

Johnson & Johnson

Our Global Giving

2012 CONTRIBUTIONS REPORT



About Our Giving

OUR WORLD OF more than seven billion people is a world of hope and possibility. It is also a world of issues and challenges that disproportionately impact the health, safety and survival of girls, women and children. At Johnson & Johnson, mothers and children are at the center of our humanitarian work because we understand that focusing on the survival and health of a mother directly impacts the health and well-being of her entire family and, by extension, her community. The opportunity to visit communities around the world consistently reminds me of the strength and resilience of families for whom access to basic health services is elusive, and for whom survival is not taken for granted

Our Credo continues to inspire our company's humanitarian work through a simple but powerful idea, "We are responsible to the communities in which we live and work, and to the world community as well." Our mission is to make life-changing, long-term differences in human health by targeting the world's major health-related issues. Understanding that the needs of communities are specific to local realities and conditions, we fulfill our mission through enduring partnerships that deliver community-based solutions. These partnerships span three strategic focus areas: saving and improving the lives of women and children; preventing disease in vulnerable populations; and strengthening the health care workforce. We never forget that this work is accomplished through collective and individual efforts that touch and can forever change lives. Each person involved has a story to tell—

a story of overcoming difficulties, a story of success, a story of loss. This report is a tribute to our colleagues, to our partners, and to the communities in which we work together to make life-changing, long-term differences in human health.

Our Commitment to the Millennium Development Goals

In 2010, Johnson & Johnson responded to the UN Secretary General's Call-to-Action for a renewed global effort to advance the Millennium Development Goals (MDG), particularly those focused on maternal and child health and survival. Johnson & Johnson made a comprehensive, five-year commitment to reach as many as 120 million women and children each year by 2015, in at least 50 countries where need is significant and resources are scarce.

Building on a long legacy of innovation and partnerships to improve the survival and health of women, children and families, we have made significant progress in the five areas of our MDG commitment: preventing mother-to-child HIV transmission; making childbirth safer; reaching mothers with life-saving health information through their mobile phones; treating children at-risk for intestinal worms and preventing reinfection and increasing research and development for new medicines to treat HIV, tuberculosis and other conditions.

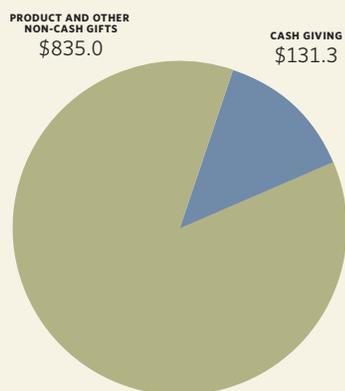
The lives of women and children are at increased risk without adequate pre-natal care, the presence of a skilled birth attendant or ongoing guidance on the care and nutrition of infants. In 2011, more than 287,000 mothers died from complications in pregnancy and childbirth, and more than 3 million newborns died in their first month of life. The statistics are staggering, especially because the vast majority of these deaths are preventable. In fulfilling our MDG commitment, Johnson & Johnson became a founding partner in three new partnerships focused on increasing the number of frontline health care workers with the skills to recognize and quickly address the complications that often arise during and immediately after pregnancy and childbirth.

ON THE PRECEDING PAGE In Bangladesh, MAMA (Mobile Alliance for Maternal Action) is empowering young mothers to better care for their new and unborn children through the power of mobile technology.

2012 Cash Gifts and Product

(in \$U.S. Millions)

Total Giving: \$966.3



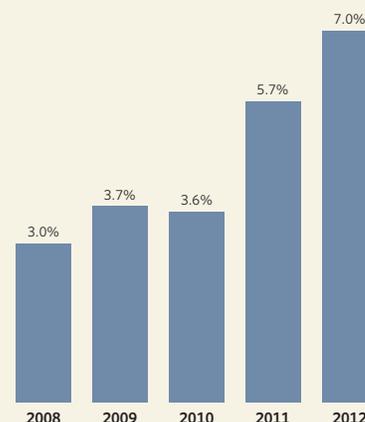
Cash and Non-Cash Giving

(in \$U.S. Millions)



Total Giving

as a Percentage of Worldwide Pretax Income



The UN's **Health Four+** (H4+) provides training of skilled birth attendants to ensure better outcomes for more mothers and babies. Johnson & Johnson partners with the H4+, a first-of-its-kind partnership to train skilled birth attendants in emergency obstetric and newborn care and to develop the health care workforce in Ethiopia and Tanzania. The partners include UNAIDS, the UN Population Fund (UNFPA), UNICEF, the World Bank, UN Women, and the World Health Organization.

Helping Babies Breathe trains health care workers in low-resource settings to intervene when newborns have birth asphyxia, a potentially fatal inability to take the first breath of life. With Save the Children, the American Academy of Pediatrics, and the United States Agency for International Development (USAID), our Helping Babies Breathe partnership aims to prevent this condition in Malawi and Uganda. This is an extension of a decade of work to address birth asphyxia, including a partnership in China that saved more than 90,000 babies in the first five years and cut birth asphyxia deaths by half in 360 hospitals. We are now supporting programs to address birth asphyxia in 12 countries.

Survive & Thrive, a new Global Development Alliance created in 2012, brings U.S. obstetric, pediatric and midwifery professional associations together with the United States Agency for International Development (USAID), private sector and civil society organizations in a first-of-its-kind partnership to improve the quality of facility-based maternal, newborn and child health services. Johnson & Johnson is supporting the initial work of this program in Burma, also known as Myanmar, in support of a new U.S. government partnership with that country to lay the groundwork for a peaceful and prosperous future.

Disaster Response

Few of us ever imagine we will experience the effects of natural disasters, but we know that for those who do, every bit of help is an additional step on the long road to recovery. Johnson & Johnson has a century-long legacy of working with partners who specialize in responding to disasters by addressing short-term and longer-term needs. Immediate action includes distribution of disaster relief modules containing essential Johnson & Johnson products that help meet emergency medical needs. Our other contributions range from what we can give—cash, medicines, first aid items, personal hygiene kits and blankets for children displaced by disaster—to what we can do—engage employees who give of their time and expertise to assist those in need. Longer-term, we support partnerships with grant-making programs that aid recovery.

In the past two years we've responded to an increasing number of large, destructive tropical storms including Hurricane Irene which affected much of the Caribbean and East Coast of the United States during late August of 2011; Hurricane Isaac which caused severe damage in the Caribbean and along the northern Gulf Coast of the United States in late-August 2012; and superstorm Sandy, the deadliest and most destructive storm of the 2012 Atlantic hurricane season, which landed right at our headquarters' doorstep.

The storm affected many of our families, friends and communities, as well as systems within our company facilities, testing our ability to respond. The resiliency of our colleagues and our disaster relief partners lived up to our commitments, despite the difficulties imposed by the storm. Our partners stood ready even before the storm struck; employee giving was matched, as were contributions to the American Red Cross, and Johnson & Johnson employees volunteered to help with disaster relief efforts. Despite challenges, the people of Johnson & Johnson stayed true to Our Credo and our underlying commitment to help those in need.

Our disaster assistance extends beyond immediate impact, focusing on long-term recovery for devastated communities. We

are still supporting work in Haiti three years after the earthquake that impacted millions of people. We are also supporting recovery in Japan two years after the devastating Tohoku earthquake and tsunami. Progress in rehabilitation of affected communities has been challenged by the sheer magnitude of destruction as well as the complexity of coordination between stakeholders. Our long-term commitment, especially focusing on restoring and advancing health care, will have long-lasting impact that is as important as what we bring to immediate disaster response.

Our Financial Commitments

Johnson & Johnson is among the world's largest corporate donors, contributing \$966.3 million in products and cash in 2012. We support more than 600 programs that address major health-related issues in local communities in more than 50 countries, impacting tens of millions of lives worldwide.

The company contributed \$131.3 million in cash to organizations in the United States and around the world for corporate and operating companies' programs and projects like those highlighted above.

Johnson & Johnson companies made \$835.0 million in non-cash contributions (product donations are reported at fair market value, which is consistent with the reporting methods of nonprofit organizations). Of these contributions, the Company donated \$612.2 million of selected prescription products to patients without adequate financial resources in the U.S. through the Johnson & Johnson Patient Assistance Program. Through this program, our companies have provided more than 3 million units of medicine free of charge to nearly half a million U.S. patients over the past three years. The balance of non-cash contributions went to private voluntary organizations that assist medically underserved people in developing countries and provide emergency disaster relief.

We manage our Contributions Program within guidelines approved by the Johnson & Johnson Executive Committee. Total giving of \$966.3 million in 2012 increased by 36.85 percent from \$706.1 million in 2011, consistent with our continuing commitment to our philanthropic and patient assistance programs. Our Contributions budget is established well before the start of each fiscal year, so our giving as a percentage of year-end pretax income thus varies from year to year, as fluctuations in year-end pretax income become apparent. For 2012, our giving represented 7.0 percent of annual worldwide adjusted pretax income.

Our Commitment Moving Forward

In every region of the world, our employees bring their passion and expertise to the more than 600 programs in over 50 countries. Business acumen, evaluation metrics, process rigor and proven program modeling are all part of what our colleagues bring to help touch and transform lives. We are strategic, innovative thought partners, bringing a global, private-sector perspective to our work with partners addressing the needs of local communities.

This is especially important as innovative solutions are needed to solve the world's increasingly complex health-related problems. Making contributions that leverage our unique expertise, we seek collaborative solutions and innovative approaches that can be brought to scale. For example, our work with the Mobile Alliance for Maternal Action (MAMA) demonstrates how, by collaborating with partners and leveraging mobile technology, critical health information can be delivered to new and expecting moms via mobile phones. Together with these partners, BABYCENTER®, a Johnson & Johnson company, created the stage-based health information that is delivered in a simple text or voice message and is designed to be adaptable to any language. This information is now used by more than 100 organizations across the world.

We also recognize that raising public awareness of global health issues engages the world's population to help those most in need. Working with the Johnson & Johnson Corporate Equity Group and utilizing the unique abilities of Johnson & Johnson to reach consumers, we began a new partnership approach with AOL-Huffington Post, a sizeable force in the media industry. With the creation of a section known as Global Motherhood, global health leaders and policy makers and mothers around the world can learn and participate in the work of our amazing partners as they continue our mutual mission to improve the lives of women and children.

I am grateful to work at a health care company whose unwavering humanitarian focus has made life-changing differences for so many over the past 127 years. We celebrate the commitment of our partners and the passion of thousands of Johnson & Johnson associates around the world who engage in this work and, together, imagine a world of better health for those most in need. This report represents only a small number of the programs we support, yet I hope it provides a glimpse into the power of partnerships and collaboration.

With gratitude to our colleagues and partners around the world,



Sharon Kathryn D'Agostino
Vice President, Corporate Citizenship

Saving and Improving Lives

Surrounded by students who are learning emergency obstetric surgery, an Ethiopian woman gives birth to a beautiful baby boy. This new mother is radiant, in spite of the large audience surrounding her, and so proud of her healthy newborn. In Gondar, Ethiopia, 20 District Health Officers who are supported through a Johnson & Johnson partnership are training to become Integrated Emergency Obstetric Surgeons. In one year, these enthusiastic surgeons will be deployed all over Ethiopia to save the lives of women in childbirth.

While global mortality has been reduced by one-third in the past 20 years, more than 800 women still die every day from pregnancy complications and childbirth, most of them in sub-Saharan Africa and South Asia.

For every woman who dies, around 20 more are seriously injured or suffer disabilities. And every day, over 8,000 newborns die within their first 28 days of life.

Most of these deaths can be prevented. Factors including poor health infrastructure and a lack of qualified health workers can mean the most basic and natural act of giving life instead becomes a cause of death—a time of hope for the future instead becomes a time of family crisis and despair.

Ethiopia and Tanzania are areas where the risk to mothers and newborns is high and governmental commitment to improving maternal-child health is strong. In 2011, Johnson & Johnson formed a partnership with the Health 4+ (H4+) to train health care workers in Tanzania and Ethiopia to provide critical prenatal and obstetric care for mothers and newborns. This H4+ joint action



A nursing midwifery student trained through a partnership between Johnson & Johnson and H4+ examines a newborn in rural Tanzania. The partnership trains health care workers in Ethiopia and Tanzania to provide critical prenatal and obstetric care for mothers and newborns.

platform aims to contribute to the UN Secretary General's Global Strategy on Women and Children's Health at the country level.

United Nations Population Fund (UNFPA), together with UNAIDS, UNICEF, UN Women, the World Bank and the World Health Organization (WHO), make up the H4+, a coordinated initiative that ensures these international organizations work together for women's and children's health through local programs. Johnson & Johnson is the first private sector partner to support the H4+.

"The partnership with the H4+ is one component of our response to the United Nations Secretary General's call to action for a renewed global effort to achieve the Millennium Development Goals by 2015," says Joy Marini, Director, Corporate Contributions, Johnson & Johnson. "Our efforts are in keeping with our long-standing commitment to the health and well-being of mothers and children."

"When you look after a woman, when you look after mothers, you look after the family," says Babatunde Osotimehin, M.D., Executive Director of UNFPA. "It is important that we have

a holistic way of dealing with poverty and other factors that make women and children vulnerable, particularly in program countries where these women and children live.”

A Healthier Future, One Community at a Time

For more than 125 years, Johnson & Johnson has been devoted to safeguarding and improving the health and well-being of individuals and communities. By collaborating with organizations all over the world with deep knowledge of the needs of their communities, we are working to bring life-changing, long-term advances in human health to ensure that all people, no matter where they live, have the chance to see their children survive and thrive.

Johnson & Johnson Worldwide Corporate Contributions supports a broad range of programs focused on influencing the health of women and families, and achieving the Millennium Development Goals. Our programs focus on actions we can take today that will lead to a healthier future. From bustling urban centers to remote villages, we are educating communities on

proven ways to prevent disease, finding new ways to connect people with the resources and information they need to stay healthy, and building the skills of the health workforce of the future.

Ending Fistula, a Debilitating Childbirth Injury

Fistula is a debilitating injury of childbirth that results from long, obstructed labor. Without access to emergency intervention, the physical trauma of laboring for days leaves women with a hole in the birth canal, causing them to leak urine or feces uncontrollably. It is estimated that there are almost 100,000 new cases worldwide annually, mostly in rural and resource-poor countries. Untreated, the fistula leaves women permanently disabled and often socially isolated. Subsequently, fistula leaves women with few opportunities to earn a living, and many must rely on others to survive.

This tragedy is both preventable and treatable. With widespread access to health care and emergency Caesarean section surgery, fistula has virtually been eliminated in industrialized countries like the United States. In remote or low-resource areas, skilled health care workers can identify the signs

Winnie Mwebesa, Senior Director, Family Planning/Reproductive Health, Save the Children (far left) and Joy Marini, Director Corporate Contributions (second from left) stand with midwives at the Jinja Health Services Clinic in Uganda. Through the Helping Babies Breathe program, these midwives have been trained in how to perform neonatal resuscitation techniques during a newborn's critical first moments of life.



of complicated delivery, intervene to prevent fistula before and during labor, and perform surgery to repair cases of fistula that do occur.

In collaboration with partners, Johnson & Johnson is investing in proven programs and pioneering groundbreaking models to reduce the impact of fistula. Our partners, including community-based organizations, non-government organizations and UN agencies, are working in unique and innovative ways to prevent fistula through quality obstetric care, increased access to fistula repair surgery, and help to women with fistula reintegrate into their communities and regain control of their lives.

The best way to prevent fistula is to ensure that expectant mothers have access to quality health care services before and during childbirth. Through a partnership with Royal College of Obstetricians and Gynaecologists and Liverpool School of Tropical Medicine, Johnson & Johnson supports a three-day training program in Nigeria that addresses five major obstetric complications that cause fistula, including obstructed labor. The program is designed for midwives and physicians who provide obstetric care to enable them to identify and manage emergency birth complications. In 2011, the program trained over 200 health care providers to better serve their communities.

Johnson & Johnson partners with organizations such as UNFPA, Fistula Foundation, Comprehensive Community Based Rehabilitation in Tanzania (CCBRT), Direct Relief International and Addis Ababa Fistula Hospital to help women access obstetric fistula surgery services and to train more surgeons. These partnerships help underserved women living with fistula in countries including Cote d'Ivoire, Liberia, Tanzania, Guinea-Bissau and Ethiopia.

Fistula treatment goes far beyond repairing the hole in a woman's tissue. Many patients—especially those who have lived with the condition for years—require emotional, economic and social support to fully recover from their ordeal. Through our partnership with the Global Campaign to End Fistula led by UNFPA, women receive counseling as well as life and job skills training to help them get back on their feet after surgery. Working with communities is also pivotal to reduce stigma surrounding the condition and ensure women are welcomed back into society.

“Nothing can prepare you for a visit to a fistula hospital. The stories of the women, many who have lived with obstetric fistula for years, are heartbreaking,” says Joy Marini, Director, Corporate Contributions. “But when you meet the dedicated surgeons, midwives and nurses, and see the smiles of the women who are on the road to recovery, you realize how the work that we do is saving lives. Lives that were once filled with only challenges are open to the promise of motherhood and a productive future.”

Helping Babies Breathe

For countless babies, birth is a near-death experience. In a sparsely provisioned hospital ward in rural Malawi, a baby boy was born, but he could not breathe. Yet an hour later, all was well as he lay sleeping peacefully, next to a tiny girl, wrapped in layers of colorful cloth. The two shared the heat lamp of the busy hospital's only baby warmer.

Yasinta, the nurse manager, pointed to the simple bag and

mask used to save the boy's life. It is a basic tool—a mask that covers a newborn's nose and mouth with a bag that is hand-pumped to move air into the baby's lungs. Thanks to recent trainings in newborn resuscitation, the nurse midwives at Dezda District hospital are now proudly saving the lives of babies they once didn't know how to help.

A baby's first breath cannot be taken for granted. Our hopeful expectation at birth is for a wailing cry of life. Yet hundreds of thousands of newborns die before they can breathe, especially in low-resource settings. They are lost to birth asphyxia—a leading cause of neonatal mortality that occurs when a baby does not receive enough oxygen before, during or after birth.

An infant's first moments and the 28 days that follow are the most precarious, and her risk of death is never greater. Simple and inexpensive techniques, however, such as drying her, clearing her airway, keeping her warm or using a simple ventilation device to stimulate her breathing can help.

But who will deliver these life-saving techniques? It's the frontline health workers who receive the training and support to get the job done through an initiative developed by the American Academy of Pediatrics (AAP) and aptly named “Helping Babies Breathe.”

The nurse midwives at the Dezda hospital said that, not long ago, they knew resuscitation existed, but that they had no idea how to do it. They felt helpless and, regretfully, shied away from babies who were not breathing, they said. No more. Now they know what to do: They are saving babies' lives, and they've become agents of lasting change—teaching more of their peers the new techniques they've mastered.

In collaboration with partners in more than 12 countries, Johnson & Johnson is investing in proven programs to save newborn lives. To date, our programs address birth asphyxia in countries including China, India, Indonesia, Vietnam, Nepal, Pakistan, Uganda, Malawi, Kenya, Ethiopia, Ghana and South Africa.

In 2011, Johnson & Johnson partnered with Save the Children and AAP to implement Helping Babies Breathe—a neonatal resuscitation training program for resource-limited circumstances. The five-year partnership, which also leverages support from USAID, allowed HBB to expand into Malawi and Uganda, where neonatal mortality rates contribute disproportionately to the overall child mortality rate. In Malawi, the neonatal mortality rate is 33 per 1,000 live births. In Uganda, the rate is 29 babies per 1,000 live births.

Johnson & Johnson is committed to continue to focus on providing hands-on training to local hospitals and clinics over the next three years to reduce mortality in situations where basic training can save a life. These partnerships focus on effective, simplified training that can be used for every baby—wherever he or she is born.

The Global Plan to Fight AIDS

Since the first diagnosis of AIDS nearly 30 years ago, the HIV/AIDS epidemic continues to impact millions of lives. Currently, more than 33 million people worldwide are living with HIV. On average, more than 6,000 people are newly infected with HIV each

day and over half of these new infections occur in women and girls. The staggering rate of new HIV infections is a stark reminder that much work still lies ahead.

The global commitment to halt the AIDS epidemic is one of our most pressing priorities. We work with many valued partners and support more than 120 HIV/AIDS programs spanning nearly 50 countries. Together we work to prevent the spread of HIV and reduce the burden of AIDS on women and their families.

Ending Pediatric HIV

One area in which we focus our efforts is the elimination of pediatric HIV. Every year, 330,000 babies become infected with HIV because they are born to mothers living with HIV. It is possible to stop new HIV infections among children and keep their mothers

alive if pregnant women living with HIV and their children have timely access to quality life-saving antiretroviral drugs. Mother-to-child transmission of HIV is preventable and has been virtually eliminated in the developed world. This is one area where we can make a real difference. Far too often, mothers in developing countries are deterred from seeking preventive treatment due to social stigma and overstretched, under-resourced health systems. Approximately half of HIV-positive pregnant women do not receive any medication or information on how to prevent transmission to their infants.

Eliminating mother-to-child transmission of HIV requires a significant cross-sector collaboration among governments, multinational organizations and the private sector. Since 2003, Johnson & Johnson has committed \$20 million to a range of

Two residents of Nyumbani Village enjoy the opportunity to continue their education and start a new life. The Village provides a family-like setting for orphaned children under the stewardship of elderly adults and seeks to ensure that the children receive love, sustenance, health care, holistic education and culture transfer, aiming at their physical, psychosocial and spiritual development, and at the same time, providing holistic care and support for the acting grandparents in their later years.



partners united in their effort to eliminate pediatric HIV. In 2011, we pledged an additional \$15 million to support a global commitment by diverse stakeholders to virtually Eliminate New HIV Infections in Children by 2015 and Keep their Mothers Alive (the “Global Plan”). The goals of the Global Plan are to reduce the number of new HIV infections among children by 90 percent and to reduce the number of AIDS-related maternal deaths by 50 percent.

There has been progress already. The number of children acquiring HIV infection is declining: About 330,000 children were newly infected with HIV in 2011, almost half the number in 2003, when the number of children acquiring HIV infection peaked at 570,000. The number of women dying from AIDS-related causes during pregnancy has also decreased from 46,000 in 2005 to 37,000 in 2010.

Johnson & Johnson has worked closely with the governments of the 22 priority countries to develop plans and policies to eliminate mother-to-child transmission of HIV and to calculate the cost for implementing these plans. Partners such as the Inter-Agency Task Team and the Elizabeth Glaser Pediatric AIDS Foundation have provided invaluable, in-country technical assistance to achieve the goals of the Global Plan.

Building the skills of health care leaders on the frontlines of the epidemic is important to achieving the goals of the

Global Plan. One example is the Partnership for Management Development. Johnson & Johnson works together with Ministries of Health in African countries, the University of Cape Town Graduate School of Business, local implementing partners, other funding partners and the United States Government Office of the Global AIDS Coordinator to accelerate elimination of mother-to-child transmission by developing the leadership skills and management capacity of African health care decision-makers. By training health care decision-makers, the Partnership for Management Development hopes to build strong, integrated health systems that recognize the unique challenges of preventing mother-to-child transmission.

Mentor Mothers Overcome Barriers

Most of the approximately 330,000 children newly infected with HIV in 2011 live in sub-Saharan Africa, and most of them acquired HIV from their mothers during pregnancy, childbirth or breast-feeding.

Severe shortages of medical professionals, such as in sub-Saharan Africa—which carries 25 percent of the global disease burden and yet has only 3 percent of the world’s health care professionals—presents one of the biggest barriers to eliminating pediatric HIV.

Danielle is getting a head start on a healthy future through the PACE Early Childhood Education program, which supports children’s health literacy needs. Since 2001, this comprehensive preschool and family service program, affiliated with UCLA/ Johnson & Johnson Health Care Institute, has also helped parents like Danielle’s build confidence and take better care of their children.



“Other significant barriers include cultural and social stigmas associated with HIV and the disempowerment of women,” says Frank Beadle de Palomo, Chief Executive Officer of mothers2mothers. “The mothers2mothers’ Mentor Mother model overcomes these barriers by harnessing the capacity of communities to engage with a new tier of trained, professionalized lay health workers.”

Johnson & Johnson has been a longtime partner with mothers2mothers (m2m), an NGO (non-governmental organization) based in Cape Town, South Africa, that employs and trains these “Mentor Mothers,” who are themselves mothers living with HIV, to work alongside doctors and nurses in under-resourced clinics. By providing peer education and psychosocial support to HIV-positive pregnant women and new mothers, the program has proven effective in helping women access medical interventions that significantly reduce the risk of mother-to-child transmission of HIV, supporting them to lead healthy lives. Because of their employment by m2m and their own experiences and expertise, Mentor Mothers gain financial security, become respected role models in their communities, and challenge stigma and discrimination around HIV.

m2m is currently collaborating with the governments of Kenya and South Africa to develop, implement and manage their own Mentor Mother programs. The development of country-run Mentor Mother programs aligns with the United Nation’s Global Plan, which calls for national programs to prevent mother-to-child-transmission of HIV and asserts that women living with HIV are to be at the center of efforts to eliminate it.

A Shelter for Abandoned People with HIV/AIDS

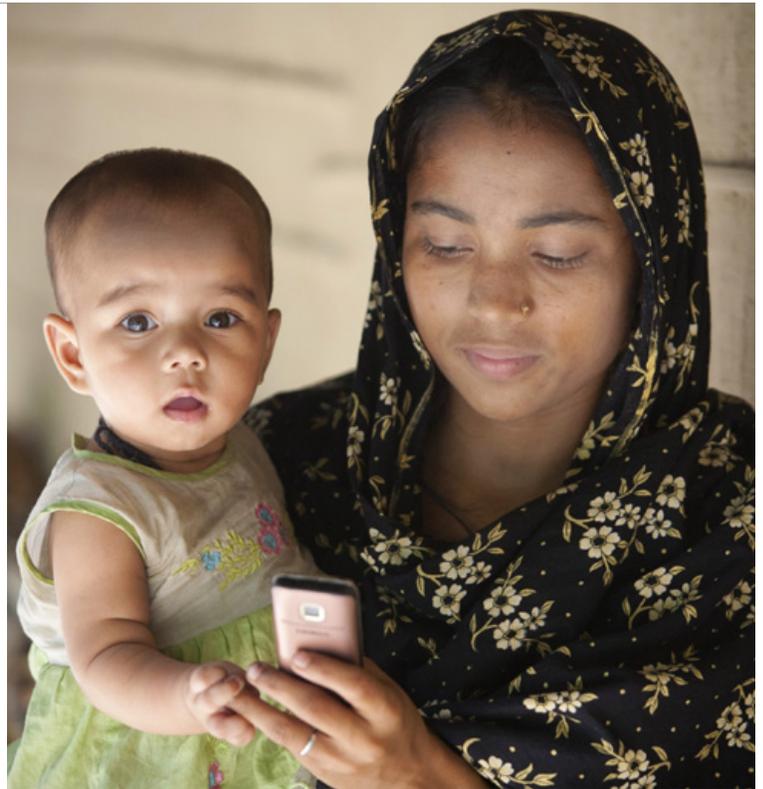
“We are like a table,” says Brother John Paul of Missionaries of the Poor (MOP). “The posts of that table are Johnson & Johnson. With your generous support, we can stay firm on what we are doing in charity and love and service to the poor, especially to the HIV stricken.”

Since 2008, Johnson & Johnson has been supporting the HIV/AIDS program managed by MOP, a faith-based organization working in the slums of Kingston, Jamaica. The mission provides a permanent home and medical care to around 75 homeless or abandoned men and women, most of them with HIV/AIDS.

The partnership with MOP is mainly focused on the nutritional aspect of the residents’ HIV/AIDS care. A good vegetable-rich diet is especially critical to strengthening their immune system and decreasing weight loss, notes Bro. John Paul, a registered nurse by training. “Otherwise, under the heavy HIV drug regimen they are on, they will be malnourished or anemic.” The program also provides emotional, psychological and spiritual care through general guidance, counseling and promotion of patients’ talents and skills.

While the grant directly benefits the program’s residents, it indirectly helps the whole community, adds Bro. John Paul. Volunteers, many of them from the same neighborhoods as the residents, also learn about good nutrition and healthy living.

According to UNAIDS, Jamaica has an estimated 32,000 persons living with HIV/AIDS. The HIV epidemic in Jamaica is closely tied to poverty and prostitution. Young adults are the



In 2012, MAMA launched Aponjon, a mobile health service delivering critical stage-based health information to new and expecting moms, like tips on good nutrition during pregnancy, how to prepare for childbirth and understanding the best way to feed a baby.

most affected, with approximately 79 percent of all reported AIDS cases in Jamaica occurring in the 20-49 year-old age group. Recent years have seen an alarming rise in HIV among women, especially in urbanized areas such as Kingston.

“We do everything we can with God’s grace,” says Bro. John Paul. “And we are very much grateful to Johnson & Johnson. Without your support, moving Christ in people’s hearts would make very slow progress in terms of economics.”

Creating a World Where Children Are Free of Intestinal Worms

Running in bare feet and splashing in pools of rainwater are typical playtime activities for children. But in areas with poor sanitation, the business of being children can be dangerous. In Bangladesh, “Little Doctors” are helping raise awareness about parasites lurking in the environment, while medicine donations are providing relief to infections caused by intestinal worms.

Worldwide, more than 600 million school-age children are infected by or at high risk of infection from soil-transmitted helminths (STH), or intestinal worms. Children who are infected become malnourished, listless, have difficulty learning, and have a hard time growing up to become healthy, productive adults.

To help the children affected by parasites, Johnson & Johnson produces VERMOX™, which kills intestinal worms, and donates it to countries with a high prevalence of STH infections. Children Without Worms, which began in 2006 as a partnership between the Task Force for Global Health and Johnson & Johnson, and



Little doctors Sadia and Nishitka Ahkter, in Bangladesh, assist their teacher during one of Amatoli's school health-promotion days. With support from Johnson & Johnson, the Little Doctors program has set the goal of training over 1 million children like Sadia and Nishitka in Bangladesh to assist their teachers and teach their peers about preventing soil-transmitted helminths (STH).

the World Health Organization, provides technical support to countries receiving the donation and promotes water, sanitation and hygiene education to break the cycle of reinfection and ensure the donation has the greatest impact possible.

“When the UN Secretary General called on the world in 2010 to redouble its commitments to the Millennium Development Goals, Johnson & Johnson stepped forward with several commitments unique to our expertise as a global health care company. One of them is to provide up to 200 million doses of VERMOX™ for deworming each year through 2015,” says Bill Lin, Director, Corporate Contributions, Johnson & Johnson. “We are moving closer to that goal and, more importantly, helping children to live free of intestinal worms so they can reach their full potential.”

In 2012, Johnson & Johnson provided 116 million doses of VERMOX™ to 14 countries in Africa, with the aim to distribute VERMOX™ in 25 to 30 countries by 2015. In January of 2012, Johnson & Johnson extended its commitment through 2020.

Children Teaching Children

In Bangladesh, concerns about intestinal worms increased significantly after a survey in 2005 showed that nearly 80 percent of children were infected with STH. To address the issue, the country launched a national deworming effort with health care

partners and the National Center for Disease Control of the Ministry of Health and Family Welfare (MOHFW).

“The national deworming effort in Bangladesh has been successful, but there are still areas of the population we are not reaching, such as children who are not attending school because of disability, poverty or other conditions,” says Dr. Be-Nazir Ahmed, Director of Disease Control for the MOHFW. “We are implementing new strategies so that every year, we reach at least 75 percent of all at-risk school-age children with deworming treatment.”

One such strategy is the Little Doctors program, launched in 2010. In this novel child-to-child outreach effort, students from fourth to fifth grades are selected and trained to serve as Little Doctors. They assist their teachers on health promotion days and help their classmates learn about STH and how to prevent infection. They also encourage children who are not attending school to do so on deworming days.

Currently, Little Doctors is raising awareness in 40,000 schools in Bangladesh; the program will soon scale up to 82,000 schools, with the goal of creating 1.2 million Little Doctors by 2014.

“These Little Doctors are an inspiration to their classmates, and their messages are reaching beyond the schools and helping to improve community health,” says Dr. Be-Nazir.

Frontline Health Workforce

The World Health Organization estimates that there is a shortage of at least 1 million health care professionals in the world's poorest countries. Johnson & Johnson is collaborating with community-based organizations, non-government organizations and multi-national coalitions in more than 35 countries to develop a new generation of frontline health workers (FLHW) such as nurses, mid-wives, pharmacists and community health workers to fill that gap.

FLHW professionals often provide a vital point of care for people who live hours or even days away from a hospital or clinic. For example, in Ethiopia and Tanzania, where the maternal and newborn death rate is very high, Johnson & Johnson funds programs that train health care workers to manage complications arising in childbirth and to educate other clinical workers to provide essential newborn care in facilities where there are no doctors.

Johnson & Johnson also collaborated to launch Survive & Thrive (S&T), a global development alliance bringing U.S. obstetric, pediatric and midwifery professional associations together with USAID, the private sector and civil society organizations to improve the quality of maternal and child care at health facilities. S&T provides emerging global health leaders and specialists with opportunities to learn and practice key skills in targeted countries where help is most needed.

Through the Helping Babies Breathe initiative, Johnson & Johnson is working with Save the Children, the American Academy of Pediatrics and USAID to train health care workers to intervene when newborns have potentially fatal breathing problems (birth asphyxia) in the precious moments following birth. In the first five years of a similar effort in China, health attendants who completed a facilities-based training saved more than 90,000 babies and cut birth asphyxia deaths by half in 360 hospitals. Helping Babies Breathe has certified Master Trainers to give training to birth attendants in six districts in Malawi and 10 districts in Uganda, allowing more mothers to go home with healthy newborns.

Other unique and innovative ways to bring care and information to families and to strengthen health systems globally include training mothers to be health mentors, educating microcredit loan officers to be health educators, and enhancing leadership and supervision within the health workforce.

One such program is the Management Development Institute (MDI) for Health Care Organizations designed to enhance the leadership and management skills of program managers and leaders of sub-Saharan African organizations, both governmental and non-governmental, that are devoted to delivering health care services to underserved populations. The program was designed by world-class management faculty from the UCLA Anderson School of Management at the University of California and by leaders of the African Medical and Research Foundation. Nearly 600 participants from 22 African countries have graduated from this one-week program.

As of August 2012, educators providing microfinance and health protection services in India reached more than 400,000 of India's rural poor with health messages. The loan officers serving

as unique frontline health educators also report greater job satisfaction as they help families in their communities invest in their health and their future.

All these efforts fundamentally aim to deliver life-changing innovations to women, children and families where resources are scarce to ensure that women are healthy, children reach their potential and communities thrive.

Partnerships That Help Shape Tomorrow

Our partners are the change-makers that drive the work of our Company's giving, transforming lives around the world by providing communities with access to health and hope. We are privileged to work with some of the smartest minds in health and development to identify and address unmet needs, apply local insights to shape new ideas, and lead innovative approaches to enable communities to be healthy.

In regions where resources are especially scarce and where far too many mothers and babies do not survive pregnancy or birth, our partners are applying unique expertise and innovative ideas to help more women and children experience life and health.

Nurses and Midwives Help Keep Moms and Babies Healthy

In Ethiopia, pregnant women living in rural areas rarely have a skilled health care professional helping with the delivery of their babies. In urban areas, less than half of moms have a trained professional assisting with childbirth. When complications occur, the lives of mom and baby are often placed in jeopardy.

"Ethiopia is still one of the countries in Africa that is most in need of support to strengthen health services," said Denis Robson, director, African Affairs for Johnson & Johnson. "There are only two nurses and midwives for every 10,000 people in Ethiopia."

To increase the number of skilled health care professionals in Ethiopia, in 2012, SOS Children's Villages and Johnson & Johnson established a nursing and midwife scholarship program at the SOS Nursing School in Makalle. The program serves Ethiopian youth who have received support from SOS Children's Villages, the world's largest organization dedicated to the care of orphaned and abandoned children. For more than 20 years, Johnson & Johnson has partnered with SOS Children's Villages initiatives in Africa and around the world, focusing on much needed medical services and other programs that strengthen families.

In October 2012, 13 nursing and midwifery students on three-year scholarships started their first semester in the inaugural class at the SOS Nursing School. "These 13 students have been given a chance to pursue a valuable career path that otherwise would not have been possible," says Lynn Croneberger, CEO of SOS Children's Villages - USA. "They will have the opportunity to better support their families and gain employment in a country where nurses and midwives are in extremely high demand."

In addition to the scholarship program at the school in Makalle, Johnson & Johnson has provided scholarships for nurse education at the SOS Nursing School in Mogadishu, Somalia; the



Through the WaterCredit program, this young girl in Bangladesh has clean water for the first time and is learning to wash her hands. The program not only supplies microfinance loans to rural communities to help them gain access to clean water and sanitation facilities, it also provides important training on hygiene to adults and children.

Aga Khan University in Kenya, Uganda and Tanzania; and the Hamlin School of Midwifery in Ethiopia.

Training Surgeons in Advanced Trauma Management

Trauma is the leading cause of death in West Africa. Even as roads and transportation have increased the likelihood of patients reaching hospital, the lack of advanced surgical skills among health providers has continued to make saving lives difficult.

In Ghana, the Medical and Surgical Skills Institute (MSSI) was established in 2005 to provide practical, clinical and academic training for medical students as a way to increase the capacity of health care workers in basic and advanced surgical skills.

MSSI is an initiative of The West African College of Surgeons, Johnson & Johnson and others such as International Aid Ghana, Korle Bu Teaching Hospital, International Aid Michigan, American College of Surgeons and the Society of Black Academic Surgeons.

Students travel from throughout West Africa to well-equipped facilities at Korle Bu. There, dedicated faculty from around the world staff the first Surgical Training Center outside of the U.S. to provide Surgical Training in Advanced Trauma Operative Management (ATOM). The ATOM course is a proven method of increasing surgical competence and confidence in treating traumatic injuries such as those involving penetration of the chest or abdomen. Participants in the course include senior surgical residents, trauma fellows, military surgeons and fully trained general surgeons who are not frequently called upon to treat such traumatic injuries.

“ATOM really benefitted me a lot in terms of handling trauma,” says Sunny D. Mante, M.D., Department of Urology, 37 Military Hospital, Accra. “The week after my training, a patient with a gunshot wound to the abdomen was rushed to our emergency room. Because of the training I’d received at ATOM, I was more confident and bold in taking action to address his injuries.”

Dr. Mante adds that now all residents of 37 Military Hospital take the ATOM training as part of their preparation for final surgical exams, resulting in more confident handling of trauma cases.

As of December 2012, 111 surgeons have been certified in the ATOM courses and another 3,170 surgical and medical personnel have received valuable life-changing training at the institute.

Executive Development Program Leads to Healthier Communities

An estimated 4,000 people are homeless on any given night in Cleveland, Ohio. Francis Afram-Gyening is taking actions to change this situation, especially for the extremely poor who are living with mental illness and disabilities.

Afram-Gyening is chief executive officer of Care Alliance, a health care center that services the disadvantaged. He also is among nearly 680 U.S. executives who have graduated from the UCLA/Johnson & Johnson Health Care Executive Program (HCEP). This leadership and management development initiative sharpens leaders’ skills so they can help their community-based organizations improve and expand care for the people they serve.

Founded in 2002, the HCEP is a joint effort between the University of California, Los Angeles (UCLA) and Johnson & Johnson. The program gives participants 11 days of intensive leadership and management development through the UCLA Anderson School of Management. Participants work on multiple capabilities, such as communication, technology, strategy development and financial skills. The program also inspires executives to create and set in motion a Community Health Improvement Project (CHIP).

For Care Alliance, the HCEP experience in 2011 inspired Afram-Gyening to launch a CHIP that brings together mental health and primary care services to support homeless individuals, including those who have been living on the streets for many years. After completing the HCEP, Afram-Gyening led his team in the launch of a three-year project that will help 230 chronically homeless individuals find safe and supportive housing.

“Experience shows us that people who have been entrenched in homelessness for decades can be transitioned into permanent supportive housing when provided with flexible, patient-centered comprehensive services,” says Afram-Gyening. “The HCEP was the catalyst for this exciting and invigorating initiative.”

Expanding Services for People Living with HIV/AIDS

Maritza Tona, executive director of the Foothill AIDS Project, attended the HCEP in 2012. Her community-based organization provides numerous programs and services for people living with HIV/AIDS in three California counties.

Tona says the HCEP sessions on strategic partnerships, health economics and communication helped her learn how to apply for grants and accreditation to boost funding sources, communicate more professionally with staff and board members, and gain a clearer understanding of health care reform and its impact on AIDS service organizations.

“The HCEP helps executives build relevant skills, knowledge and abilities to successfully manage and lead their organizations,” says Victor Tabbush, faculty director, UCLA Anderson School of Management. “Through the program, executives are learning how to enhance the efficiency of their services, build alliances and partnerships, and provide expanded patient access to improve health outcomes.”

Keeping Kids Healthy at School

When children aren’t feeling well at the Indian River school district in Dagsboro, Delaware, school nurse Lara Booth comes to the rescue. Now she’s sharing her nursing know-how with school administrators and other school nurses to help them deliver comfort, compassion and excellent health care to the children they serve.

Booth is among 49 school nurses from 12 U.S. communities who were accepted into the Johnson & Johnson School Health Leadership Program in April 2012. Building on a long commitment to school nurses, this new program offers a leadership training forum for school nurses and school administrators. The Center of Alcohol Studies at Rutgers, the State University of New Jersey, manages the program in educational partnership with the National Association of School Nurses.



Since 1982, Operation Smile has impacted the lives of over 200,000 families through free surgeries provided by volunteers. As part of Operation Smile's 25th anniversary in Kenya, five employees from Johnson & Johnson operating company Ethicon traveled to Meru, Kenya, to volunteer to help with the screening of over 150 patients and surgeries on 100 children over five days.

Booth says that prior to participating in the School Health Leadership Program, she had strong nursing skills but no idea how to be a leader in her field. All that changed when she attended the six-day residential program with three of her peers from the Indian River district. Armed with the skills, tools and information she learned through the program, Booth set out to establish herself as a school nurse leader in her community.

“Lara truly is the future of the nursing field,” says Laura Fenster Rothschild, acting director, education and training, Center of Alcohol Studies at Rutgers. Since completing the program, Booth has:

- Presented the value of vision screening technology to the district
- Identified a way to use existing resources to conduct vision screenings and save significant school funds
- Started billing Medicaid for each eye screening, resulting in significant reimbursement fees for the district

Booth and her team from Indian River also served as workshop leaders during the annual conference of the Delaware State

Association of School Nurses, where they spoke about a variety of health topics. In addition, the Indian River nurses have launched a Health and Wellness Committee to give children's health more visibility and support.

“Lara and her team are great examples of how this program can be transformational for participants,” says Fenster Rothschild.

Johnson & Johnson established the School Health Leadership Program to strengthen the health care workforce and improve practices that impact student health. The curriculum includes sessions on project management, leadership, program planning and evaluation, community empowerment, culture competency and online continuing education courses. As with most partnerships, Johnson & Johnson is a thought partner in the program, providing expertise and leadership support, in addition to funding.

Inspiring Careers That Give Back

Natasha Ramsey and Jeneba Abass-Shereef, currently in their second year of medical school, are graduates of the Bridge to Employment (BTE) program in New Brunswick, New Jersey.

The BTE experience in high school prepared them to meet the challenges and requirements of higher education and instilled in them the desire to make a difference.

“I would not be where I am today, definitely not in medical school, without the BTE program,” says Natasha. The program helped spark an interest in science and health care that she never thought she had. Natasha went on to obtain a degree in public health and plans to focus on preventive medicine and health education in underserved communities upon graduation from New York University Medical School. She adds, “I had the support of my Johnson & Johnson mentor through my whole journey.”

Jeneba always knew she wanted to be a doctor. The mentoring and after-school tutoring BTE provided strengthened her academics and kept her focused on her goals. The program also paired Jeneba and Natasha with elementary school children, giving the high school students an opportunity to be mentors themselves. That experience made a lasting impact. Jeneba is pursuing a distinction in community service along with her medical degree at Robert Wood Johnson Medical School and continues to mentor young people in her community.

Launched in 1992, BTE is a Johnson & Johnson initiative that aims to inspire young people (14–18 year olds) from

Johnson & Johnson communities to stay in school, excel academically and elevate their career aspirations. The program also helps them build their futures by introducing them to a broad array of careers in health care.

Johnson & Johnson employees are actively involved in every aspect of the program, from designing the program to selecting community partners. For that reason, BTE is initiated only in communities where Johnson & Johnson has a presence. Each program engages four key partners: a local Johnson & Johnson operating company, secondary school, institution of higher education and a community-based organization.

Over the last 20 years, more than 60 BTE sites have been established in communities throughout the United States, Latin America, Africa, Asia and Europe. Today, four new programs start each year, with more than 12 programs operating at any given time.

Johnson & Johnson is committed to assessing the impact of BTE and values continuous improvement. Third-party researchers evaluate the local program’s achievement of student outcomes, measuring quantitative and qualitative gains. Recent evaluation highlights include higher numbers of students aware of and applying for higher education, positive youth development, interest in health careers, educational benefits and community advances.

Natasha Ramsey (right) and Jeneba Abass-Shereef, currently in their second year of medical school, are graduates of the Bridge to Employment (BTE) program in New Brunswick, New Jersey. Over the last 20 years, BTE has helped to prepare young people for brighter futures. More than 60 BTE sites have been established in communities throughout the United States, Latin America, Africa, Asia and Europe.





Children at Chichimuch school in Guatemala stand on line waiting to get their lunch. The country has the highest level of chronic malnutrition in Latin America and one of the highest in the world. In rural areas of the country where the Mayan population is concentrated, as many as 80 percent of children are malnourished. Johnson & Johnson provides funding to Mil Milagros, a school-based feeding program that aims to improve the children's nutrition, health, education and life prospects.

“Through BTE, Johnson & Johnson can give back to the community, as well as establish and promote sustainable partnerships and educational practices that impact communities long-term,” says Michael Bzdak, Director, Corporate Contributions, Johnson & Johnson.

In 2011, in partnership with Family Health International 360, all of the BTE and comparison group survey instruments were standardized. Data templates and instructions were provided for each local evaluator to use for submitting all student surveys and quantitative data. Beginning in 2014, BTE sites throughout the world can be compared by giving local site details while analyzing data to tell a collective, comprehensive story of the outcomes and impacts of BTE across sites.

“This process has led to an increased ability to monitor the BTE program globally and to report results,” says Bzdak. “In addition, we have trained local program directors in Latin America, Asia, Europe and the U.S. in evaluation practice, thus increasing their measurement capacity.”

Beating the Odds Through Education

In September 2005, Johnson & Johnson formed an alliance with Fundación Trascender, a Colombian non-governmental organization (NGO) to provide basic education and life-skills training to at-risk children and youth in the very poor districts of Valle del Cauca, Colombia. To date, this partnership has benefited over 7,000 students, 943 of whom have graduated high school.

According to recent data published by the Colombian Secretary of Education, over 16,000 children in Valle del Cauca do not have access to formal education due to lack of resources, city relocation or displacement. In the absence of school, these children are often exposed to gangs, crime and abuse.

Through an educational aid program, Fundación Trascender focuses on bringing these underprivileged and high-risk children into the Colombian educational system, from preschool to high school. The children and their families are also supported by social workers who provide supervision and academic follow-up as well as promote overall social and individual development. All



On October 11, 2012 (World Sight Day), school children in Bangkok cheer as they participate in Sight for Kids program's 10th anniversary celebration and screening event surrounded by representatives from Lions Club International Foundation and Johnson & Johnson Vision Care, who have partnered to support the program. Sight for Kids is a school-based program that screens children to identify and correct visual impairment. Focused on serving Asia, in the 10 years since the school-based program's launch, over 16 million children have been screened.

these efforts are aimed at reducing school dropout rates and child labor in these communities, as well as criminal behavior, abuse and exploitation of its youngest population.

In the 2012-2013 school year, 463 children between 3-17 years of age have been able to continue their preschool, basic primary, and high school studies as a result of this program. An additional 431 families and 14 schools benefited indirectly.

The mother of a child benefiting from the program, Viviana Guazá Caicedo, is thankful. "They (Trascender) have helped us in many areas, for example with health care, given that my child has had health problems since he was very little," says Guazá. "We know that the education and the treatment that our children receive are incomparable; they have excellent teachers, an excellent director and staff."

Empowerment Through Health Literacy

Over the last 20 years, the UCLA/Johnson & Johnson Head Start Management Fellows Program has trained over 1,400 Head Start directors to be better managers and has expanded a successful low literacy health education approach to tackle other health issues facing the Head Start community.

While working with the Head Start Fellows, Professor

Ariella Herman of the UCLA Anderson School of Management realized that many of their families were not making full use of the programs and resources available to them. The reason, she learned, was their lack of knowledge about basic health care. Leveraging the trust and rapport the Fellows Program had developed with Head Start, Dr. Herman, with the support of Johnson & Johnson, embarked on a health literacy initiative. The results were impressive. There was a huge decrease in ER and clinic visits and parents were feeling more empowered and self-confident after the training.

The results of the study led to the creation of the UCLA/Johnson & Johnson Health Care Institute (HCI) in 2001 under Dr. Herman's leadership. Using a "Train the Trainer" approach and low literacy tools, HCI has touched over 60,000 families in multiple languages in 42 states and demonstrated in numerous peer reviewed publications that giving parents the advantage of knowledge empowered them to make choices that had major implications on workforce productivity, school attendance and on rising health care costs.

UCLA/HCI surveys done with participants over the years have shown a 29 percent decrease in school days missed and a 42 percent decrease in work days missed. After families were

trained, there was a 42 percent decrease in doctor/clinic visits and a 58 percent decrease in emergency room (ER) visits. This was an average cost of just \$80 per family. Furthermore, studies suggest that training 10,000 families using this model can lead to a total cost savings of nearly \$5.1 million to Medicaid in direct costs associated with unnecessary ER and clinic visits annually.

Encouraged by these results, HCI expanded the low literacy health education approach beyond common childhood illnesses to tackle other health issues facing the Head Start community, such as oral health, and most recently, obesity.

Results from the Eat Healthy, Stay Active program to improve nutrition and physical activity habits among Head Start parents, staff and children suggest that the intervention was effective in improving knowledge and behavior for parents and key to the formation of healthy eating habits for the whole family.

Seventy percent of children participating in the program knew the difference between foods they should eat more often, or less often. There was a 66 percent increase in physical activity among parents and Head Start staff. Body Mass Index (BMI) ranges for parents and staff saw a downward shift (from 30.11 to 29.2), and the number of children classified as obese decreased significantly by 32 percent.

The learning process, Dr. Herman points out, continues beyond the training sessions. HCI tracked about 500 families who

graduated from Head Start and have seen that behaviors, such as not rushing to the ER for childhood illnesses that could be treated at home, have continued.

Being a community-based program, Head Start agencies have been able to engage their communities into this learning process as well. “They do it in innovative ways,” notes Dr. Herman. It could be getting a pharmacy to donate digital thermometers or getting the attention of a local hospital. When the program was implemented in Seattle a few years ago, Dr. Herman recalls, they invited medical residents from the Swedish Medical Center to attend the training. “The goal was to raise awareness. Now, year after year, more and more residents and doctors come to see how the training works. The medical community gets to know the families and how to communicate with them, and the families are very appreciative for this first step of communication between provider and patient.”

Health literacy is now a lifelong mission for Dr. Herman, and her efforts have not gone unnoticed. The United States Department of Health and Human Services has partnered with HCI to launch an action plan to improve health literacy in partnership with HCI. Dr. Herman is also working with the American Academy of Pediatrics to improve health literacy. According to the 2003 National Assessment of Adult Literacy, more than 90 million Americans lack the necessary health literacy

In the Eastern Cape, South Africa, Zanele Mazwi attended the Partnership for Management Development program (PMD), supported by Johnson & Johnson. The PMD program is designed to help eliminate the mother-to-child transmission of HIV by developing the leadership skills and management capacity of African health care decision-makers.





On January 16 and 17, 2013, staff from the European offices of Johnson & Johnson conducted a procurement training in Nairobi, Kenya, for 19 participants drawn from partner organizations of Johnson & Johnson in Kenya. The aim of the training was to provide participants with business-linked tools that would enable them to think strategically about the procurement process.

skills to effectively utilize the health care system.

“Health literacy is not just for Head Start, it’s a major national issue,” she points out.

Innovation Inspires Change

As the needs of the global community evolve, our approach to improving health is reaching new frontiers and possibilities. By fostering a culture of innovation in our partnerships and with our employees, we are helping to grow new and inspired solutions to tackle the world’s most complex health challenges.

Innovation is about seeking new insights to identify and address unmet needs. For Johnson & Johnson, it is also about finding new and uniquely qualified partners to advance novel ideas, products and technologies, and driving behavior change so we can improve health, one community at a time.

The Power of Health in Every Mama’s Hands

Simply because of where they live in the world, millions of women do not have access to the basic health information every mom needs to have a safe pregnancy and a healthy baby. But more than 1 billion women in low- and middle-income countries do own a mobile phone.

Information about good nutrition during pregnancy, how to prepare for childbirth and understanding the best way to feed

a baby can help an expectant mother in a low-resource setting survive pregnancy and give the best care to her child. For a mom who lives far away from health care professionals, her mobile phone is a conduit to this life-saving information.

In Bangladesh, Asha Rani recalls how she struggled to care for her now 9-year-old son when he was an infant. “I didn’t know how to take care of him or what to feed him,” she says.

But now, with text messages that deliver helpful health information, Asha is better prepared to take care of her 1-year-old daughter. “The messages help me learn new things, like breastfeeding exclusively for six months,” she says. “When the baby was 3 months old, the messages I received told me to make eye contact. Acting on this information will help my daughter to learn and grow.”

The Mobile Alliance for Maternal Action (MAMA) is using mobile technology to educate and empower new and expectant mothers in low-resource settings throughout the world so that they make the best decisions for themselves and their babies. In 2012, MAMA launched Aponjon, a mobile health service delivering critical stage-based information tailored to mothers like Asha Rani and their supportive family members in Bangladesh. There are already more than 40,000 subscribers.

MAMA is a public-private partnership launched in May 2011 by the United States Agency for International Development (USAID), Johnson & Johnson, United Nations Foundation,

mHealth Alliance and BabyCenter. MAMA has made a multimillion-dollar investment to create and strengthen mobile health programs in three countries—Bangladesh, India and South Africa—and to enhance the global capability of new and existing programs for underserved moms in those countries and beyond.

MAMA was named a 2012 *Fast Company* Innovation By Design Award winner in the Service Design Category. The award recognized MAMA's adaptable messages, developed by BabyCenter alongside a team of health experts. These free text and voice messages have already reached millions through more than 100 organizations in 40 countries from Afghanistan to Zambia.

The health messages mean a better experience and better health for Asha Rani and her daughter. They also mean family involvement based on the same health information. "My husband reads the messages too and helps me take care of the baby," she says.

MAMA builds upon another innovative public-private partnership in the United States piloted by Johnson & Johnson, Text4Baby, a free service that provides messages to low-income pregnant women and new moms. Text4Baby has enrolled hundreds of thousands of moms and is promoted by networks of public health partners and health providers.

Johnson & Johnson is committed to bringing mobile health to a total of six countries with high maternal and infant mortality rates and high mobile penetration. Millions of women will receive mobile messages about prenatal health, safe delivery and childhood immunizations.

In 2012, another set of messages were created to meet the unique needs of HIV-positive pregnant women. Mothers2mothers, a partner organization with extensive knowledge, contributed to the development of specialized messages on when to take antiretroviral medicines, how to breast-feed, and how to navigate challenging cultural situations that may keep women from accessing care for themselves and their babies.

Breaking the Cycle of Ill Health and Poverty

Microfinance is a powerful tool for the very poor to climb out of poverty by offering access to credit and saving services to build small businesses; however, on their own, financial services are not enough. Even when women are starting to have success in their businesses to support their family, a health challenge such as the illness of a child or death of a family member can plunge them further into poverty. Integrated microfinance programs that couple financial services with health education, health services or other development tools, can mitigate health risks to a microcredit client and her family. Today, microfinance reaches more than 200 million women globally, including those in very rural areas. Microfinance is reaching 92 million in India alone.

"With microfinance wraparound services we can help women break the cycle of poverty," says Joy Marini, Director, Corporate Contributions, Johnson & Johnson. "By helping a woman understand how to provide nutritious meals, how to care for a child who is sick or how to save for a medical emergency, we give



On October 29, 2012, Hurricane Sandy made landfall in the New Jersey–New York area, leaving devastation in her wake. Just a week later, teams of employees from the Johnson & Johnson Family of Companies worked with Rebuild Staten Island to help residents of that community who had suffered severe damage to their homes. Piera Sacharsly (center) was one homeowner helped by the team.



In Colombia's Valle de Cauca district, Fundación Trascender has given over 7,000 children access to basic education and life skills training. Over 16,000 children have no access to formal education due to limited resources; these children are a few of the nearly 500 students whom the foundation supported in the last year.

her the tools to succeed in making a better life for herself and her family.”

Johnson & Johnson partners with Freedom From Hunger and Microcredit Summit to reach women and their families, helping them to address the root causes of their poverty and achieve food security for their families. Freedom From Hunger is reaching more than 4.4 million women in 20 countries throughout Africa, Asia and Latin America, women like Nandini Nath in Sanoanko, India.

Several years ago, when Nandini needed cash to buy seeds and pesticides for her barley and potato crops, her only option was to take a loan from an unscrupulous local lender who charged her 60 percent interest. She took the loan because she didn't have any other option.

Through Freedom from Hunger's microfinance partner, Gram-Utthan in Orissa, India, Nandini had a chance to join a self-help group that gave her access to capital with terms that she could manage as well as financial literacy training and access to health education and services. More importantly, she found her calling to become a Village Health Volunteer.

Every month, Nandini holds two health education forums

(on topics such as diarrhea prevention and treatment, women's health and the feeding of young children) for the self-help groups in her rural village of Sanoanko.

Along with all the value that Nandini adds, her neighbors now have access to savings and loan products through Gram-Utthan, a local microcredit-focused non-governmental organization (NGO), to help them deal with unexpected medical costs, which can cripple a family financially or cause them to delay seeking treatment.

Working in partnership with local microcredit organizations, Village Health Volunteers like Nandini are having a significant impact in rural areas, where access to medical care is limited.

WaterCredit Empowers Women

Banu and Komsie live on different continents, yet they share a daily struggle. Every morning, they collect water for their respective families. They don't turn on the faucet in their kitchen. Komsie walks for two hours to a dry riverbed, waits in line for two more hours and then starts digging. Once she has secured fifty pounds of water, she places it on her back and begins a two-hour walk home in the sweltering sun. To collect enough water for



These new moms and babies are members of a mother and baby exercise class held at a MAMA salon in Fukushima prefecture, Japan. The 11 Maternal Care Salons made it possible for the families to receive extended postnatal support, which had been dramatically affected by disruptions caused by the Tohoku earthquake.

her family, Banu makes her 40-minute roundtrip journey to a contaminated pond two to three times each day.

On the way home, they each worry whether the water they collected will harm their family. Komsie has already lost one child to disease caused by drinking contaminated water. The time spent securing water for their families is time spent not working, so they worry about how they will provide the basics, like food, for their families. Banu and Komsie know that their lack of clean water prevents them and their children from ever attaining a better life.

Banu lives with her family in Bangladesh; Komsie lives with her family in Ethiopia. They are both mothers doing their best to provide for their children. They represent two of the 780 million mothers, fathers and children without access to safe water. Water-related disease claims the lives of 5,000 children each day, making it the second biggest killer of children worldwide. For their mothers, the danger of unsafe water is more than a statistic. It is a daily fear. These mothers know all too well that every 20 seconds a child dies from water-related disease such as diarrhea.

What's most disturbing is that the death of these children is entirely preventable. Our partner Water.org, recognizes this and

actively implements a portfolio of solutions tailored to the needs of individual communities, ranging from providing direct access to pioneering alternative ways to finance and deliver safe water and sanitation. One proven innovation is WaterCredit. Pioneered in 2003, WaterCredit applies the principles of microfinance to the water sector. Johnson & Johnson is one of the supporters of WaterCredit, which has helped more than 340,000 people gain access to safe water and sanitation. With small loans given to those who do not have access to traditional credit markets, WaterCredit empowers people to immediately address their own water and sanitation needs. A WaterCredit loan can reach five to ten times as many people as a traditional grant over a ten-year period.

For mothers like Komsie and Banu, WaterCredit is a small loan that has had a life-changing impact. After receiving loans through WaterCredit, Komsie and Banu no longer make the daily journey to a polluted water source. For both Komsie and Banu, WaterCredit means a clean, reliable source of water right near their homes. Time that was once spent collecting water can now be devoted to their children. Most importantly, they and their families are healthy.

Continuing Our Tradition of Caring

Our commitment to delivering health for every person, no matter where they live, is our unique heritage and our steadfast purpose. Rooted in our Credo, it grows from our profound respect for the communities where we live and work, and the understanding that all people and all communities deserve a chance to realize a healthy and vibrant future.

We believe that the global community starts at our doorstep. As global citizens, it is our responsibility to continue our tradition of health innovation by improving access to care from our hometown to cities and villages all over the world. This is our heritage and our future.

Committed to Recovery in Japan

The Tohoku earthquake and tsunami struck northern Japan on Friday, March 11, 2011. In the days, weeks and months that followed, the Johnson & Johnson Family of Companies made a significant financial commitment, as well as product donations, while employees and retirees gave generously to disaster relief partners including the Japanese Red Cross Society, Direct Relief International, International Rescue Committee, Project HOPE, Save the Children and World Vision. Efforts got under way

quickly to assist the people of Japan. Two years have passed since the disaster, and there is more to be done. Johnson & Johnson maintains our long-term commitment, working with partners to improve lives and make a lasting difference.

Building New Social Bonds

A lottery system and demographics guided placement of many of those displaced by the disaster into temporary housing units, at times breaking apart centuries of social bonds and resulting in increased isolation for residents.

The Nippon Foundation and Iwate Fukko Collaboration Center, with support from Johnson & Johnson, created a program to improve coordination among local leaders in 200 temporary housing communities in Iwate prefecture. Along with volunteers, area managers assessed the health situation, living conditions and social activities of each neighborhood. This helped to inform ways to provide the support necessary for people to begin rebuilding their lives.

Johnson & Johnson employees also volunteered with the program. During Asia Pacific Contributions Committee Volunteer Month in June of 2011 and 2012, several employees provided hand and foot massages to the evacuees. This helped to heal the sorrow of their loss through touch.

Akihiro Kadokura, President, Ortho Clinical Diagnostics KK

As part of the Asia Pacific Contributions Committee Volunteer Month, 70 Johnson & Johnson employees in Vietnam worked to create a healthier, friendlier learning environment in the Tri An Primary School in Dong Nai. Volunteers planted flowers, decorated a library, helped rebuild a play yard, and painted classroom window trim and doors.





Five days a week, Gayatri Samtra makes house calls throughout her community in Banitabla, India, bringing important health information and medicine, as well as referring patients for further medical treatment. With the support of Johnson & Johnson, Gayatri has become a Community Health Volunteer, known locally as Swasthya Sahahikas. The volunteers make a significant impact in rural areas, where access to health care can be limited, and where the nearest health care professional can be miles away.

Japan, was one of those employee volunteers. He also listened as the elderly shared personal stories.

“One woman thanked me profusely. In return, I kept thanking her for the privilege to serve,” said Kadokura-san. “We truly realized the power of the human touch and how we are all connected with each other.”

Providing Comprehensive Postnatal Care

When Fukushima’s medical care and transport infrastructure were disrupted following the Tohoku earthquake and tsunami, one of the most fragile populations affected by the disaster, new mothers and infants, were threatened. Women and infants were receiving inadequate care during and after childbirth, shortened hospitalizations after childbirth, and one postnatal depression rate climbed 30-40 percent higher than normal in the disaster-stricken areas.

A grant by Johnson & Johnson and The Nippon Foundation now supports Tokyo Midwives Association’s establishment and operation of 11 MAMA Salons (Maternal Care Salons). Midwives supervise postnatal stays of up to one month, provide childcare lectures and consultations, and administer weight and growth checks to the infants.

The MAMA Salons were established in eight locations in

Fukushima (comprising the cities of Fukushima, Koriyama, Sukagawa, Shirakawa, Aizuwakamatsu, Date, Nihonmatsu and Soma), and three locations outside Fukushima (Nagaoka City in Niigata Prefecture, Nakano Ward in Tokyo and Yokohama City in Kanagawa) where there are a high number of evacuees from Fukushima who will benefit from the program. The salons have helped restore medical care to new mothers and infants affected by the disaster.

Rebuilding New Jersey Strong

In late October 2012, a storm brewing in the western Caribbean Sea was about to become the largest Atlantic hurricane on record. Its forecasted path put communities along the entire Eastern coast of the United States on alert. Working with our disaster relief partners, nearly 20,000 disaster relief kits were pre-positioned for distribution to the hardest hit areas of New Jersey, New York and Pennsylvania.

Hurricane Sandy moved on shore just north of Atlantic City, New Jersey, on Monday, October 29, and continued its destruction through Tuesday, October 30. The storm’s severe and widespread damage, in addition to its unusual merger with a frontal system, resulted in its nickname, Super Storm Sandy.

In the immediate aftermath, Johnson & Johnson worked with

disaster relief partners on a number of relief programs. Our partner AmeriCares ran a fully-equipped mobile clinic that traveled among the hardest hit areas in New Jersey and New York. Johnson & Johnson hygiene kits stocked with soap, shampoo, toothpaste and other personal care items were distributed to emergency shelters, and Save the Children helped by distributing Johnson's® Baby "Care kits." Our employees donated generously to disaster relief and community recovery efforts, and their donations were matched by the company on a two-to-one basis.

With the storm's damage impacting our corporate headquarters, Johnson & Johnson reached out to community partners and responded to local needs by providing fuel to the police and emergency services in the areas surrounding New Brunswick. We supplied generators and diesel fuel to local municipalities, prepared food for first responders, sent company-store goods to local shelters, and dispatched a fire truck from one of our sites to a New York City hospital to pump out water.

As the storm passed and the damage was assessed, the hard work of rebuilding began. To meet the needs of long-term recovery, Johnson & Johnson collaborated with the Community Foundation of New Jersey (CFNJ) in the establishment of The New Jersey Recovery Fund, a joint effort between local and national foundations, corporations and individuals to provide support to New Jersey's affected communities and nonprofits.

The fund serves as a flexible source of financial support to local organizations and communities as they lead and participate in rebuilding efforts. Johnson & Johnson's contribution focuses on strengthening the capacity of local nonprofits and health service providers to better serve and support the needs of their local residents. CFNJ is an alliance of families, businesses and foundations that work together to connect donors to issues and communities to provide leadership on issues critical to the health of New Jersey.

Superstorm Sandy tested us in many ways but gave us a chance to demonstrate our spirit to care for the communities where we live and work as outlined in Our Credo.

Meeting Community Needs

Nearly 40 years ago, senior leaders at Johnson & Johnson were exploring the possibility of moving the worldwide headquarters from New Brunswick, where the company was founded in 1886. Rather than leave the city to face a challenging economy and urban decay, the company made a commitment to stay, with the understanding and commitment that urban revitalization was multi-faceted and required a collaborative approach. A public-private partnership was established to manage the revitalization process, and a community poll was created to help inform decision-making.

Since 1975, New Brunswick Tomorrow has been dedicated to improving the quality of life here. "Our relationship is not a typical funder/grantee relationship. Johnson & Johnson brings their considerable resources, leadership and commitment to the New Brunswick community, which is consistent with their Credo," says Jeffrey Vega, President, New Brunswick Tomorrow. "Without Johnson & Johnson, New Brunswick Tomorrow would not be able to address the needs of our neighborhoods—

the health and social needs of our families."

Ongoing efforts are informed by the longest-running community survey in the United States. Conducted by the Eagleton Center for Public Interest Polling at Rutgers University in partnership with New Brunswick Tomorrow and Johnson & Johnson, it serves to capture perceptions of the quality of life in New Brunswick, as well as reactions to the changes and developments that have occurred as a result of revitalization over the past three and a half decades.

Vega explains how each survey provides valuable data to guide actions and how collection of the survey at regular intervals over time allows for the monitoring of progress toward the mission of improving the quality of life in New Brunswick.

"For example, in 1978, 34 percent of residents felt positive about New Brunswick. In the 2012 survey, 59 percent feel positive," says Vega. "This is a remarkable turnaround, but it also tells us there is work we still need to do to continue the upward trend."

The survey also reinforces the top health concerns of people living in New Brunswick. In the latest survey, diabetes and weight-related issues are the most prevalent health conditions among respondent households, with a little under one quarter reporting someone in their household falls into each of these categories.

"Our efforts strive to effectively meet the needs of residents in our headquarters community," says Bonnie Petrauskas, Director, Corporate Contributions, Johnson & Johnson. "The survey helps us understand issues, identify trends and provides insights that can impact other health initiatives we support."

Diabetes and obesity are certainly among those health care needs addressed by Johnson & Johnson together with local hospitals and leadership. For example, Johnson & Johnson partners with Saint Peter's University Hospital's Perinatal Diabetic Management Services Initiative. The program helps to increase access for underserved and at-risk patients to ensure healthier, long-term outcomes for women and their children. The Family Health Center conducted 1,200 prenatal patient assessments, saw 150 new diabetic patients, and referred 178 patients with diabetes and their babies to a medical home in 2012.

In another example, a Latino Diabetes Wellness and Prevention Program with Robert Wood Johnson University Hospital provides education, medical referral and health navigation to disadvantaged Latino families dealing with diabetes or potential risk factors. In 2012, 72 percent of 130 participants who enrolled completed one-on-one education classes; 30 percent achieved improvements in clinical indicators such as body mass index and weight at six months.

In 2012, through community-based partnerships, a total of 40 programs were delivered by 26 partner organizations focused on improving access and delivery of health care services, raising academic achievement and/or enhancing community livability in New Brunswick.

Just as we are committed to our hometown community, we live out this commitment all over the world, making life-changing, long-term differences in people's lives. ■

Our Credo

We believe our first responsibility is to the doctors, nurses and patients, to mothers and fathers and all others who use our products and services. In meeting their needs everything we do must be of high quality. We must constantly strive to reduce our costs in order to maintain reasonable prices. Customers' orders must be serviced promptly and accurately. Our suppliers and distributors must have an opportunity to make a fair profit.

We are responsible to our employees, the men and women who work with us throughout the world. Everyone must be considered as an individual. We must respect their dignity and recognize their merit. They must have a sense of security in their jobs. Compensation must be fair and adequate, and working conditions clean, orderly and safe. We must be mindful of ways to help our employees fulfill their family responsibilities. Employees must feel free to make suggestions and complaints. There must be equal opportunity for employment, development and advancement for those qualified. We must provide competent management, and their actions must be just and ethical.

We are responsible to the communities in which we live and work and to the world community as well. We must be good citizens — support good works and charities and bear our fair share of taxes. We must encourage civic improvements and better health and education. We must maintain in good order the property we are privileged to use, protecting the environment and natural resources.

Our final responsibility is to our stockholders. Business must make a sound profit. We must experiment with new ideas. Research must be carried on, innovative programs developed and mistakes paid for. New equipment must be purchased, new facilities provided and new products launched. Reserves must be created to provide for adverse times. When we operate according to these principles, the stockholders should realize a fair return.

Johnson & Johnson