Supplementary material

Supplementary Methods

The study was based at 14 UK hospitals: Belfast, Birmingham, Bristol, Cambridge, Epsom and St Helier, Guy's and St Thomas's, Imperial, Leicester, Manchester, Newcastle upon Tyne, Nottingham, Oxford, Sheffield, and St George's.

Table S1. Responders and non-responders

	Total invited	Participants	Non-participants			
	n=3103 (%)	n=1240 (%)	n=1863 (%) ^a			
Sex						
Male	1902 (61)	705 (57)	1197 (64)			
Female	1201 (39)	514 (41)	687 (37)			
Missing	0	21 (2)	0			
Renal Transplant type						
Live-donor	1462 (47)	672 (54)	790 (42)			
Deceased-donor	1641 (53)	565 (46)	1076 (58)			
Missing	0	3 (0.2)	0			

^a As % were rounded up to the nearest whole number some totals are more than 100%. We could not analyse response by age as people were sampled by age at transplant and then asked to enter their current age in the questionnaire.

Table S2. Responders compared to national denominator population

Characteristics		Study DDKT recipients %	National population of DDKT recipients 2013-2017	Chi2 p-value	Study LDKT recipients %	National population of LDKT recipients 2013-2017	Chi² p-value
Sex (%)	Male Female	58 42	62 38	0.56	58 42	59 41	0.89
Age (years)	50-59	28	26	0.75	27	23	0.51
	60-69	24	22	0.74	25	15	0.08
Ethnicity (%)	White BAME/Other	82 18	73 27	0.13	89 11	83 17	0.22

Individuals with missing data for each characteristic excluded from figures to allow direct comparison to published NHS Blood and Transplant data

Supplementary Missing data

Case-control variable

0.24% (n=3) were missing a data on case-control status (transplant type: i) living-donor or ii) deceased-donor transplant). This was as a result of the questionnaire code not being entered by participants who chose to complete the questionnaire online. Participants for whom case-control status was not recorded were more likely to also have missing data for age (2/3 had age missing, Chi² p<0.001), sex (2/3 had sex missing, Chi² p<0.001), ethnicity (2/3 were missing ethnicity, Chi² p<0.001), and IMD rank quintile (2/3 were missing education, Chi² p<0.001).

Education

6.69% (n=83) missing overall.

Those with missing data for age, sex, ethnicity, and transplant type were more likely to have missing data for this variable. When focusing on individuals with recorded demographic data (age, sex, ethnicity and transplant type), no pattern of missingness with age (Chi^2 p=0.47), sex (Chi^2 p=0.12), or transplant type (Chi^2 p=0.17) but maybe with ethnicity (Chi^2 p<0.001) – suggested that black patients' and those from 'other ethnic groups' are more likely to have missing data.

Age

2.74% (n=34) missing overall.

Those with missing data for sex, ethnicity, education and transplant type were more likely to have missing data for this variable. When focusing on individuals with recorded demographic data, no pattern of missingness with sex (Chi^2 p=0.05), education (no participants with age missing but education recorded), ethnicity (Chi^2 p=0.97) or transplant type (Chi^2 p=0.89).

Sex

1.69% (n=21) missing overall.

Those with missing data for age, ethnicity, education and transplant type were more likely to have missing data for this variable. When focusing on individuals with recorded demographic data, no pattern of missingness with age, education, ethnicity or transplant type (Chi^2 p=0.75).

Ethnicity

2.42% (n=30) missing overall.

Those with missing data for age, ethnicity, education and transplant type were more likely to have missing data for this variable. When focusing on individuals with recorded demographic data, no

pattern of missingness with age (Chi^2 p=0.73), or transplant type (Chi^2 p=0.94), but maybe with sex (Chi^2 p=0.03) – women more likely to have missing data, but numbers very small. Only one person had missing ethnicity and education data.

Table S3a. Difference in beliefs with participant sex

Belief statement	Sex	Disagree	Agree	Don't know	Chi ²
		(%)	(%)	(%)	p-value
 It is morally acceptable to take a kidney from a healthy person. 	Female	35 (7.0)	433 (86.6)	32 (6.4)	0.12
	Male	30 (4.3)	618 (88.7)	49 (7.0)	
2. Donors often agree to donate due to feelings of guilt or family pressure.	Female	251 (49.8)	108 (21.4)	145 (28.8)	0.15
	Male	378 (54.3)	120 (17.2)	198 (28.5)	
3. Donating a kidney is a rewarding experience for the live donors.	Female	14 (2.8)	405 (80.4)	85 (16.9)	0.13
	Male	12 (1.7)	591 (84.6)	96 (13.7)	
4. Donating a kidney to someone requires an extremely close personal	Female	340 (67.3)	125 (24.8)	40 (7.9)	0.90
relationship.	Male	471 (67.4)	168 (24.0)	60 (8.6)	
5. A living donor kidney transplant may strengthen the relationship	Female	64 (12.7)	337 (66.7)	104 (20.6)	0.20
between the donor and recipient.	Male	77 (11.0)	500 (71.5)	122 (17.5)	
6. Approaching a potential donor who then says no will change the	Female	221 (44.0)	100 (19.9)	181 (36.1)	0.37
relationship between the two people.	Male	336 (48.1)	125 (17.9)	238 (34.1)	
7. Asking someone to donate makes the recipient seem selfish.	Female	235 (46.7)	148 (29.4)	120 (23.9)	0.79
	Male	337 (48.4)	193 (27.7)	167 (24.0)	
8. It is acceptable for a parent to receive a kidney from his/her child (over	Female	69 (13.7)	361 (71.5)	75 (14.9)	<0.001
18 years old).	Male	54 (7.7)	567 (81.1)	78 (11.2)	
9. Decisions about donation should be made by the donor alone. The	Female	115 (22.8)	326 (64.7)	63 (12.5)	0.52
recipient should not ask for a kidney.	Male	179 (25.6)	432 (61.9)	87 (12.5)	
10. Since the donor operation is not risk free, someone who needs a kidney	Female	420 (83.3)	34 (6.8)	50 (9.9)	0.49
transplant should wait for a kidney from someone who has died.	Male	575 (82.3)	41 (5.9)	83 (11.9)	

Table S3b. Difference in beliefs with participant age

Belief	statement	Age	Disagree (%)	Agree (%)	Don't know (%)	Chi² p-value
1.	It is morally acceptable to take a kidney from a healthy person.	<60 years	46 (6.2)	643 (87.3)	48 (6.5)	0.25
		≥60 years	18 (4.0)	397 (88.8)	32 (7.2)	
2.	Donors often agree to donate due to feelings of guilt or family pressure.	<60 years	420 (56.8)	143 (19.4)	176 (23.8)	<0.001
		≥60 years	202 (45.1)	83 (18.5)	163 (36.4)	
3.	Donating a kidney is a rewarding experience for the live donors.	<60 years	20 (2.7)	612 (82.6)	109 (14.7)	0.30
		≥60 years	6 (1.3)	375 (83.5)	68 (15.1)	
4.	Donating a kidney to someone requires an extremely close personal	<60 years	492 (67.4)	176 (24.1)	62 (8.5)	0.33
	relationship.	≥60 years	254 (70.8)	83 (23.1)	22 (6.1)	
5.	A living donor kidney transplant may strengthen the relationship	<60 years	86 (11.6)	535 (72.1)	121 (16.3)	0.02
	between the donor and recipient.	≥60 years	51 (11.4)	296 (65.9)	102 (22.7)	
6.	Approaching a potential donor who then says no will change the	<60 years	347 (46.8)	164 (22.1)	230 (31.0)	<0.001
	relationship between the two people.	≥60 years	205 (45.9)	59 (13.2)	183 (40.9)	
7.	Asking someone to donate makes the recipient seem selfish.	<60 years	393 (53.2)	210 (28.4)	136 (18.4)	<0.001
		≥60 years	176 (29.3)	129 (28.8)	143 (31.9)	
8.	It is acceptable for a parent to receive a kidney from his/her child (over	<60 years	71 (9.6)	584 (78.7)	87 (11.7)	0.23
	18 years old).	≥60 years	52 (11.6)	334 (74.4)	63 (14.0)	
9.	Decisions about donation should be made by the donor alone. The	<60 years	223 (30.1)	420 (56.8)	97 (13.1)	<0.001
	recipient should not ask for a kidney.	≥60 years	69 (15.4)	328 (73.1)	52 (11.6)	
10	Since the donor operation is not risk free, someone who needs a kidney	<60 years	625 (84.4)	38 (5.1)	78 (10.5)	0.09
	transplant should wait for a kidney from someone who has died.	≥60 years	360 (80.2)	36 (8.0)	53 (11.8)	

Table S3c. Difference in beliefs with participant education

Belief statement	Higher education level	Disagree (%)	Agree (%)	Don't know (%)	Chi² p-value
1. It is morally acceptable to take a kidney from a healthy person.	No university education	34 (4.7)	637 (87.9)	54 (7.5)	0.06
	University education	21 (5.9)	322 (90.2)	14 (3.9)	
2. Donors often agree to donate due to feelings of guilt or family pressure.	No university education	388 (53.4)	137 (18.8)	202 (27.8)	0.68
	University education	181 (50.6)	72 (20.1)	105 (29.3)	
3. Donating a kidney is a rewarding experience for the live donors.	No university education	19 (2.6)	616 (84.4)	95 (13.0)	0.15
	University education	4 (1.1)	298 (83.2)	56 (15.6)	
4. Donating a kidney to someone requires an extremely close personal	No university education	492 (67.4)	176 (24.1)	62 (8.5)	0.33
relationship.	University education	254 (70.8)	83 (23.1)	22 (6.1)	
5. A living donor kidney transplant may strengthen the relationship	No university education	94 (12.9)	504 (69.0)	132 (18.1)	0.008
between the donor and recipient.	University education	26 (7.2)	276 (76.9)	57 (15.9)	
6. Approaching a potential donor who then says no will change the	No university education	358 (49.2)	122 (16.8)	248 (34.1)	0.03
relationship between the two people.	University education	151 (42.1)	82 (22.8)	126 (35.1)	
7. Asking someone to donate makes the recipient seem selfish.	No university education	332 (45.7)	204 (28.1)	190 (26.2)	0.01
	University education	188 (52.4)	105 (29.3)	66 (18.4)	
8. It is acceptable for a parent to receive a kidney from his/her child (over	No university education	75 (10.3)	568 (77.8)	87 (11.9)	0.87
18 years old).	University education	38 (10.6)	282 (78.6)	39 (10.9)	
9. Decisions about donation should be made by the donor alone. The	No university education	166 (22.7)	482 (66.0)	82 (11.2)	0.04
recipient should not ask for a kidney.	University education	103 (28.9)	208 (58.3)	46 (12.9)	
10. Since the donor operation is not risk free, someone who needs a kidney	No university education	604 (82.9)	51 (7.0)	74 (10.2)	0.51
transplant should wait for a kidney from someone who has died.	University education	306 (85.2)	19 (5.3)	34 (9.5)	

Table S3d. Difference in beliefs with participant ethnicity

Belief	statement	Ethnicity	Disagree (%)	Agree (%)	Don't know (%)	Chi² p-value
1.	It is morally acceptable to take a kidney from a healthy person.	White	54 (5.4)	900 (89.1)	56 (5.5)	0.002
	, , , , , , , , , , , , , , , , , , , ,	BAME ^a	11 (6.6)	134 (80.7)	21 (12.7)	
2.	Donors often agree to donate due to feelings of guilt or family pressure.	White	535 (52.9)	192 (10.0)	285 (28.2)	0.63
		BAME	83 (49.7)	31 (18.6)	53 (31.7)	
3.	Donating a kidney is a rewarding experience for the live donors.	White	22 (2.2)	855 (84.2)	138 (13.6)	0.07
		BAME	4 (2.4)	129 (77.3)	34 (20.4)	
4.	Donating a kidney to someone requires an extremely close personal	White	697 (68.7)	244 (24.0)	74 (7.3)	0.05
	relationship.	BAME	104 (61.9)	43 (25.6)	21 (12.5)	
5.	A living donor kidney transplant may strengthen the relationship	White	114 (11.2)	715 (70.4)	186 (18.3)	0.32
	between the donor and recipient.	BAME	24 (14.3)	109 (64.9)	35 (20.8)	
6.	Approaching a potential donor who then says no will change the	White	471 (46.5)	190 (18.8)	351 (34.7)	0.88
	relationship between the two people.	BAME	81 (48.2)	29 (17.3)	58 (34.5)	
7.	Asking someone to donate makes the recipient seem selfish.	White	483 (47.7)	292 (28.9)	237 (23.4)	0.77
		BAME	79 (47.3)	45 (27.0)	43 (25.8)	
8.	It is acceptable for a parent to receive a kidney from his/her child (over	White	104 (10.3)	787 (77.5)	124 (12.2)	0.62
	18 years old).	BAME	16 (9.5)	127 (75.6)	25 (14.9)	
9.	Decisions about donation should be made by the donor alone. The	White	247 (24.4)	649 (64.1)	117 (11.6)	0.28
	recipient should not ask for a kidney.	BAME	43 (25.6)	99 (58.9)	26 (15.5)	
10.	Since the donor operation is not risk free, someone who needs a kidney	White	864 (85.2)	57 (5.6)	93 (9.2)	<0.001
	transplant should wait for a kidney from someone who has died.	BAME	116 (69.1)	16 (9.5)	36 (21.4)	

^a BAME - Black, Asian and Minority Ethnic group

Table S3e. Difference in beliefs with participant religion

Belief s	tatement	Religion	Disagree	Agree	Don't know	Chi ²
			(%)	(%)	(%)	p-value
1.	It is morally acceptable to take a kidney from a healthy person.	No religion	18 (5.5)	291 (89.3)	17 (5.2)	0.01
		Christian	33 (4.7)	626 (88.7)	47 (6.7)	
		Other religion ^a	10 (8.9)	88 (77.9)	15 (13.3)	
2.	Donors often agree to donate due to feelings of guilt or family pressure.	No religion	161 (49.1)	71 (21.7)	96 (29.3)	0.22
		Christian	389 (55.0)	123 (17.4)	195 (27.6)	
		Other religion	54 (47.8)	27 (23.9)	32 (28.3)	
3.	Donating a kidney is a rewarding experience for the live donors.	No religion	3 (0.9)	264 (80.0)	63 (19.1)	< 0.001
		Christian	19 (2.7)	612 (86.4)	77 (10.9)	
		Other religion	4 (3.5)	82 (72.6)	27 (23.9)	
4.	Donating a kidney to someone requires an extremely close personal	No religion	232 (70.3)	73 (22.1)	25 (7.6)	0.08
	relationship.	Christian	481 (67.8)	176 (24.8)	52 (7.3)	
		Other religion	67 (59.3)	30 (26.6)	16 (14.2)	
5.	A living donor kidney transplant may strengthen the relationship between	No religion	36 (10.9)	231 (70.0)	63 (19.1)	0.82
	the donor and recipient.	Christian	83 (11.7)	501 (70.7)	125 (17.6)	
		Other religion	13 (11.5)	75 (66.4)	25 (22.1)	
6.	Approaching a potential donor who then says no will change the	No religion	139 (42.1)	83 (25.2)	108 (32.7)	0.008
	relationship between the two people.	Christian	344 (48.7)	111 (15.7)	251 (35.6)	
		Other religion	49 (43.4)	24 (21.2)	40 (35.4)	
7.	Asking someone to donate makes the recipient seem selfish.	No religion	153 (46.5)	108 (32.8)	68 (20.7)	0.30
		Christian	350 (49.5)	188 (26.6)	169 (23.9)	
		Other religion	51 (45.5)	35 (31.3)	26 (23.2)	
8.	It is acceptable for a parent to receive a kidney from his/her child (over 18	No religion	37 (11.2)	261 (79.1)	32 (9.7)	0.31
	years old).	Christian	69 (9.7)	542 (76.5)	98 (13.8)	
		Other religion	12 (10.6)	83 (73.5)	18 (15.9)	
9.	Decisions about donation should be made by the donor alone. The recipient	No religion	82 (25.0)	205 (62.5)	41 (12.5)	0.32
	should not ask for a kidney.	Christian	165 (23.3)	460 (64.9)	84 (11.9)	
	·	Other religion	36 (31.9)	62 (54.9)	15 (13.3)	
10.	Since the donor operation is not risk free, someone who needs a kidney	No religion	292 (88.8)	11 (3.3)	26 (7.9)	<0.001
	transplant should wait for a kidney from someone who has died.	Christian	594 (83.8)	46 (6.5)	69 (9.7)	
	,	Other religion	73 (64.6)	13 (11.5)	27 (23.9)	

^a Muslim/Hindu/Jewish/Sikh/Buddhist/Other - combined due to small numbers including single participant responders in some groups risking identification.

Table S4. Comparison with participants in ATTOM study

ATTOM study - 72% of invited participants in final analysis

Bailey et al study - 40% of invited participants in final analysis

	ATTOM participants Likelihood of LDKT over DDKT Unadjusted OR (p-value)	Participants in Bailey et al study Likelihood of LDKT over DDKT Unadjusted OR (p-value)
No qualifications	Reference	Reference
University	0.39 (p <0.001)	0.46 (p=0.02)
School level education	Reference	Reference
University education	0.73 (p=0.009)	0.72 (p=0.05)

	ATTOM participants Likelihood of LDKT over DDKT Adjusted OR (p-value)	Participants in Bailey et al study Likelihood of LDKT over DDKT Adjusted OR (p-value)
No qualifications	Reference	Reference
University	0.55 (p <0.001)	0.48 (p=0.03)
School level education	Reference	Reference
University education	0.76 (p=0.01)	0.69 (p=0.001)