explain their worries about the industrialisation; some of them are severe about the need of the haemophiliacs.

Economy of blood transfusion is an original one in France: as the Government decides to set a non-profit organisation in the 1950's, as the donors promote unpaid gift, the whole organisation seems to defy the market law. Even in the words: no losses, no profits, but surplus and non-payments. The ideal of non-profit organisation keeps from taking into consideration the challenges of the industrialisation (demand of drugs issued from blood) and

–this is not a secondary point, even if the donors aren't interested in- of the safety of blood products. Industrialisation weakens the solidarities of blood organisation and strengthens the selfishness of the different actors. Organisations look for profit (or surplus), patients want their drugs and donors refuse to be changed into retailers: they want to give blood when and where it is the most comfortable (this last point concerns mainly professionals associations like railwaymen).

Blood organisation turns into an industry with its own market: this market is organised by market law and other laws (unpaid gift, non-profit), see M. Callon "The embeddedness of economic markets in economics", M. Callon (ed.), *The Laws of the Markets*, Blackwell, 1998. The co-existence of these different laws provokes tensions that revealed the change in the relationships between the blood organisation and the donors' associations. Such tensions end in a crisis: this one incites to consider unpaid gift.

### **III. Is blood unpaid gift "pure"?**

Details about tainted blood are given in my research and its bibliography.

I would like to underline several points. Tainted blood forces to ask about the qualities of unpaid gift. The usual argument is that paid gift isn't safe as people who sell their blood are poor, sometimes ill, usually in bad condition.

What is the most striking in the tainted blood affair is the silence of donors' associations. They publish in their bulletins some information about AIDS in 1983: this information is brief, sometimes confused. Donors' associations are torn apart the promotion of blood gift and the information on a new and terrific disease. The hesitations of French government don't help to define positions about AIDS and risks for blood collection.

Since springtime 1983, some attempts to select donors were done in blood services. Donors' associations don't discuss about the selection: is it useful, or are the criteria the good ones, or is it fair to select donors. The silence of the donors seems to claim that unpaid gift is inevitably pure.

The doubts about the safety of unpaid blood gift are intolerable as such doubts challenge the ideal of the "blood donor". If we consider the history of blood collections since the beginning of the 20<sup>th</sup> century, blood donor is a man (a strong one), offering his blood to a poor woman whose delivery is going wrong. In such a definition, there is no place for homosexuals of drug-users. There is no reason to discuss about the safety of unpaid gift. The conviction that unpaid blood gift is pure among the donors' associations influences several physicians (those who were reluctant to ask people about their intimacy). This is one reason, not the only one, of the slowness of the reactions by French Government.

But the question of the purity and the safety of unpaid blood isn't even the main preoccupation of donors' associations in the 1980's: what worry the most the associations is the reform that will be enforced and the influence that will be given to associations.

### **IV. New Management: Blood organisation and donors associations**

Since 1989, European directive considers products issued from blood plasma as drugs. The qualification as "drugs" was discussed for the first time in 1965, then in 1975. But till 1989, opponents to this qualification gained over. AIDS and tainted blood affairs in several countries help to change the European law. Commercial firms who collect plasma and manufacture different product like albumin and FVIII concentrates are also in favour of a qualification as drug. Like other drugs, these products issued from blood are controlled and can't be sold without authorisations. All these changes are registered in the French law voted in 1993 about blood and drugs.

The same European Directive encourages unpaid gift. Despite this promotion of unpaid gift, donors' associations are opponents to the change of blood products into drugs. They argue that blood collection is now submitted to money interests and becomes a market.

The part of donors' associations changes since the 1993 law. In a first time, till 1998, they remained associated to the management of blood services (a seat in the board of governors of Agence Française du Sang). The associations lost this seat in 1998 when was created the Etablissement Français du Sang (EFS). In the same time, the promotion of unpaid gift is taken over by the EFS. Till the end of the 1990's, donors' associations have their own propaganda. In 1998, a logo "don de vie" (gift of life) appears: it is now the common image of blood gift. The image of the unselfish act helps to dissimulate how complex is blood collection today and how it looks like an industry. The new organisation, the EFS, needed to be identified to the unpaid gift, to the solidarity and altruism of blood donors.

***To conclude briefly with:***

Blood organisation in France is an example of the co-existence of different models of exchange, mixing unpaid gift and markets.

The promotion of unpaid gift and altruism is continuous from the 1940's till now: it legitimates the French blood organisation, even when this organisation changes into an industrial and commercial one. But in the same time, the representations and images of unpaid gift don't help the necessary adaptations of blood organisations.

The influence of donors' associations has decreased during the last 15 years but the debates about paid and unpaid gift are still animated in Europe. The challenge is between organisations relying on markets and other ones relying on altruism and solidarity, and there are strong arguments in each part to assert that each model is the better one for Public Health.