

# CAS SURPRISE

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PRÉSENTÉ PAR



**HÉMA-QUÉBEC**



# Case Study

HAPPENING MARKETING  
2018

**GIVE STEM CELLS. GIVE LIFE.**



HÉMA-QUÉBEC

# 1 Background

Héma-Québec's mission is to efficiently meet the needs of the Québec population for quality blood and other biological products of human origin.

Héma-Québec has set up and manages Québec's Stem Cell Donor Registry: a computerized bank containing the names of Quebecers who could eventually agree to a stem cell donation.

Stem cells are "mother" cells from which all other blood cells (red blood cells, white blood cells, platelets) develop. Hundreds of Canadian men and women are relying on the Stem Cell Donor Registry to find a compatible donor. A stem cell transplant is often their last chance of overcoming a serious illness such as certain types of cancer.

**The first goal of Héma-Québec's Stem Cell Donor Registry is to provide an array of potential stem cell donors representative of the Quebec population and to meet hospital demands.** The registry is linked to the Canadian Registry as well as International Registries, which enables Héma-Québec to look for an unrelated stem cell donor for a patient on an international scale. Its services include the coordination of all steps pursuant to a request for stem cells, from the initial search through donation.

At the international scale, there has been around 16,000 stem cell donations in 2013. As more than

95% of donations are made in the United States and in Germany, it is not realistic for Héma-Québec to compete with those registries of 7.7 and 6 million donors.

However, there are more than 100 transplants from unrelated stem cell donors in Quebec every year, and in more than 80% of cases the ideal donor is an international donor. Although no registry can fully meet national demand on its own, **Héma-Québec's registry must sensitize more Quebec donors for Canadian patients.**

Although there are 30 million donors internationally, we are incapable of identifying a perfectly compatible donor for approximately 50% of Caucasian patients in Quebec. In the United States a compatible donor is found for approximately 75% of Caucasian patients. A recent study demonstrated that unique genetic combinations are present in the Quebec population. Only Héma-Québec can provide a sample of those unique populations.

In the past, the first objective, for most registries, was to register as many donors as possible to enable access to transplant for the greater number of patients. During the last few years, the high withdrawal rate of donors (50% in the United States) highlighted the need for new recruitment strategies. Currently, the focus is on donors sought-after by transplant doctors: **committed, informed and reliable young men. Moreover, additional commitment is required from diverse ethnic communities** to better disseminate information to their community (e.g. universities, sport teams, patient family, festivals, etc.).

Doctors choose donors based on what is best for their patient. When more than one potential donor is a good HLA match for a patient, doctors will also consider other factors, including the donor's age. Researches show that cells from younger donors lead to more successful transplants.

Males are more likely to be chosen as donors because they offer better patient outcomes post-transplant. **Therefore, Héma-Québec's SCDR must sensitize and inform the greatest number of young Quebecers, aiming for them to register with the SCDR. The second major challenge is to maximize donor retention.**

## 2 Goals

- **Provide** Provide the Quebec population with a stem cell donors sample representative of its population to better meet the demands of Quebec transplant centres.

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- **Increase** Increase participation of young men (under 35 years old).

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- **Lower** Lower the average registered donor's age to meet the transplant centres demand.

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- **Insure** Insure the diversity of the Registry.

## 3 Business Objectives

### 1) Increase the number of young men registering

It is important to adequately represent the Caucasian Quebec population. The goal is to increase the number of young men registering, since more than 70% of donors currently registering are women. The demand from transplant centres is clear on this point; they need men, ideally in their twenties. We are often at a disadvantage compared to American and German registries since they already have many registered donors meeting these requirements. Even when a Quebec donor is identified for a Quebec patient, he or she often is not the optimal donor (young man) and he or she is not chosen to donate. A study of the American registry revealed that young men least likely to withdraw are single students living in an urban area. We must target areas or ways of reaching those young men, ideally from 18 to 25 years old. The younger a person registers, the more likely he or she is to be chosen for a donation.

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### 2) Increase the participation rate of ethnic communities and First Nations

Although the number of non-Caucasian donors registered has increased in the last few years, certain communities are under-represented, such as the Black community. First Nations are also under-represented in Canadian registries and absent from international registries.

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### 3) Increase donor retention rate

All registries struggle with retention of donors. This is especially true in the United States, where only 50% of registered donors will proceed with the genetic typing or donation request when reached by the registry. Many factors can influence this decision and registries have been working on ways to increase donor retention rate to reduce registering costs. For example, in the United States, the retention rate of people registering online is 70-80%, whereas for people registering during media campaigns or special events, this rate is significantly lower. People registering without understanding what a stem cell donation implies; those registering for a specific patient; people registering while in an emotional state; people who forget they have registered and those who register during events/campaigns under public pressure and/or peer pressure have a significantly weaker retention rate. **Accordingly, we must focus on the quality (committed, serious, well informed) of registered donors as opposed to their quantity, and elaborate strategies to nurture ongoing relationship with registered donors.**

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### 4) Maintain and further develop the relationship with donors beyond the registering process

Many years can go by between the moment a person registers as a donor and the moment they are asked to give stem cells. Consequently, that person will feel disconnected and might not remember having registered.

The American registry put in place emails being sent at variable intervals which continue to inform registered donors of their commitment towards patient waiting for a transplant. Those “newsletters” contain new information about the registry, videos of patients and donors testifying of their experience, and give donors the option to either confirm or end their commitment. It is assumed that by maintaining regular contact with donors, we will increase retention. This would also facilitate the donor’s decision at the time of donation.

## 4 Target Groups

### Primary Target\*:

- **Young men between 18 and 35 years old**
  - Known donors (blood and blood products)
  - Potential donors
- **Caucasians from various regions of Quebec**  
Especially from: Saguenay–Lac-Saint-Jean, Bas-Saint-Laurent, Estrie, Abitibi-Témiscamingue, Laval, Gaspésie–Îles-de-la-Madeleine
- **First Nations**
- **Ethnic Diversity**  
Especially from the Black community

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### Secondary Target:

- **Non-admissible youth (under 18 years old), but potential as new donors:**  
Particularly in regions and for targeted communities
- **General population** (as required)

\*Healthy potential donor – Ready to donate for an unknown patient – Well informed. We want people who know and understand what a donation implies, reliable, who are fully aware of the importance of stem cell donations for patients waiting for a transplant. Since this donor profile is also sought out for blood donations, it could be interesting to mobilize those people for both types of donation!

## Stem cells, in brief

Stem cells are “mother” cells from which all other blood cells develop. When treating a patient requires a stem cell transplant, the characteristics of the transplanted cells must be as similar as possible to those of the patient’s cells. Since those characteristics are hereditary, family members are more likely to be compatible (1 chance out of 4). In other cases, a compatible unrelated donor must be found within the people registered with stem cells donation registries throughout the world.

In practice, HLA markers determine compatibility of stem

cells. It is a specific system requiring extremely precise research since there are more than 15,000 markers, and that number increases every year. Finding a compatible donor for a patient waiting for a stem cell transplant is always a challenge.

Héma-Québec’s Stem Cell Donor Registry is mostly composed of Caucasian donors, like international registries. This is an important challenge since a diversified registry (representative of Quebec’s population) would better meet needs.

# 5 Considerations impacting your mandate

## 1) A voluntary and unpaid donation

Stem cell donation, like donating blood, is voluntary and unpaid, and rely on the generosity of donors. Incentives are used elsewhere in the world, but these measures do not guarantee of a better blood supply. In fact, the opposite can still happen in some cases. Studies have been conducted on blood donation motivations, particularly by the *INRS – Centre Urbanisation Culture Société* and it seems that the best motivation for a donor is the pride of having made a gesture that will help save lives. **No incentive-giving promotion that may alter the altruistic gesture is accepted.**

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## 2) A Network of Ambassadors: An Avenue to Explore

We would like to explore with you the potential creation of an enlarged structure of recruiters, so that Héma-Québec can reach a maximum of people with a minimum of resources. To that effect, we want to draw from a model established by a medical student (*Stem Cell Club*). It was created at *University of British Columbia* and has now spread to many other Canadian universities in British Columbia, Alberta, Ontario, and soon the Maritimes. This approach consists in creating a network of leaders within each university. Each leader oversees training volunteer “Ambassadors” and to organize events on campus using promotional material provided by the *OneMatch* registry. This leader (ambassador) is also in charge of insuring his succession before the end of his or her studies. This group also put in place training modules for recruiters.

### PROPOSED STRUCTURE:

#### Ambassador

Person strategically chosen by Héma-Québec to meet the needs of the Stem Cell Donor Registry in terms of education, awareness and recruitment of potential stem cells donors.

#### Team/Network of recruiters

Established by the Ambassador to support him in his awareness and recruitment activities.

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## 3) “It’s in you to save the world.”

Last fall, an online survey of the target groups allowed us to identify the most relevant of five proposed concepts, in view of inciting youth to register with the Stem Cell Donor Registry. The resulting campaign is under way and should be launched in late spring 2018. You will find examples in the annex 3.

Multiple strategies submitted by teams of students could be integrated to the action plan in development. Your creativity could save lives!

# Your mandate

## Develop

- a marketing plan to recruit 5,000 new donors annually for the Registry, adapted to the target group;
- an implementation strategy for the ambassador program in universities and;
- a management strategy to nurture ongoing relationship with new and existing registered donors.

## References

To know about steps to register and the stem cell donation process:

[www.hema-quebec.qc.ca/index.en.html](http://www.hema-quebec.qc.ca/index.en.html)

To know more about stem cells and their usage:

[www.hema-quebec.qc.ca/cellules-souches/savoir-plus/cellules-souches.en.html](http://www.hema-quebec.qc.ca/cellules-souches/savoir-plus/cellules-souches.en.html)

Other sources of information:

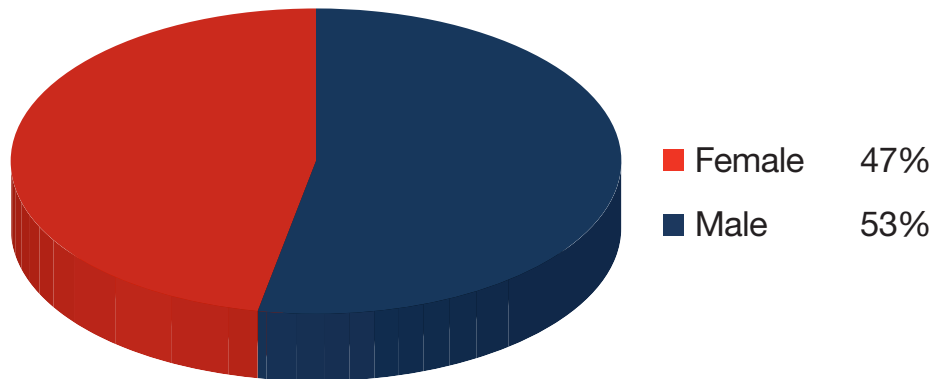
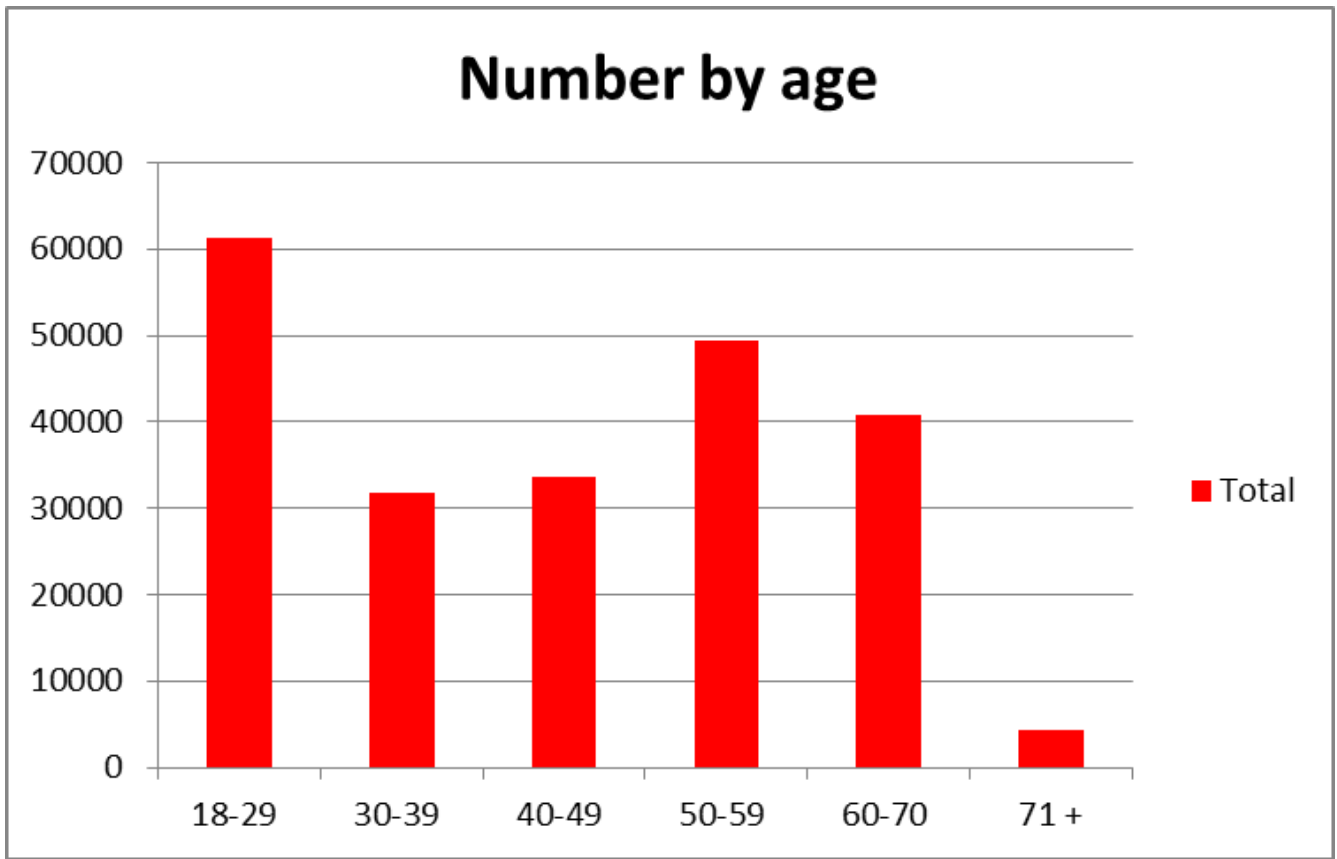
- ONE MATCH STEM CELL AND MARROW NETWORK (ONEMATCH)  
[www.blood.ca](http://www.blood.ca)
- GIFT OF LIFE BONE MARROW FOUNDATION  
[www.giftoflife.org](http://www.giftoflife.org)
- BE THE MATCH  
[www.bethematch.giftoflife.org](http://www.bethematch.giftoflife.org)
- NEW ZEALAND BONE MARROW DONOR REGISTRY  
[www.bonemarrow.org.nz](http://www.bonemarrow.org.nz)
- UNITED KINGDOM: ANTHONY NOLAN  
[www.anthonylolan.org](http://www.anthonylolan.org)

## Annexes

1. Blood Donors Demographic Profile – 2016-2017
2. Demographic data for the Stem Cell Donor Registry
  - 2.1 New registered donors – 2016
  - 2.2 All registered donors – December 2016
3. Elements of the campaign currently in development

**ANNEX 1**

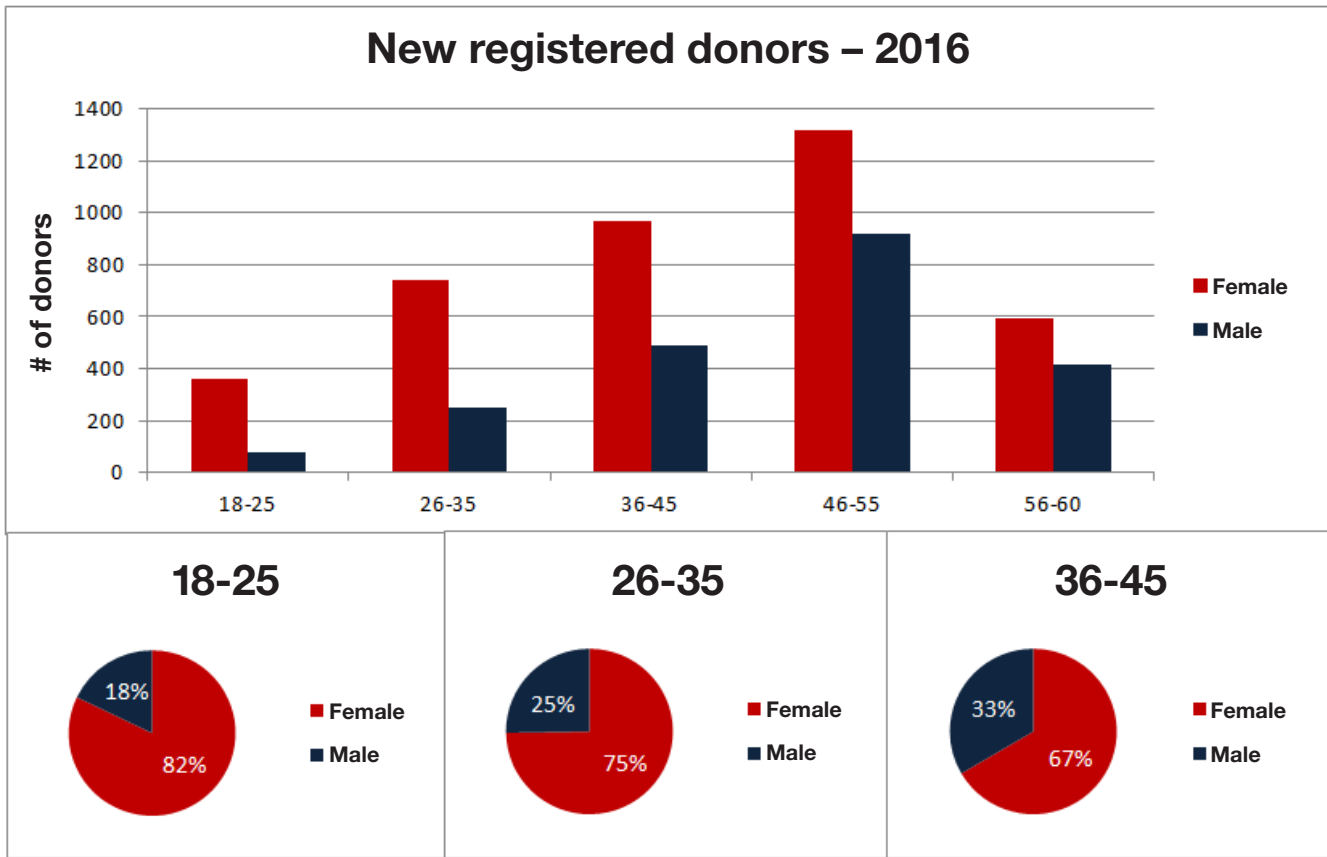
Blood Donors Demographic Profile – 2016-2017



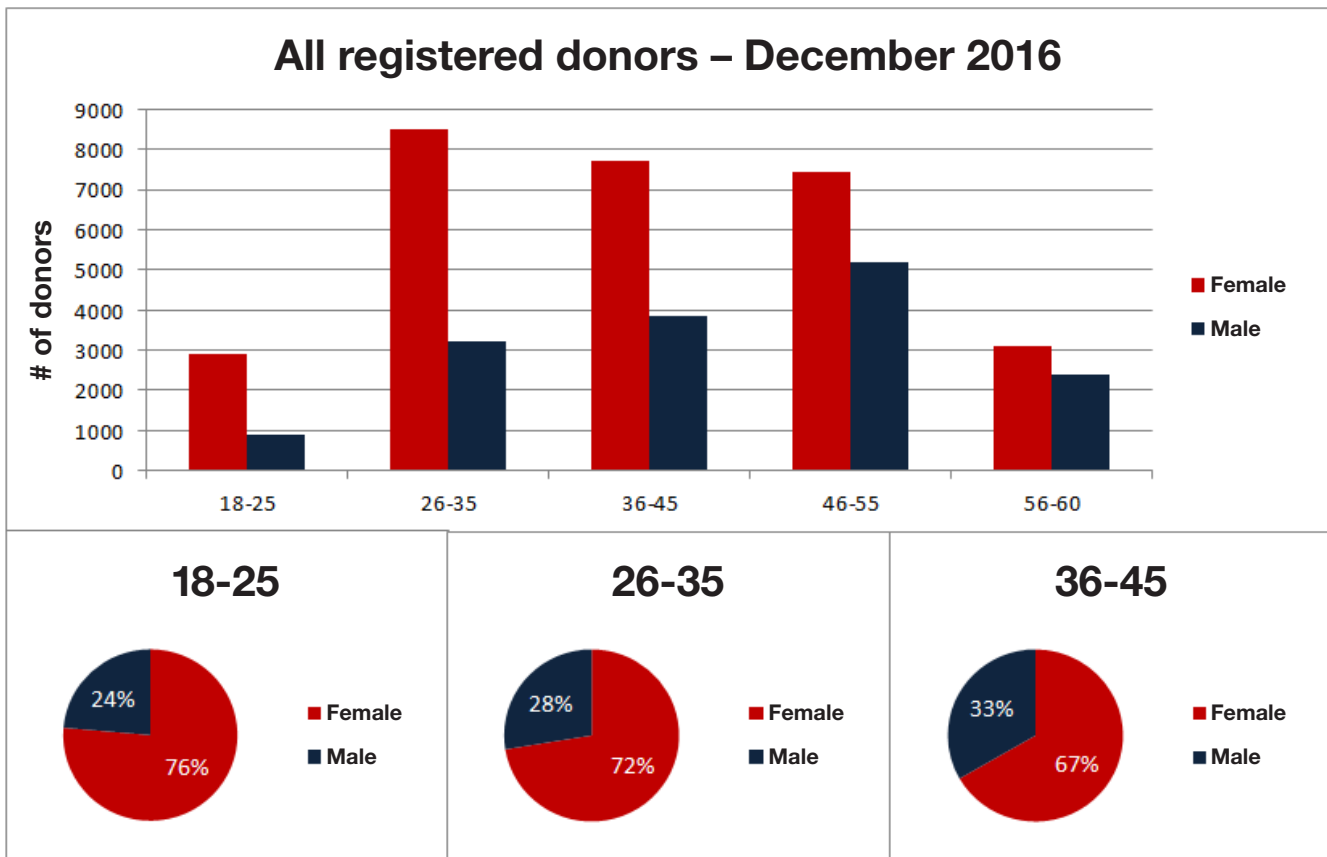
**ANNEX 2**

Demographic data for the Stem Cell Donor Registry

**2.1**



**2.2**



**ANNEX 3**

Elements of the campaign currently in development

# IT'S IN YOU TO SAVE THE WORLD.

