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An Analysis of Tzu Chi's Public Communication Campaign on Body Donation

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Abstract: Since the 1996 establishment of the Tzu Chi Body Donation Center, located at the Medical School of Tzu Chi University, campaigning for body donation has become one of Tzu Chi's on-going endeavors. By 2004, the Center has successfully secured more than 430 bodies and more than 14,000 pledges that outnumber all other medical schools in Taiwan. Why is it that the campaign messages could draw such an overwhelming response from the public, especially since the use of one's body after death is taboo in traditional Chinese belief? It is the purpose of this paper to examine the communication efforts of Tzu Chi's body donation campaign. In order to achieve this goal, McGuire's (2001) public communication model is used as the basis of the analysis in this study, which includes five components: (1) source, (2) message, (3) channel, (4) audience, and (5) destination. Limitations and directions for future research are discussed as well. [China Media Research. 2008; 4(1): 56-61]

Keywords: Body donation, public communication campaign, Tzu Chi, Cheng Yen

Unlike organ and tissue donation, which has been widely recognized and accepted, body donation to medical institutions for the educational purpose continues to face difficulty, due to the influence of cultural or religious beliefs. Thus, the lack of the whole body for medical teaching on human anatomy was and is still a common problem faced by medical institutions in most societies. It is not uncommon for 12 or more medical students to share a cadaver in an anatomy class (Yang Ming Medical School, 2004).

Body donation is especially difficult for people to accept in Asia. Although death is a tabooed territory in both Eastern and Western cultures, the study of death has gained its importance and popularity in the West, such as in the United States of America, since the mid-1960s. The attention to learning causes and effects of death has led Western people to be more able to face death and provide help to the dying and their caregivers (Robinson & Wood, 1984; Tam, 2001). In contrast, many Asian people still avoid talking about death because of their strong religious or folk beliefs. For example, in Japan, the teachings of Shinto consider that after death, the body is impure and dangerous; to injure a dead body not only must be avoided, but also is a serious crime. Thus, it is extremely difficult for a person to voluntarily donate his/her body after death, or obtain consent from bereaved families for organ or body donation to medical institutions for educational purposes (Namihira, 1990).

The Chinese as well are reluctant to talk about death; they tend to believe that talking about death may lead it to come soon. In addition, it is hard for Chinese to accept exposing one's dead body for dissection, even for medical educational purposes, because the practice is against traditional cultural values; such as to treasure one's parents' physical body before and after they die as

a way of showing filial piety. This strong belief of "keeping the whole body after death," (Pan, 2004) which is based on Confucian teachings, has been firmly held for two thousand years in Chinese society.

However, since the establishment of Buddhist Tzu Chi University in Hualien, Taiwan began to offer human anatomy class in its medical school in 1996. It has secured over 14,000 pledges for body donations in less than ten years; among them, 184 dead bodies have been used in Tzu Chi medical school and 249 were transferred by Tzu Chi University as a support to other medical institutions in Taiwan for educational purposes (Wang, 2004). While records show that the six medical schools in the Taipei area only received 181 total donated bodies until 2003, and the donation trend began to decline since 2001 (Zeng & Chen, 2004), what made Tzu Chi University so successful in appealing to the public for body donations in such a short period of time? The phenomenon is indeed worthy of examination from the academic perspective. The purpose of this study was then to analyze Tzu Chi's public communication campaign on body donation.

Body Donation

To make up one's mind to donate one's body after death for the purpose of medical education is an extremely difficult decision across cultures. While reasons for body donation were recorded in different nations, the scarcity of dead bodies for medical teaching continues to be a problem all over the world. So why were people motivated to donate their bodies after death? According to Richardson and Hurwitez's (1995) survey in the United Kingdom, the main reasons for people to consider donating their body were to further medical education, to assist medical progress, to avoid the wastage involved in conventional disposal, and to

avoid meaningless funeral expenses and ceremony. Among these reasons, altruism, or to help others, is the most dominant reason cross-culturally, which was also demonstrated by studies from Delmas (2001), Iserson (1994), and Nagy (1985).

Nevertheless, body donation for the purpose of medical education is one of the least frequent methods for people to choose for the final disposal of their remains (Bullen & Crase, 1998). Different aspects of body donation might contribute more difficulties to the donating process. Bullen and Crase (1998) surveyed 126 medical schools in the United States of America and found that those aspects included policies and procedures of body donation, limitations of body donation, preparation and disposal of the dead body, and supply of the dead body.

Policies and procedures of body donation refer to the receipt and use of cadavers by the medical schools or hospitals. This may concern the way of handling body preparations and whether the donation of a body can be done by the next of kin without the prior consent of the person being donated. Due to the vast area of the United States of America, medical schools in different areas vary in policies and procedures of body donation. Even in such a small island like Taiwan, the variations as well exist.

Limitations of body donation refer to the rejection of a body. The limitations of accepting a body undoubtedly reduce the number of donations. However, in order to enhance the quality of medical education and research, limitations of donations are an indispensable process. Normally, medical schools and hospitals need bodies that are not severely damaged, especially through disease or trauma. Other limitations may also include distance of the dead body, time of death, and age of the dead person. For example, the medical institute may not be willing to transport a body from the location of death due to the concern of expenses. Some institutes also impose upper age limits at the time of the donation.

Preparation and disposition of the body usually must follow guidelines of the medical institute: some schools may prefer to have, for example, embalming of cadavers by their own staff, others may entrust a local mortuary to do the job. It may take medical institutes one to three years to complete the use of the embalmed body. After that, how to handle the remains is another issue which concerns the donor's family. Either adhering to a policy of mandatory cremation or allowing the family to have interment of the remains, including what kind of funeral ceremony can be performed by the donor's family and memorial services, are factors influencing the consideration of donating one's body after death.

Finally, individuals tend to donate their body to a chosen medical institute and may request the specific usage (e.g., for teaching or scientific research purpose) of the body. However, the various requirements for body donation in different medical institutes may deter

the donation to reach a right place, which affects the supply of cadavers. While a few medical institutes have the body supply far more than needed (Corr, Nabe, & Corr, 1997), the shortage of body donations remains an obstacle most medical institutes have to overcome.

In addition to the factors described above, mainly regarding the technical aspects of body donation, people's perceptions and attitudes embedded in cultural or religious beliefs on the issue of body donation are much more difficult factors for medical institutes to receive enough bodies, especially in non-Western countries. Hence, how to conduct a public communication campaign to well inform people necessary procedure related information and persuade people to accept body donation through changing their perception on death and donation of their body after death become a great challenge for medical institutes to successfully achieve their goal.

Public Communication Campaigns

Public communication campaigns involve social change. From a system view, Thompson and Kinne (1999) synthesized social changes into five levels of community system: extra-systemic, community, inter-relationship, subsystem, and individual. Extra-systemic level refers to the external context, which includes pivotal events, secular trend, policies, and technology. Community level concerns operational components in the community, such as community development and planning, social movement, and vested interests.

Inter-relationship level and subsystem level regard organizational-level changes. While inter-relationship level deals with issues like advisory group for economic stability, coalition for community development, and network for community beautification, subsystem level refers to different sectors, (e.g., political, economic, health, education, religious, communication, recreational, social welfare, and voluntary) of the community organization, and focuses on how leadership and social networks are intertwined to achieve the goals of public communication campaigns. Finally, individual level has to do with the role of an individual in the community, which is concerned with intrapersonal characteristics such as personal belief, attitudes, value expectancy and behavior, and interpersonal relationships in the social learning process. A holistic view to see how the system is held together as a whole is the key to understanding and success of public communication campaigns.

More specifically, Bracht (2001) and Bracht, Kingsbury, and Rissel (1999) proposed a five-stage model of public communication campaigns: community analysis, design-initiation, implementation, maintenance-consolidation, and dissemination-reassessment. In the first stage of community analysis, a successful public communication campaign requires knowledge of the community system, which may

include the understanding of general community characteristic, structure, and history, and the community capacity and readiness for change. The focus of design and initiation of the second stage of a public communication campaign is to elicit or coordinate people's support and involvement. The main factors for achieving effectiveness of partnerships and coalitions consist of competent leadership, expertise in management of the coalition, community ability, conflict resolution skills, members' perception of fairness, shared decision making, and members' perceived benefits versus costs.

The third stage, campaign implementation, is to put ideas into action or translate design into operation. The key tasks in this stage are to clarify partners' roles and responsibilities, to provide suitable orientation and training, to adjust the plan to the local situation, and to generate broad people's participation. The fourth is the program maintenance consolidation stage, which aims to develop a solid foundation in the community, so that the campaign can gain people's acceptance. In this stage, it is important to maintain high levels of volunteer efforts, to establish a positive organizational climate, and, most importantly, to continue to integrate campaign activities into community networks. Finally, the fifth stage concerns dissemination and durability of the program. The key consideration in this stage is to strategically disseminate information on the campaign's outcomes and develop the plan for durability of campaign efforts. Thus, how to reassess the campaign activities and outcomes, refine the durability plan, and update the first-stage's community analysis account for the success of the whole campaign program.

From a communication perspective, McGuire (1989, 2001) proposed a communication-persuasion matrix, which includes input communication variables and output mediational steps that comprised the process of being persuaded in the public communication campaign. The matrix provides an effective way for campaign analysis. According to McGuire (1989), the input variables, as "the independent variables and persuasive message options that can be manipulated" (pp. 44-45), are the components for constructing the persuasive communication campaign. The input variables are source, message, channel, receiver, and destination. Source variables refer to the perceived communicator who delivers the persuasive message in the public communication campaign. Three factors enhancing the persuasive effect of messages include credibility, attractiveness, and power, and they are manifested through internalization, identification, and compliance process separately.

Message variables are comprised of delivery and message style, types and structure of argument, and types of appeals. Channel variables refer to media used to transmit persuasive message in the public

communication campaign "in the form of ads, public service announcements, news, documentaries, or interview programs" (McGuire, 2001, p. 28). The media can be audio, visual, written, spoken, verbal, nonverbal, immediate, and mediated. Receiver variables concern the audience or general public, who are the target of persuasive messages. To induce changes inevitably involve the examination of audience's demographics, ability, personality, and lifestyle (Eagly, 1981). As for destination variables, they are those target actions or attitudes the public communication campaign aims to influence. The analysis in this category may include the changes of beliefs, attitudes, and behavior, persistence of persuasive impact, and inducing resistance to persuasion (McGuire, 2001).

Together, these input variables of persuasive communication in public communication campaign lead to the impact on output variables, that may occur in a sequential order of persuasive steps: turning in to the communication, attending to the communication, liking and maintaining interest in the communication, comprehending the contents of the communication, generating related cognitions, acquiring relevant skills, agreeing with the communication's position, storing the new position in memory, retrieval of the new position from memory when relevant, decision to act on the basis of the retrieved position, acting on it, cognitive integration of this behavior, and proselytizing others to behave likewise (McGuire, 2001).

It was the purpose of this study to examine Tzu Chi's public communication campaign on body donation from the perspective of communication. McGuire's input variables of persuasive communication were used as the basis of the analysis.

Analysis

Procedure

In order to analyze Tzu Chi's body donation campaign from the perspective of communication, the leading author of this study spent a year at Tzu Chi University as a visiting scholar. During the year, the leading author participated in most of the activities involving the body donation program. The process includes observing body donation related rituals, visiting the sites of the body donation program, informally interviewing administrators of the body donation program and donors' family members, reading internal and external publications relating Tzu Chi's body donation program, and examining the organizational networking of Tzu Chi Foundation and communication channels in regard to body donation. These rich field data, enhanced by the information provided from the two co-authors teaching at Tzu Chi University, form a solid foundation for the purpose of this study in analyzing Tzu Chi's public communication campaign on body donation.

Scheme of Analysis

McGuire's (1989, 2001) persuasive communication model of public communication campaign was used as the basis of analyzing Tzu Chi's body donation campaign. As previously discussed, McGuire's model consists of five input variables: source, message, channel, receiver, and destination. Based on the authors' observation, the following scheme forms the framework of analysis:

(1) Source – to analyze the charisma of Dharma Master Cheng-Yen, the spiritual leader of the Tzu Chi Foundation, on her influence of the development of the body donation campaign.

(2) Message – to analyze messages used by Tzu Chi through different channels to effectively influence the cognitive patterns of people regarding body donation.

(3) Channel - to analyze the media strategies employed by Tzu Chi in distributing body donation messages to the public.

(4) Receiver – to analyze the potential donors and their families to understand factors that affect their motivations and resistance or reservation regarding the campaign messages.

(5) Destination – to analyze those target actions or attitudes the body donation campaign aims to influence.

Results

The section reports results of the analysis based on the five input variables:

Source

The analysis shows that the founder and spiritual leader of the Tzu Chi Foundation, Master Cheng-Yen, plays a key role in the success of Tzu Chi's body donation campaign. Cheng-Yen's charisma is built on four characters: determination, sincerity, compassion, and giving (Chang, 2004; Chen, 2006; Hang, 2005). Her determination in helping the poor and educating the rich led to the implementation of the Tzu Chi's four cardinal missions: education, medicine, charity, and culture. The establishment of educational institutes, hospitals, global charity networks, and cultural exchange worldwide build the backbone of the Tzu Chi Foundation, which as well mirrors her sincere, compassionate, and giving characters.

The crystallization of these four characters has led Master Cheng-Yen to receive numerous recognitions over the years, including the Magsaysay Award in 1991, a Nobel Peace Prize nomination in 1993, the Eisenhower Medallion, the People to People International Award in 1994, an International Human Rights Award in 1998, the Life Award, the Noel Foundation Award in 2001, an Outstanding Women in Buddhism Award in 2002, the Order of Brilliant Star with Grand Cordon Medal in 2003, and an Asian American Heritage Award for Humanitarian Service in 2004 (*Awards for Master Cheng Yen*, n.d.).

Cheng-Yen's charismatic character and deeds not only made her a leader, but also a hero within and without the Tzu Chi organization. Her influence and persuasive power towards the change of people's perception on body donation were then built.

Message

Two powerful sayings among the abundant messages toward Tzu Chi's body donation campaign greatly facilitate the attention, comprehension, yielding, and retention of cognitive process of the public. As the core messages, accompanied with various information evolved from them, the two sayings contributed to persuading the public to reinterpret their traditional beliefs and values in perceiving the issue of death and in treating the body after death.

The first saying was uttered by Master Cheng-Yen to stipulate the relationship between human beings and their physical body, "Human beings don't have ownership of their physical body, but only the right of using it" (Chang, 2004, p. 266).

The second saying was expressed by a body donor, before he died, to medical students, "We would rather allow the medical students to make twenty mistakes on dissecting my husband's/father's body than have them made one single mistake on any patient when they are practicing" (Tzu Chi Humanity Center, 2001, p. 5).

Channel

The integration of mass media and interpersonal/group networks is the key to the success of Tzu Chi's body donation campaign. The communication networks connect every part of the Tzu Chi Foundation; one of the largest charity organizations originating from Taiwan, with offices in over twenty countries.

Mass media employed by Tzu Chi in its body donation campaign embrace printing and broadcasting channels, including books, periodicals, cable television, and websites. Among them, *Still Thoughts* (a book collection of succinct quotations of Master Cheng Yen's daily talks) and the *Da Ai* cable television station, aim to promote the respect of life and affirm humanity to every corner of the world; becoming the most powerful media channels influencing the public perception on body donation.

The influence through interpersonal/group networks is embedded in Master Cheng Yen's personal touch and the efforts of the Tzu Chi Merit Foundation. In addition to Master Cheng Yen's regular interaction with the public and her personal influence via the daily morning lectures at Abode, the formation of the Tzu Chi Merit Foundation in 1966 is the most influential group network changing the public beliefs, values, and behaviors regarding body donation. Using the teamwork built on interpersonal concern to help those needy people enables the dissemination of Tzu Chi's missions

on charity, medicine, education, and culture with the spirit of sincerity, integrity, trust, honesty, and the belief of kindness, compassion, joy, and giving (Chen, 2006). The persuasive power to the 30,000 certified members of the Tzu Chi Merit Foundation and over 5 million supporters are enormous.

Receiver

Based on informal interaction and interviews with potential donors and their family members, relatives, or friends and the content analysis of 87 body donors' stories, compiled in the four volumes of *Silent Teachers* (Chang, 1999; Tzu Chi Humanity Center, 2001, 2002, 2003), we found that the body donors ranged from 16 to 93 in age and were from all walks of life. The main reasons for them to donate their body include: (1) motivated by Master Cheng Yen's teachings, (2) being a member of the Tzu Chi Merit Foundation, (3) returning the long-term help from the Tzu Chi Merit Foundation, (4) simply wanted to help people, (5) persuaded by family members, and (6) decided by their family members.

Destination

Tzu Chi Foundation's ambition in persuading people to donate their body after death by changing the traditional beliefs of treasuring one's body is a success so far. However, the analysis indicated that most donors were related to the Tzu Chi Foundation, either as a member, a member's relatives or friends, or being influenced by the personal touch of Master Cheng Yen. The question to be considered is how persistent can this persuasive impact be? In other words, the success is largely solidified by Master Cheng Yen, the spiritual leader of the organization. If, for example, after the death of Master Cheng Yen, will her influence be sustained and extended, so that the body donation call can continue to flourish?

Discussion

Death is a tabooed topic and respect to one's body is a deep traditional belief in Chinese society; to persuade Chinese people to donate their body after death for medical and educational purposes is a tremendously difficult task. Amazingly, only for less than ten years, the Tzu Chi Body Donation Center in Taiwan has successfully received more bodies and pledges than any other institutes-, not only in the Chinese world, but also in other societies. This successful effort not only represents a valuable example for the study of body donation from the perspective of public communication campaign, but also provides a new direction for the study of health communication and spiritual communication. By using the five components of McGuire's public communication model, including source, message, channel, receiver,

and destination, this study analyzed Tzu Chi's public communication campaign on body donation.

It was found that the spiritual leader, Master Cheng Yen of the Tzu Chi Foundation, is the key to the willingness of her followers to donate their bodies. "Human beings don't have ownership of their physical body, but only the right of using it" (Chang, 2004, p. 266) and "We would rather allow the medical students to make twenty mistakes on dissecting my husband's/father's body than have them made one single mistake on any patient when they are practicing" (Tzu Chi Humanity Center, 2001, p. 5) are the two representative messages that touch the heart of the public and motivate them to sign the body donation form. The charisma of Master Cheng Yen and the two powerful messages emitted and publicized through the integration of mass media and interpersonal/group networks together play an important role in influencing the public perception on body donation.

As to the receiver factor, the analysis found that most donors were motivated by Master Cheng Yen's teachings and were related to the Tzu Chi Merit Foundation, while others were persuaded by their family members to sign the body donation form. Finally, although Tzu Chi's body donation campaign is a success so far from the perspective of destination, the success of the persuasive impact needs to be tested by time for its persistence, so that the long term goal of body donation achievements can be assessed.

Although the findings of the analysis provided an effective lens to understand the successful public communication campaign of body donation launched by the Tzu Chi Foundation, it was examined only from the perspective of communication. For future research, examining the body donation campaign from other perspectives, e.g., social and economic, can help to draw a more complete picture in terms of understanding the Tzu Chi Foundation's efforts. In addition, because all the body donors were from Taiwan, future research may go one step further to explore the possible impact of the body donation campaign in other Chinese communities, such as mainland China and Hong Kong, or between different cultural groups or nations.

Finally, according to Rogers (1995), the adoption of an innovation is determined by five factors: relative advantage, compatibility, complexity, trialability, and observability. Applied to Tzu Chi's body donation campaign, we found that the success of the campaign seems to go against all these factors in order for the diffusion of message to reach innovation. For example, the relative advantage of body donation is not manifest and measurable, and there is no way to evaluate why donating one's body is better than the traditional belief of respect for the body. The action of body donation, as to compatibility, is not consistent with existing beliefs or values either. In addition, the psychological struggles

for a person to make the decision for donating a body is quite complicated, although signing the consent form requires only a simple act. Moreover, trialability and observability are low too because one can only experience death once, which makes it difficult for one to compare the relative impact of body donation and cannot observe immediately the benefits of body donation as a donor. Further research is needed to investigate why this discrepancy between theory and practice exists, especially from a cultural perspective, which may provide an opportunity to refine an existing theory.

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