

## Research Article

# Knowledge, Attitude, and Associated Factors towards Organ Donation Among Teachers of Selected Schools in Divisional Secretariat Badalkumbura in Monaragala District

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## Abstract

**Introduction:** Organ transplantation involves moving a functioning organ from one body to another or from a donor site to replace a damaged or failing organ. One of the best ways to educate the community about organ donation is through school teachers. This study was carried out to assess the knowledge, attitude, and associated factors towards Organ Donation among teachers of selected schools in Divisional Secretariat Badalkumbura in the Monaragala District. **Methods:** A descriptive cross-sectional design was applied. A pre-tested and validated self-administered questionnaire was used to collect data from teachers (n=300) in 13 schools from Divisional Secretariat, Badalkumbura selected using systematic random sampling. Descriptive statistical tests were performed to analyze data. Level of knowledge regarding organ donation was categorized as poor (<20), moderate (<30), and good (≥30) while attitude was categorized as poor (≤25), moderate (≤50), and good (>50). Chi-square tests were conducted to determine associated factors with the level of knowledge. P<0.05 was considered significant. **Results:** The response rate was 70.9%. Mean age of participants was between 31-40 years (SD=11.5). From the participants, 48.0% had a poor level of knowledge and, moderate level of attitude (94.7%) on organ donation. The level of knowledge was significantly associated with age (p=0.04), religion (p=0.001), and work experience (p=0.039). **Conclusion:** Participants had a poor level of knowledge while more than 94% had moderate level of attitude towards organ donation. Age, religion and work experience had a significant association with the level of knowledge regarding organ donation among teachers.

**Keywords:** Organ donation, knowledge, attitudes, associated factors, teachers

## Introduction

### Global challenges in organ donation

Organ transplantation as the standard treatment for end-stage organ disease can save thousands of lives in the world. An organ transplant is the moving of a whole or partial organ from one body to another (or from a donor site on the patient's own body), to replace the recipient's damaged or failed organ with a working one from the donor site. Organ donation can also be defined as the removal of the tissue of the human body from a person who has recently died (cadaveric donors), or from a living donor, for transplantation (1).

Organ donation is a broad topic that connects with medical, legal, ethical, organizational, and social factors. Due to the development of technology, now it is more convenient, and demand for organ

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transplantation has increased. Even though the amount of organ donation is increasing annually, the world is still having a huge shortage of organs for transplant (2). This happens as a result of people not being involved adequately in donating organs. Reasons for this can be the lack of knowledge about organ donation and personal attitudes. A community-based cross-sectional study done in a rural population of South Kerala revealed that the majority of people had heard about organ donation, but only less than 50% were willing to donate. This unwillingness was caused due to religious beliefs, lack of family support, perceived health risks, and financial insecurities (3). Another study conducted in Madina Teaching Hospital Faisalabad by interviewing the people visiting the hospital showed a wide gap in terms of knowledge on organ donation due to educational and socioeconomic status. This may occur due to a lack of knowledge and fear of organs being misused. People assume that organ donation generally comes from poor people (1). A study done among medical, nursing, dentistry and other students of health technicians at Dicle University, Turkey revealed a lack of knowledge about organ donation among the study population (4).

#### ***Factors influencing knowledge and attitude***

Willingness for organ donation is shown to be associated with different factors. According to a cross-sectional study done among adult people visiting the Madina Teaching Hospital Faisalabad, revealed a statistically significant association of knowledge on organ donation with educational and socioeconomic status, while attitude towards organ donation was significantly associated with age, educational, and socioeconomic status (1). A study conducted among the adult population in Pakistan showed that knowledge about organ donation was significantly associated with education and socioeconomic status (5). A cross-sectional study conducted in Kerala found that negative attitude towards organ donation has an association with religious beliefs, lack of family

support, perceived health risks, and financial insecurity (3).

#### ***Organ donation situation in Sri Lanka***

The awareness of brain death and organ transplant is still questionable among the society in some countries including Sri Lanka because of the lack of knowledge. In Sri Lanka, almost all kidney transplantations are from living donors. The deceased donor organ transplantation program is still in the early stage in Sri Lanka (6). According to a community-based study conducted in Sri Lanka, 97.8% knew donating organs can save lives and 90.5% were willing to carry an organ donor card and expressed a desire to donate organs. 43.5 % knew that all the listed organs in the questionnaire could be donated. Only 43.3% knew brain death is considered legal as an individual's death in Sri Lanka (7). This shows the need for conducting organ donation awareness programs in Sri Lanka. When considering legal aspect of organ donation in Sri Lanka, it is governed by the Transplantation of Human Tissues Act No. 48 of 1987 and the Directorate General of Health Services' circulars of Ministry of Health an Organ Transplantation. Section 2 of the Transplantation Act stipulates that, any person above 21 years can give consent to organ donation and section 5 of the Act stipulates that, in situations where the person has not given consent for a donation prior to death, the law allows the next of kin of such deceased person who is above 21 years to give prior consent for such donation (6).

#### ***Relevance of schoolteachers as a target group***

One of the best ways to educate the community about organ donation is through school teachers. The teachers can educate children about the importance of organ donation and children can spread the message among their family and people around them. This will help to convey information about organ donation among the society on a large-scale. To do this, schoolteachers should have adequate knowledge and attitudes on organ

donation. However, findings on this area were not adequately found in the literature. Therefore, this study was conducted to identify knowledge, attitudes, and associated factors towards organ donation among teachers of selected schools in Divisional Secretariat Badalkumbura in the Monaragala District.

## Methods

A descriptive cross-sectional study was conducted among teachers in selected schools of the Divisional Secretariat, Badalkumbura. The Secretariat has 39 schools including 14 primary schools, 14 junior colleges, 10 colleges, and one central college. Among these schools, five schools were Tamil schools, and two schools were Muslim schools. Badalkumbura Divisional Secretariat had a total of 732 teachers. The sample size was calculated using Lwanga and Lemle show formula (8) which is recommended for estimating proportions in descriptive cross-sectional studies. Accordingly, 423 participants were needed to be selected for the study. A systematic random sampling technique was followed in this study. Teachers of the selected schools were informed via the principal of the school and a brief introduction about the study was given verbally by the principal researcher. A self-administered questionnaire was distributed with the information sheet and the consent form to obtain written informed consent before participation.

A self-administered questionnaire was designed to collect socio-demographic data, knowledge and attitudes on organ donation. The questionnaire was designed by the researchers using relevant literature from previous research studies (1,7). Content validity was conducted with subject experts including a surgeon from Colombo South Teaching Hospital and a Lecturer from the Department of Anatomy, Faculty of Medical Sciences, University of Sri Jayewardenepura. Then questionnaire was translated to Sinhala and Tamil languages by bilingual language translators.

The reliability of the questionnaire was assessed using Cronbach's alpha, which gives a value of 0.70.

The questionnaire consisted of three main sections: Section I – Socio-demographic data (Q1 – Q7), Section II – Knowledge of organ donation (Q8 – Q22), and Section III – Attitudes regarding organ donation (Q23 – Q36). In order to prevent data contamination, the pre-test was conducted among 30 teachers in R/Vidyakara Isuru School which is situated in the Balangoda educational zone which is far distant from the study setting. A few questions were revised following the pre-test.

Statistical analysis was performed by using IBM Statistical Package for Social Sciences (SPSS) version 26 software for Windows. Descriptive statistics were used to analyze data. Among the questions in the knowledge section, 13 questions were selected and given marks to assess the level of knowledge of the participants. 1 mark was given for correct answer and 0 for incorrect answer and "don't know" statements. A total of 45 marks were given in total. Marks were categorized as poor level of knowledge (<20), moderate level of knowledge (<30), and good level of knowledge ( $\geq 30$ ). A scoring system was used to calculate the level of attitude towards organ donation by giving a total of 75 marks for 15 statements. Marks were categorized as poor level ( $\leq 25$ ), moderate level ( $\leq 50$ ), and good level ( $> 50$ ). Knowledge and attitude levels cut-offs were categorized based on advices of subject experts and previous studies (9–11,20). Chi-square tests were conducted to determine associated factors with the level of knowledge ( $p < 0.05$ ).

Ethical approval was obtained from the Ethics Review Committee of the Faculty of Medical Sciences, University of Sri Jayewardenepura. Permission for the study was taken from the Zonal Education Office Monaragala and permission for the pretest was taken from the Zonal Education

Office Balangoda. All the subjects were informed adequately about the study purpose and method using an information sheet which was given in English, Tamil, and Sinhala languages. Information sheets were collected after obtaining informed consent from the participants.

No psychological harm was identified during the time of data collection, and the participants were informed that privacy and confidentiality would be ensured during all steps of the study, and the participants had the right to avoid participation at any time. The responses to the questions were used only for this study purpose and the participants were assured that they would remain anonymous if they took part in the study. The data were stored in a password-protected device for five years and then they will be destroyed.

## Results

Only 300 participants consented to participate in the study with a response rate: 70.92%. The reliability of the questionnaire was assessed using Cronbach's alpha, which gives a value of 0.70.

### Demographic data

The demographic characteristics of the 300 participants who participated in the study are shown in Table 1. The majority of the participants were females accounting for 77.6% (n=233). Religion of most of the participants was Buddhist (86.3%, n=259) and 74.3% (n=223) were degree holders.

### Knowledge regarding organ donation

According to Table 2, the most of the participants had heard about organ donation (96.3%, n=289), however, only 6.3% (n=19) had registered or given consent for organ donation. A major source of information for participants was mass media which accounted for 76.6% (n=229). Only 47% (n=141) of the participants were aware that organ donation can be done while living, after brain death, or death. A significant percentage of

participants (35.6%, n=107) responded that organ donation can be done after brain death or death. However, 25% (n=75) of the participants did not know how to register for organ donation.

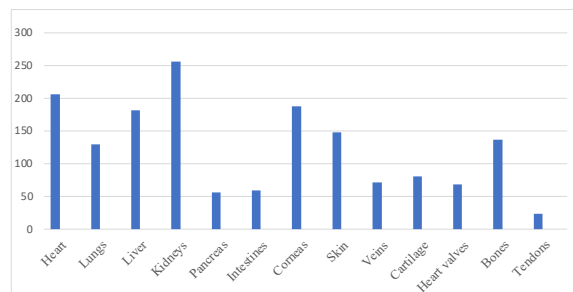


Figure 1: Organs that can be donated or transplanted

Figure 1 depicts, that the majority of the participants answered kidney (85%, n=255), heart (67%, n=201), cornea (63%, n=189), and liver (61%, n=183) as organs that can be donated or transplanted. Participants stated cancer (58%, n=174), transmissible diseases (53%, n=159), and diabetes mellitus (48%, n=144) as contraindications for live organ donation (Figure 2).

Figure 3 shows that the participants answered as; cancer (51%, n=153), transmissible diseases (48%, n=144), and chronic organ failure (44%, n=132) as

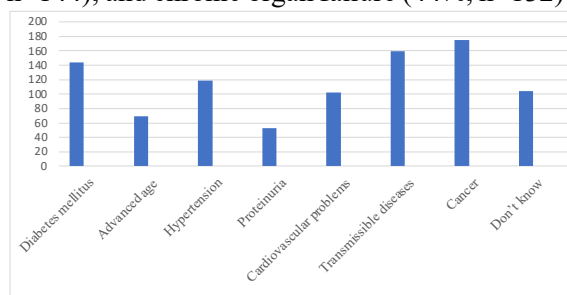


Figure 2: Contraindications for live organ donation

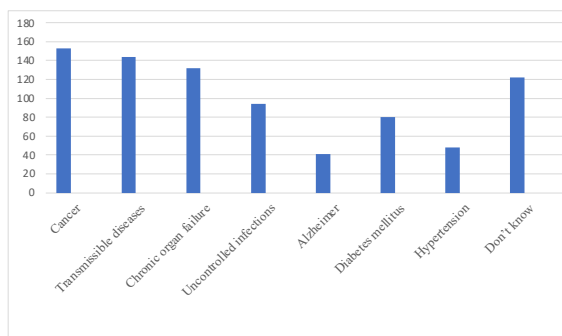


Figure 3: Contraindications for deceased organ donation

contraindications for deceased organ donation. Most of the participants (80%, n=240) agreed on conducting awareness programs related to organ donation at parent meetings (Figure 4).

From the participants, 48% (n=144) had a poor level of knowledge, 33.3% (n=100) had a moderate level of knowledge and 18.6% (n=56) had a good level of knowledge regarding organ donation.

### ***Attitudes regarding organ donation***

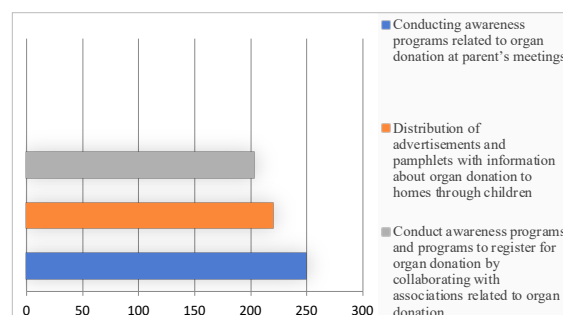
Most of the participants were willing (87%, n=261) to donate organs after death, while 48.6% (n=146) were unwilling to donate while alive. The majority of the participants considered family opinion (66.6%, n=200) before donating, and 83.6% (n=251) permitted family members to donate organs after their death. Most of the participants (84%, n=252) viewed organ donation as a noble act, and 92.6% (n=278) agreed that helping others after death is better. 88% (n=264) participants believed organ donation benefits society, and 86.3% (n=259) felt responsible for raising community awareness about organ donation (Table 3). Among the participants, 94.7% (n=284) had a moderate level, 4.7% (n=14) had a good level and 0.7% (n=2) had a poor level of attitude towards organ donation.

### ***Association of level of knowledge with demographic data***

Table 4 illustrates, that the majority of participants had a poor level of knowledge irrespective of age, gender, religion, educational qualification, and work experience. According to the Pearson Chi-Square test, the level of knowledge had a significant association with age ( $p=0.04$ ), religion ( $p=0.001$ ), and work experience ( $p=0.039$ ).

### ***Association of level of knowledge with level of attitude***

According to Table 5, level of knowledge did not have a significant association with attitude level ( $p=0.055$ ).



**Figure 4:** How to educate community regarding organ donation

## **Discussion**

The results of the study indicated that 48% (n=144) had a poor level of knowledge, 33.3% (n=100) had a moderate level of knowledge, and 18.6% (n=56) had a good level of knowledge regarding organ donation. A study which has been conducted among undergraduate students of selected faculties of the University of Sri Jayewardenepura found similar results concluding that the knowledge of organ donation was poor among students (12).

In contrast a study done on the knowledge, attitude, and behavior of the general population towards organ donation in India found that 52.8% of the participants had adequate knowledge about organ donation (16). In the current study the majority of participants had heard about organ donation. A study done in Rural Kerala showed that 97.0% of the participants had heard about organ donation while 53.0% of the participants had good knowledge regarding organ donation, and only 4.0 % had poor knowledge (3). A questionnaire based study conducted among adolescents in Austria and Switzerland found that knowledge on organ donation is scarce among adolescents (13). According to the literature, the level of knowledge regarding organ donation differed from population to population. This may occur due to various reasons such as the place they live, cultural and religious beliefs, education system, media coverage, awareness programs and campaigns.

**Table 1: Demographic data (n=300)**

Variable	Frequency(n=300)	Percentage (%)
Age		
1. 21 – 30 years	32	10.6
2. 31 – 40 years	117	39
3. 41 – 50 years	90	30
4. 51 – 60 years	61	20.3
Gender		
1. Male	67	22.3
2. Female	233	77.6
Religion		
1. Buddhism	259	86.3
2. Muslim	15	5
3. Hindu	17	5.6
4. Christian	9	3
Educational Qualification		
1. Degree	223	74.3
2. Diploma	77	25.6
Work experience		
1. <15 years	187	62.3
2. 15 – 30 years	85	28.3
3. >30 years	28	9.3
Marital status		
1. Married	263	87.6
2. Single	33	11
3. Divorced/widowed	4	1.3
Average income per month		
1. Less than Rs.50 000	118	39.3
2. Rs.50 000 – Rs.75 000	149	49.6
3. Rs.75 000 – Rs.100 000	30	10
4. More than Rs.100 000	3	1

Different populations had these factors affecting in varying degrees in their societies. In the current study, the major source of information for the participants was the mass media and similar to this, a study done on public attitudes and behavior regarding organ donation also found that the most commonly mentioned source of information was the mass media (14). Mass media included television, radio, newspapers, magazines, books, and the internet which can be used to distribute information to a large number of people at once.

In this study, more than 50.0% of participants responded that, the organs that can be donated as kidneys, heart, corneas, and liver. A pilot study conducted among medical, nursing, dentistry, and health technician students in Turkey had given responses for organs that could be transplanted as; lungs, kidneys, liver, heart and cornea (4).

**Table 2: Knowledge regarding organ donation (n=300)**

Statement	Frequency(n=300)	Percentage (%)
Have you heard about organ donation?		
1. Yes	289	96.3
2. No	11	3.6
Have you registered or given consent for donation?		
1. Yes	19	6.3
2. No	281	93.6
Source of information about organ donation*		
1. Family and friend	150	50
2. Mass media	229	76.6
3. Health care providers	103	34.3
When you can donate organs*		
1. During life	6	2
2. After brain death or death	107	35.6
3. Both	141	47
4. Don't know	46	15.3
Where you can register for organ donation in Sri Lanka*		
1. Hospital	143	47.6
2. Medical faculty of a university	69	23
3. Online	75	25
4. Don't know		
There is legislation for organ donation and transplant in Sri Lanka	156	52
1. Yes	5	1.6
2. No	139	46.3
3. Don't know		
One person can donate several organs		
1. Yes	224	74.6
2. No	9	3
3. Don't know	67	22.3
Organs can only be donated to close relatives		
1. Yes	10	3.3
2. No	244	81.3
3. Don't know	46	15.3
Do you know what an organ donor card is?		
1. Yes	90	30
2. No	210	70
What is the age limit you can donate organs in Sri Lanka?		
1. 18 years	15	5
2. 21 years	2	0.6
3. 25 years	68	22.6
4. No age limit	163	54.3
5. Don't know		
What are the methods that you can use to educate students regarding organ donation? *		
1. Conducting awareness programs about organ donation in the school	262	87.3
2. Explain the importance and value of organ donation	241	80.3
3. Presenting the latest information on organ donation using the Internet to children	202	67.3

\*Multiple answers can be selected

In this study, 52.0% of participants knew there is legislation for organ donation and transplant in Sri Lanka and 46.3% of participants were unaware of this legislation. A cross-sectional study done among the adult population visiting the Madina Teaching Hospital Faisalabad found that 27.0% of

the participants knew about the law of organ donation and 49.0% of participants were unaware about the law of organ donation in Pakistan (1).

When comparing the current study with previous studies, mass media contributed to a significant

**Table 3: Attitudes regarding organ donation (n=300)**

Statement	Strongly agree n(%)	Agree n(%)	Neutral n(%)	Disagree n(%)	Strongly disagree n(%)	Standard Deviation
Willing to donate my organs when I am alive	33(11)	65(21.6)	56(18.6)	107(35.6)	39(13)	±1.23
Willing to donate my organs when I am dead	127(42.3)	134(44.6)	7(2.3)	16(5.3)	16(5.3)	±1.06
Consider opinions of my family members before donating and registering for organ donation	56(18.6)	144(48)	28(9.3)	46(15.3)	26(8.6)	±1.21
Agree if my family member wants to register for organ donation to donate organs after death	87(29)	164(54.6)	21(7)	12(4)	16(5.3)	±1
Agree if my family member wants to register for organ donation to donate organs while he/she is alive	33(11)	137(45.6)	61(20.3)	43(14.3)	26(8.6)	±1.12
Organ donors should be compensated	28(9.3)	73(24.3)	66(22)	101(33.6)	32(10.6)	±1.17
Opinions of the people in the community have an impact on a person's decision about registering for organ donation	40(13.3)	128(42.6)	37(12.3)	66(22)	29(9.6)	±1.22
Organ donation laws and regulations are not well-developed in Sri Lanka	20(6.6)	101(33.6)	100(33.3)	64(21.3)	15(5)	±1
Consenting to organ donation may result lack of proper treatment	8(2.6)	69(23)	83(27.6)	95(31.6)	44(14.6)	±2.58
Organ donation may help to extend my life	7(2.3)	31(10.3)	79(26.3)	131(43.6)	52(17.3)	±0.96
Organ donation is a noble act and reflects the donor's value system	111(37)	141(47)	26(8.6)	17(5.6)	5(1.6)	±0.91
Death is the end of the life; it is better to help people in need	146(48.6)	132(44)	14(4.6)	7(2.3)	1(0.3)	±0.72
Organ donation contributes to society and benefits humankind	128(42.6)	136(45.3)	22(7.3)	12(4)	2(0.6)	±0.81
Responsibility to aware community	75(25)	184(61.3)	29(9.6)	9(3)	3(1)	±0.74
Willing to help in increasing the organ donors	68(22.6)	186(62)	33(11)	7(2.3)	6(2)	±0.78



**Table 4:** Association of level of knowledge with demographic data (n=300)

Variable		Level of knowledge regarding organ donation						P value
		Poor level of knowledge		Moderate level of knowledge		Good level of knowledge		
		N	%	N	%	N	%	
Age	21 - 30 years	19	6.3%	11	3.7%	2	0.7%	0.04*
	31 - 40 years	57	19.0%	45	15.0%	15	5.0%	
	41 - 50 years	40	13.3%	29	9.7%	21	7.0%	
	51 - 60 years	28	9.3%	15	5.0%	18	6.0%	
Gender	Male	33	11.0%	22	7.3%	12	4.0%	0.97
	Female	111	37.0%	78	26.0%	44	14.7%	
Religion	Buddhism	113	37.7%	91	30.3%	55	18.3%	0.001*
	Muslim	14	4.7%	0	0.0%	1	0.3%	
	Hindu	12	4.0%	5	1.7%	0	0.0%	
	Christian	5	1.7%	4	1.3%	0	0.0%	
Educational Qualification	Degree	101	33.7%	78	26.0%	44	14.7%	0.278
	Diploma	43	14.3%	22	7.3%	12	4.0%	
Work experience in years	< 15	93	31.0%	67	22.3%	27	9.0%	0.039*
	15 - 30	39	13.0%	27	9.0%	18	6.0%	
	> 30	12	4.0%	6	2.0%	11	3.7%	

\*Statistically significant  $p < 0.05$ .

extent to enhance the knowledge about organ donation worldwide helping people to get an idea about what organs can be donated.

Overall results related to attitudes in this study indicated that the majority of participants had a moderate level of attitude towards organ donation. A cross-sectional descriptive study conducted in India among the general population showed that 67.0% of the participants had a positive attitude toward organ donation (15). A hospital-based cross-sectional survey done among the adult population of Western Rajasthan India found that the majority of the participants had a low or neutral level of positive attitude towards organ donation (2). A cross-sectional study conducted among health professionals in Gondar, Northwest

Ethiopia found that 79.1% of participants had a favorable attitude toward organ donation (16). A similar result to the present study was shown in a study conducted among pre-service teachers who were studying in four different public universities in Turkey found that participants had a moderate level of attitudes regarding organ transplantation and donation (17). A descriptive cross-sectional study done among pre-service teachers in a public university in Turkey's East found that participants had a high level of positive attitudes regarding organ transplantation and donation (18).

The present study found that the majority of the participants were not willing to donate their organs when they were alive but were willing to donate when they died. A cross-sectional study done at a

**Table 5:** Association of level of knowledge with level of attitude (n=300)

		Level of attitude towards organ donation						P value
		Poor level		Moderate level		Good level		
		N	%	N	%	N	%	
Level of knowledge regarding organ donation	Poor level of knowledge	1	0.3%	131	43.7%	12	4.0%	0.055
	Moderate level of knowledge	1	0.3%	97	32.3%	2	0.7%	
	Good level of knowledge	0	0.0%	56	18.7%	0	0.0%	

\*Statistically significant  $p < 0.05$ .

state university in Turkey showed that 71.2% of participants were willing to donate their organs and a study done in Northwest Ethiopia showed that 74.6% of participants were willing to donate their organs (16).

The majority in the present study were keen to consider the opinion of their family members before donating or registering for organ donation and also, agreed to permitting their family members to donate organs after death or when alive. A study which was conducted in Changsha City in China showed that 88.9% of participants agreed to consider the willingness of the family and 296 among 417 participants agreed to respect the willingness of family members if needed to donate their organs (19).

In the present study, the majority of the participants agreed that the opinions of the society about organ donation had an impact on a person's decision about registering for organ donation, on regarding organ donation as a noble act and that it reflects the donor's value system, death is the end of life and it is better to help people in need, and that organ donation contributes to society and benefits humankind. A study conducted in Changsha City in China presented that 61.4% agreed that organ donation laws and regulations are not well developed, 53.4% of participants agreed that the individual's decision is affected by

the willingness of others and social atmosphere, 83.4% agreed that organ donation contributes to society and benefits humankind, and 82.5% agreed that death is final and it is better to help people in need (19).

According to the current study and previous studies, the level of attitude may differ from population to population with the majority having a moderate level of attitude towards organ donation. Despite having moderate attitude towards organ donation, teachers in the study population had a poor knowledge regarding organ donation. This can be due to not having subject curriculums related to organ donation, not integrating training programs with information related to organ donation, not having proper awareness programs, or exposure to information related to organ donation.

Organ donation can depend on age, gender, knowledge, attitude, religion, level of education, and work experience. According to the Pearson Chi-Square test in the present study, it was found that the level of knowledge regarding organ donation has a significant association with age ( $p=0.04$ ), religion ( $p=0.001$ ), and work experience ( $p=0.039$ ). A cross-sectional descriptive study done among undergraduate students of Hue University presented that age, knowledge, and attitudes were significantly correlated to the

willingness to organ donation (20). A cross-sectional study conducted in the Madina Teaching Hospital Faisalabad showed that knowledge and age were not significantly associated ( $p=0.575$ ), attitude was associated with age ( $p=0.017$ ), and that knowledge was significantly associated with education ( $p<0.001$ ), and socioeconomic status ( $p=0.003$ ) (1). A study conducted among a selected adult population in Pakistan stated that knowledge about organ donation was significantly associated with education ( $p<0.001$ ) and socioeconomic status ( $p=0.038$ ) (5).

Sri Lanka has many cultures and religions. These can affect the attitude regarding organ donation of a person. Culturally, some believe that the body should remain whole after death to maintain spiritual peace or ancestral respect. This can have a negative impact on organ donation. Religious beliefs also can affect the organ donation. Some religions may encourage organ donation as it helps people to save a life, but some religions which consider the human body as a sacred object may discourage organ donation (21,22).

## Conclusion

The participants had a poor level of knowledge regarding organ donation. However, most of the participants had a moderate level of attitude towards organ donation. Age, religion and work experience had a significant association with the level of knowledge regarding organ donation among teachers. Increasing the awareness related to organ donation among teachers by implementing awareness programs can help to grow the awareness regarding organ donation in the community because teachers can distribute the information via students to the whole community. Adding information related to organ donation to curriculums in subjects like Science and Health Education can also help to increase awareness related to organ donation.

## Limitations

Collecting data was challenging as there was a school vacation in between the data collection time and some teachers had taken leaves. Also, it took much time than expected to collect distributed questionnaires from the participants as they were busy with their schedules. This led the author to be unable to achieve the expected total sample size. Further, the majority of participants in the selected area were Sinhala and Buddhists, and a significant level of them were females. As this study was cross-sectional, the findings indicate associations rather than casual relationships. As the data were self-reported, responses may have been influenced by social desirability bias.

## Recommendations

It is recommended to conduct awareness programs related to organ donation through mass media and schools, include information related to organ donation to subject curriculums, and incorporate organ donation topics into teacher training programs. Also recommended to conduct qualitative studies to explore underlying cultural/religious barriers.

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