Many choices in daily life come with a no-action default, that is, a condition imposed when one actually fails to make a decision. For example, Web surfers who forget to check the opt-out button may receive a stream of unwanted spam.

Eric J. Johnson, Columbia Business professor and co-director of the University’s Center for Decision Sciences, has been intrigued with the issue of default decision-making for years. What happens, for instance, when consumers are offered the choice of opting-in or opting-out of an auto insurance policy or pension plan? Do participant rates go up or down?

Yet Johnson has now set out to tackle a more serious public policy issue. Can opt-in or opt-out be a matter of life or death? When Johnson and the Center’s associate director Daniel Goldstein began their critical study comparing national organ-donation policies, the facts spoke for themselves.

Since 1995, more than 45,000 people in the United States have died while waiting for a suitable donor organ. Although polls seemed to confirm that 85 percent of Americans approve of organ donations, less than half of Americans seem to confirm that 85 percent of Americans approve of organ donations, less than half of Americans approve of organ donations.

Johnson and Goldstein noted in an article recently published in Science magazine, “And in explicit consent countries, nobody is an organ donor without registering to be one.”

But with the severe donor shortage worldwide, it makes sense to explore an opt-out policy if so many are really favorable towards, or agnostic about, organ donation. Americans, especially, may be waiting for the right time to explore the sensitive subject with family members or fill out a donor card. Social scientists’ proposals for increasing donation in this country have traditionally assumed that Americans find little value in donating organs. Johnson and Goldstein had their own premise: opt-defaults could greatly influence the final numbers. They then proceeded to examine the issue through online experiments, archival research, and econometric analysis.

Research showed that participants were twice as likely to say they would be donors when they were asked the question in an opt-out form, rather than the current American opt-in policy. In the United States, this would translate into an additional thousand donors a year. Yet, when one considers the possible personal reasons that people may decline to donate—from religious to psychological—the issue of changing national public policy programs becomes more complex.

“Every public policy has a default and that default affects people’s decisions more than we think it would or should,” said Johnson. “Determining why Americans are inclined to opt-out of a donor program is the next logical step. “It is clear to us now that defaults could help thousands of desperately ill Americans.”

Professor Johnson and Daniel Goldman completed the study “Do Defaults Save Lives?” under the auspices of the Center for Decision Sciences, a multidisciplinary research center in Columbia’s Institute for Social and Economic Research and Policy.