

Bristol-Myers Squibb Foundation and Corporate Philanthropy



Addressing Health Disparities Around the World



The mission of the Bristol-Myers Squibb Foundation is to help reduce health disparities by strengthening community-based health care worker capacity, integrating medical care and community-based supportive services, and mobilizing communities in the fight against disease.

ON THE COVER

The Bristol-Myers Squibb Foundation supports efforts to bring mobile physical and mental health services to people living in rural areas of Alabama.



A Message from the President

“Our most important task remains to continue to create hope.”

Working with partners in civil society, government and business, our focus at the Bristol-Myers Squibb Foundation has been to bridge gaps in health care in fighting HIV/AIDS in Africa, hepatitis in Asia, serious mental illness in the U.S. and cancer in Central and Eastern Europe.

Seeking to be a relevant catalyst for change in these areas, we have built on lessons learned and the positive outcomes of earlier grants while utilizing community-based solutions developed and validated through our 11-year-long *SECURE THE FUTURE*[®] program.

I'm pleased that as a result of the work we've done in these four targeted areas, the Board of Directors of the Bristol-Myers Squibb Foundation in late 2009 approved a fifth area of focus, funded at a \$100 million level over the next five years. We'll now also be addressing health disparities in the treatment and care of type 2 diabetes in the U.S.

Type 2 diabetes is one of our fastest-growing health problems and the seventh leading cause of death in the U.S. More than 23 million children and adults in the U.S., or nearly 8 percent of our population, have been diagnosed with diabetes. Another 57 million Americans are estimated to be pre-diabetic, including about two million adolescents. Complications of type 2 diabetes can include heart disease, blindness, kidney disease and nerve damage, including amputations. What's more, diabetes costs the U.S. health care system about \$174 billion a year and disproportionately affects certain groups. According to a survey of those over age 20, while less than 7 percent of non-Hispanic whites have diabetes, it strikes more than 7 percent of Asian Americans, over 10 percent of Hispanics, nearly 12 percent of African Americans and about 16 percent of Native Americans.

We have an enormous opportunity to help create innovative, community-based solutions to bring people into treatment and care to deal with risk factors that both cause diabetes and exacerbate the condition, especially among underserved populations. By using philanthropy to help develop capacity and infrastructure and better understand the underlying societal aspects of disease, our Foundation can help enhance patient outcomes.

This focus on strategic philanthropy is evident across our Company programs. Access and affordability programs, product donations, environmental health and safety efforts, employee giving as well as other charitable contributions all reflect the Company mission to help patients prevail over serious diseases and its commitment to promote conscientious citizenship that improves health and promotes sustainability in our communities.

As a responsible corporate citizen and neighbor, we also continue to support worthwhile causes at the local level – primarily in health, social welfare, education and the environment. In this report, you'll read more about some of these efforts and learn about some of the people we have sought to help along the way. After all, as we support institutions and organizations and work alongside governments and other partners, we never lose sight of the individuals we are trying to help lead healthier lives.

Our most important task remains to continue to create hope. Each day we try to build on that foundation, to turn the corner, to develop a legacy for the future, to create new models of possibility and to do what it takes to make a difference.

Please visit the Foundation online at www.bms.com/foundation to follow our progress. We appreciate your interest and your support.

John Damonti

President, Bristol-Myers Squibb Foundation
Vice President, Corporate Philanthropy, Bristol-Myers Squibb

SECURE THE FUTURE Offers Technical Assistance for HIV/AIDS Crisis in Africa

In Swahili, Tunajali means “we care.” It is also the name of a project supported by the Bristol-Myers Squibb Foundation (BMSF) and organized by Kifaru Community Development in Tanzania (KICODET), a community-based organization addressing community responses to HIV and AIDS. KICODET operates in Kibaha, a coastal region. Recently, KICODET turned its attention to nearly 800 grandparents in the area caring for their grandchildren – more than 1,900 orphans and vulnerable children – with the help of the Bristol-Myers Squibb *SECURE THE FUTURE* Technical Assistance Program (TAP). The initial focus was to train about 130 grandmothers and grandfathers in 13 villages in one local district, helping them generate income to support themselves and their grandchildren, gain psychosocial support, and reduce their risk – and that of their grandchildren – to HIV infection.

Doing the training was Grandmothers against Poverty and AIDS (GAPA), an NGO of South African grandmothers organized in 2001, thanks to a *SECURE THE FUTURE* grant. TAP had asked them to train their Tanzanian counterparts – sharing methods for coping, including grief and bereavement support,

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“we care.”**

financial independence, and basic HIV/AIDS awareness and prevention. As one participant said, GAPA acted as “human vessels” to export critical knowledge.

The result was better than had been anticipated: Within a year, 240 Tanzanian grandmothers had developed 24 support groups and learned to generate income through crafts and other small business ventures. It was just one of many examples of how TAP is helping

implement practical solutions to ongoing concerns for dealing with HIV/AIDS in Africa. After all, even with the additional resources that have poured into Africa, especially over the past five years, the need to stem the tide of the HIV/AIDS pandemic is still great.

The BMSF Technical Assistance Program is an innovative approach to corporate philanthropy and the AIDS crisis, disseminating know-how that can enhance the utilization of funds provided by other global programs. In 2007, TAP was created to use resources developed from the BMSF’s landmark \$150 million *SECURE THE FUTURE* grant making and capacity building program for vulnerable populations affected by HIV in Africa to share workable approaches and solutions with NGOs, communities and governments across Africa. As a result, *SECURE THE FUTURE* has moved from funding critical efforts to supporting effective technical implementation.

HOW WE’RE HELPING

One BMSF staffer recalls an early TAP site visit to a grantee in Tanzania called **KICODET** to interview a group of grandmothers seeking help. “I remember sitting among 20 grandmothers asking them: ‘So what can you do for yourself?’ They almost thought I had lost my mind. They answered: ‘What do you expect? We’re old. We can’t do anything. Please help us.’ I returned a few months later after they had been trained by the TAP-funded **GAPA** grandmothers from South Africa. The grannies, 150 of them, came to the project launch, full of pride in what they’d accomplished. They shook the hall with song and dance and the hall was laden with handicrafts they had made. It was a remarkable turnaround.”



Local partners are all community-based NGOs that had either received grants during the earlier *SECURE THE FUTURE* grantmaking phase, or had partnered with the BMSF on other projects – like organizing training programs, capacity building and other skills sharing efforts. New TAP grant recipients are also receiving funding through multi-sectoral partnerships. TAP scales up technical assistance using local sources. It also brings technical assistance to programs that have already garnered support from government and private funders.

The first TAP grants were awarded in 2008 and a second round in 2009, disbursing about \$3.3 million in seed grants in two years of operation. It has attracted applications from across the continent and is currently involved in 24 engagements, working with 10 local NGO partners who already have built viable programs. These range from strengthening the prevention of mother-to-child HIV/AIDS transmission and offering psychosocial support for vulnerable populations, to training health care professionals, reducing stigma and discrimination, building the professional capacity of local groups and improving patient adherence to treatments. At the same time, areas of technical focus are being enhanced including leadership, project management, capacity building, delivery of services and monitoring and evaluation processes.

This program to address HIV/AIDS health disparities in Africa has continued to focus on replication and sustainability – whether that occurs by transferring knowledge, sharing lessons learned or creating new partnerships with governments, NGOs or other health care partners with the expertise and resources to have a significant impact. Recent examples include developing faith-based awareness and counseling at 25 churches in Liberia as well as a



comprehensive care and treatment program for HIV-infected children in three hospitals in Morocco.

TAP seed funding and technical support also has helped build capacity for a number of NGOs in Togo and the Democratic Republic of Congo (DRC), countries that had not participated in earlier BMSF programs. Several, including the DRC and Liberia, have had special HIV/AIDS challenges during reconstruction following periods of prolonged wars and civil unrest. Yet participation is encouraged and is happening. In 2010, plans are to expand TAP's footprint from 20 to 24 countries and also to focus on opportunistic infections, like tuberculosis, as well as HIV-induced mental illness.

TAP's differentiation is the recognition that money is only part of the solution when it comes to HIV/AIDS. Funding alone will not eliminate the pandemic. Also critical are expertise, experience and technical support to implement programs and effectively utilize funds from major partners. One of the basic tenets of these TAP efforts remains to utilize community-based solutions, where services and planning are coordinated around a patient-centered approach to problem solving.

Visit www.bms.com/foundation/reducing_health_disparities/hiv_aids and www.facebook.com/pages/SECURE-THE-FUTURER/40590021477 for more information.

HOW WE'RE HELPING

At Imbabazane, a municipality in KwaZulu-Natal, South Africa, TAP is providing seed funding and technical expertise to the **Bhekazulu Self-Sufficiency Project**, a community NGO working at the local level to implement some of the big ideas about community-based treatment and support first generated by *SECURE THE FUTURE*. That includes an ambitious program to prevent the transmission of HIV from mothers to their newborns. Recently, of the 210 babies born there to HIV positive mothers, 97 percent were free of the disease. In addition, 19 volunteers have been trained in basic home-based care practices and a total of 300 children are served in a drop-in center and in five transitional shelters for orphans and vulnerable children. Programs like TAP are making a difference.

In Zambia, **Mpilonhle**, a long time BMSF partner in South Africa that has experience in conducting memory box training, was contracted to help **Children with a Future**, a local NGO, implement relevant aspects of its program. Memory boxes help AIDS orphans come to terms with the loss of their parents and guardians, by engaging the orphans in working through and cherishing the memories of their dead parents.



Helping People Living with Serious Mental Illness Recover and Thrive in the U.S.

The West Alabama Mental Health Center has given Maurika Walton, now 30, a chance to start again.

A victim of abuse as a child, she has since suffered from major depression, anxiety and post-traumatic stress disorder. Maurika hesitates to think about what might have happened to her if not for the help from the West Alabama Mental Health Center. "I was in pretty bad shape. I had left school. I had lost my job," she says. Then she returned to the Center's office in Eutaw, Alabama, which she used to visit for counseling as a teenager. "I felt my life wasn't going to get any better, but they took an interest in me, and worked with me to see that there was so much more out there, and so much more to me. Now the center is a kind of refuge. I'm not just my illness when I walk through those doors. There's a whole other aspect of me, and they see that and help me to see it, too."

The Center is a partner with the Bristol-Myers Squibb Foundation (BMSF) in the Alabama Coalition for a Healthier Black Belt, an alliance of eight partners from government, academia, state hospitals, community mental health centers and community and faith-based organiza-

tions spearheaded by the Foundation. Much like the other programs that the BMSF funds, its aim is to address serious health disparities – in this case in mental illness in the rural South.

Serious mental illnesses, like schizophrenia, major depression and bipolar disorder, can be enormously disabling if left untreated. In the U.S. today, some six

percent of all Americans – about one of every 17 people – suffer from a serious mental illness. More than two million suffer from schizophrenia, more than 10 million from bipolar disorder and some 15 million from major depression. And despite significant improvements in treatment and care, only about a quarter of all people affected in the U.S. receive help.



HOW WE'RE HELPING



Alabama Coalition for a Healthier Black Belt: The projects of eight partners are supported and linked to reduce stigma, to mobilize communities to engage in the care and support of people living with serious mental illness and to expand access to psychiatric expertise in 12 impoverished and rural counties in Alabama. In one project, Coalition partners **NAMI Alabama (National Alliance on Mental Illness)** and the **University of Alabama at Birmingham** conduct outreach and provide education about mental illness to the clergy of African-American churches. In another, mobile units from Coalition partners **Community Care Network** and the **West Alabama Mental Health Center** bring integrated mental and physical health screening, referral and care services to small remote towns.

HOW WE'RE HELPING

New Jersey Mental Health Institute: Hispanics with limited English proficiency in three New Jersey counties are the primary beneficiaries of a program that seeks to increase the access to and availability and provision of quality culturally and linguistically competent behavioral health care to these populations in Bergen, Burlington and Essex counties. A secondary goal is to replicate the program in other counties in the state and across the nation.



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Responding to such disparities, over the past two years, the BMSF, Capital Health System and the Henry J. Austin Health Center (HJAH), a federally qualified health center in Trenton, N.J., have worked together to improve the mental health services provided at the primary care clinic. Through an innovative project that co-locates a psychiatrist from Capital Health System at the HJAH, primary care providers have received expert “real time, real patient” clinical mentoring as well as classroom lectures to help them develop skills to assess and manage patients living with mental illness. They now feel more competent evaluating and treating these patients on an ongoing basis.

Programs funded by the BMSF to help reduce mental health disparities share some common themes, the most important of which is a focus on building health care and support services at the community level. For example, the BMSF supports efforts to strengthen and build enduring connective tissue among services and providers in rural areas, particularly in the southeastern United States, where mental health resources are limited and both poverty and stigma create barriers to care and recovery. It also supports real world implementa-

“... I’m not just my illness when I walk through those doors. There’s a whole other aspect of me, and they see that and help me to see it, too.”

tion and demonstration projects that explore ways to make evidence-based practices live and breathe in diverse settings and for diverse populations. Other grants represent innovative efforts to integrate primary care with mental health services.

A program at Boston Medical Center is engaging peer navigators to work with people with serious mental illness on a one-to-one basis to help them navigate the physical and mental health care systems. Mobilizing an evidence-based practice, the peer navigators – themselves people living with mental illness – receive special training to support their fellow mental health care consumers. Such BMSF-funded programs can make a difference – one patient at a time.

In one case, Jerome, 27, suffers from schizophrenia as well as obesity, high

blood pressure, pre-diabetes and high cholesterol. In July 2009, he had not seen his primary care doctor in more than seven months and had not seen his psychiatrist in over nine months. He was not taking his medications, had not been keeping track of his blood pressure, and at over 470 pounds, was at a very unhealthy weight. Yet, when Jerome got a letter inviting him to participate in the Boston program, he “called right away.” He was connected to a peer navigator, who set up both primary care and psychiatry appointments for him. When Jerome was able to start taking his medications again, he was given a visiting nurse to check his blood pressure and was referred to a dietician to assist with weight loss.

The things that he likes best about the Navigator program include having someone to talk to about his health and giving him resources about health topics. Jerome says that his navigator helps to “explain things when I don’t understand them” and that “they got me to see a doctor.” Change can happen.

Visit www.bms.com/foundation/reducing_health_disparities/mental_illness for more information including current grants.

Delivering Hope: Addressing Health Disparities in Hepatitis in Asia

It was a severe bout of malaria affecting three of their six children that initially brought Christopher's family to the Baptist Christian Hospital in Tezpur, India. Christopher is a daily wage laborer who sustains his family by selling wood. Where they live, children suffer from severe malnutrition, often dying of preventable and treatable diseases, in part because they have no easy access to health education and care. Fortunately, after three hours of walking through a dense forest and another three hours taking other modes of transportation, not only did the children receive the care they needed, but the entire family was also given health education and information about hepatitis B virus (HBV), as part of

a grant from the Bristol-Myers Squibb Foundation (BMSF) to the Christian Medical College of Vellore.

“The efforts of HBV education paid dividends when a week later the whole family was given vaccinations.”

“The efforts of HBV education paid dividends when a week later the whole family was given vaccinations,” says Dr. Pratibha Milton, the project director for Baptist Christian Hospital. “They are expected back after Christmas for a second dose.” The vaccinations that

reached more than 1,200 people in Tezpur were made possible by a special employee giving program supported by Bristol-Myers Squibb employees in the U.S. Progress in Tezpur and other such communities across India and indeed, across Asia, has been slow as teams must convince communities about the value of immunization, even as they attend to urgent health care concerns like malaria and diarrhea, especially in young children. The challenges are immense – but so are the opportunities to make a difference.

About one million people die each year from liver cancer or liver failure caused by HBV worldwide. That's the equivalent of 2,800 deaths per day. Despite the availability of the hepatitis B vaccine,

HOW WE'RE HELPING

A project in the Pearl River Delta region of Guangdong province in southern China, a major manufacturing center with more than 20 million migrant workers, focuses on anti-discrimination and prevention. With support to the **Asia Pacific Alliance against AIDS, TB and Malaria of NvWA** in partnership with the Guangzhou Center for Disease Control, Renmin University and other groups, this effort represents the first comprehensive on- and off-site workplace hepatitis awareness, education and prevention project to reinforce existing policies that seek to protect infected workers and job seekers. The *Delivering Hope*-funded “Workers Capacity Building Center on Public Health” in Guangzhou will help migrants learn more about the disease and better cope with their condition. A multi-media educational campaign for factory managers demonstrates better ways to address hepatitis in the workplace. For those who need additional health information assistance, the program will include toll-free help lines, text messaging systems and websites. All told, these efforts may reach some 4.65 million migrant workers.



too many children worldwide remain unvaccinated and at risk.

Alongside hepatitis B, hepatitis C virus (HCV) is also a major health concern. An estimated 170 million people are infected with HCV, with three to four million new HCV cases each year globally. That is why the Bristol-Myers Squibb Foundation's *Delivering Hope: Hepatitis Awareness, Prevention and Care* program has focused its resources on combating health disparities in Asia around prevention and awareness of hepatitis B and hepatitis C.

The challenges in addressing both diseases are significant because of poor access to health care, education or prevention programs, and to social stigma and disease management initiatives. To realize and sustain health gains, comprehensive interventions are required integrating awareness, disease education, prevention and medical care while also addressing social health factors. These interventions are generally non-medical and community-based.

As a result, priority hepatitis programs encompass capacity building to increase HBV and HCV prevention and management skills by targeting health care professionals and lay health workers; providing basic facts, information and education to dispel stigma and create general awareness; developing best practices for prevention and management to inform public health policy; and increasing the profile of HBV and HCV as serious medical conditions and public health priorities by mainstreaming them with other relevant priority health and social issues.

In February 2009, working with the Tokyo-based Asia Pacific Association of the Study of Liver (APASL) secretariat, the BMSF brought together grantee organizations along with experts and policy makers from Asia, the U.S. and



southern Africa, in a Learning and Sharing Workshop to discuss community-based education and outreach interventions and to share best practices that can be applied in their home countries. Among the innovations that have been developed is the identification of children as important entry points for building family and community awareness.

The BMSF's support for hepatitis-related efforts in Asia started in 2002. In 2006, it expanded those efforts to broader support for hepatitis B and hepatitis C awareness, prevention and education as well as mainstreaming and integrating interventions and health education in public health programs. Most recently, five new grants for the region, totaling approximately \$1.1 million, focus on hepatitis C prevention, education and mitigation in Taiwan, mainland China and India. To date, *Delivering Hope* has supported 18 projects in Taiwan, mainland China, Japan and India.

Visit www.bms.com/foundation/reducing_health_disparities/hepatitis for more information including current grants.

HOW WE'RE HELPING

A portfolio of Foundation-supported projects aims to effectively raise the profile of hepatitis B and hepatitis C in Asia, inform health policy and national programs, build capacity for institutions as well as the potential for community responses, and target prevention in the hardest-hit and greatest at-risk populations including children, blood donors and health care professionals, as well as the general population.

For example, there are seven HBV and HCV grants across India being supported by the BMSF under its *Delivering Hope* program. Their impact is already being felt. In Tripura, the **Hepatitis Foundation of Tripura (HFT)** and the State government there provided first doses to 150,000 people across the State in a single mass vaccination campaign that will end when the last doses are administered in May 2010. HFT's 1,000 volunteers run outreach and vaccination clinics on Sundays at 12 health centers. Also, in Mumbai, the **National Liver Foundation** has partnered with the **Bombay Society of Blood Banks** to enhance HBV and HCV pre- and post-test counseling.

Also, a grant to the **Liver Disease Prevention & Treatment Research Foundation** in Taiwan funds a three-pronged, community-based project that includes disease awareness and screening of the general population, targeted disease education and self-management for patients, and training health care providers in detection, care and management of infected people. The project focuses on HCV-infected people in remote areas and will seek to create a replicable model for HCV infection control and treatment.

And by supporting the **Liver Foundation, West Bengal**, a two-part project – HCV, the Indian Face and HCV, the Indian Action – seeks a better understanding of the natural history of the infection through an epidemiological survey of the impact of liver disease and HCV on public health. That information will help inform public health policy and foster prevention and awareness activities in at-risk populations. The project also will conduct a nationwide, multi-center, evidence-based intervention focusing on HCV awareness and prevention through blood transfusions and injectable drug abuse.

Serving the Person Living with Cancer: Three Stories about *Bridging Cancer Care*

Not long ago, a 48-year-old Hungarian gypsy and metastatic colorectal cancer patient was referred by the General Hospital in Budapest to the Hungarian Hospice Foundation (HHF) – a Bristol-Myers Squibb Foundation (BMSF) grant recipient – for hospice care and psychosocial support. Thanks to that support, HHF psychological and medical staff had received cultural competence training in the traditions and family culture of gypsies. As a result, a multidisciplinary staff was able to provide expert care, counseling and comfort to the patient and his large family. High quality continuum of care approaches for cancer patients include palliative and hospice care, characterized by services that are delivered with knowledge of and sensitivity to the ethnicity and culture of the individual patient.

As the result of the work of another BMSF grant to the Urszula Jaworska Foundation (UJF) in Poland, a chronic myelogenous leukemia (CML) patient and her husband, who had both been experiencing considerable distress

around their battle with her cancer, participated in a four-day workshop sponsored by the UJF in April 2009.

“We learned how to live and above all, how to relax and regenerate our strength for the struggle with cancer.”

After the workshop, the patient wrote to the sponsors describing its impact. She said it was like “honey for our hearts.” At the workshop, she continued, “We learned how to live and above all, how to relax and regenerate our strength for the struggle with cancer.”

In a third case, Istvan, a 49-year-old man with pancreatic cancer, was referred by his oncologist to the Firebird Foundation, a BMSF grant recipient in Hungary that has sought to create psychosocial support for disadvantaged cancer patients. Istvan was experiencing

difficulties emotionally in dealing with his chemotherapy. He joined Seraphis, a Firebird program supported by the BMSF that trained social workers and family care professionals in psychosocial counseling, including sessions organized with the help of a family care center operating in a district in Budapest with one of the city’s highest levels of unemployment and poverty. As his oncologist said, “Istvan had given himself over to suffering and felt no hope for the future.” His psychotherapy sessions at Seraphis helped him better deal with his chemotherapy.

During the sessions Istvan was able to communicate that he was also experiencing distress because he felt unable to financially provide for his family, which had begun to treat him as a disadvantaged child with few rights or privileges, furthering his isolation. Soon it became clear that the entire family – Istvan, his wife and college-aged daughter – needed to join in counseling sessions and focus on unresolved relationship issues, thus restoring

HOW WE’RE HELPING

In Hungary’s southeastern city of Hódmezővásárhely, the **Hungarian Cancer League** and **Vásárhely Health Program** are receiving BMSF support to train mammography technicians and integrate social workers into participating primary care practices in order to boost mammography screenings. Of great concern are economically and socially disadvantaged women, who often present with advanced stages of breast cancer and experience lower survival rates in a country that already has the highest premature cancer mortality rate in Europe.



balance within the family and reducing tensions. These sessions helped Istvan to talk about his fears and needs, and as the Firebird psycho-oncologist reported, “This will help [the family] stay strong when facing the difficulties they will have to face due to Istvan’s illness. The family has learned to appreciate that they can be here for each other and love each other in the moment.”

These three stories clearly demonstrate that cancer is a struggle that affects the whole person. And for people living in countries plagued by the highest cancer incidence and worst outcomes in Europe, the struggle is even more difficult. That’s why reducing cancer disparities through building capacity for the delivery of high quality and comprehensive cancer services in Poland, the Czech Republic, Hungary, Russia and Romania is the focus of the Bristol-Myers Squibb Foundation’s *Bridging Cancer Care* initiative.

The program directs funding and develops partnerships in the region in order to help narrow the differences in care and outcomes. A particular focus has been on enhancing psychosocial support for cancer patients and their families. Other partnerships address developing palliative care services in rural areas, enhancing breast cancer disease education and screening programs for at-risk women, and driving the quality of care and patient experience at cancer centers. Looking ahead, the BMSF expects to target emerging needs in community-based cancer medical services like cancer nursing and to support a goal for all EU member states to have their citizens screened for the top five cancers by 2013.

Visit www.bms.com/foundation/reducing_health_disparities/cancer for more information including current grants.



HOW WE’RE HELPING

Hospice Casa Sperantei (Romania): Integrating palliative care and creating a continuum of care across community and hospital settings.

Hungarian Cancer League and Vásárhely Health Program (Hungary): Increasing breast cancer screenings for socially disadvantaged women through psychosocial support and providing training for mammography technicians, especially in rural areas.

Institute of Biostatistics and Analyses at Masaryk University and the Czech Society for Oncology (Czech Republic): Developing and piloting for replication nationally an information system to assess cancer care service availability and quality at a cancer center in the Czech Republic.

Project Hope (Poland): Establishing multidisciplinary case management teams and services for the care and treatment of pediatric cancer in the Czech Republic, Hungary, Poland and Romania.

“Quality of Life” Foundation (Russia): Providing workplace breast exams, breast cancer disease training for at-risk women and communications training for primary care physicians attached to workplaces in order to help them better explain the need for breast exams to female employees. One additional objective is to drive good business practices in employee health.

Being a Good Neighbor in the Community

For Bristol-Myers Squibb, being a good neighbor and a responsible corporate citizen means supporting a range of charitable causes where its employees live and work. The Bristol-Myers Squibb Foundation (BMSF), the Company and its employees provide help and hope across multiple dimensions and geographies, especially helping people at risk.

These outreach efforts focus primarily on addressing unmet medical needs and reducing health disparities; improving the quality of science, technology and math education; and partnering with community groups to meet basic human needs such as food and shelter and promote community development along with economic, social and environmental sustainability.

Major gifts from Bristol-Myers Squibb and the Bristol-Myers Squibb Foundation have had a significant impact on local communities. They helped develop New Jersey's

first freestanding children's hospital: the Bristol-Myers Squibb Children's Hospital at Robert Wood Johnson University Hospital in New Brunswick (N.J.) and its pediatric centers of excellence. They also helped advance the Golisano Children's Hospital, the first children's hospital in Syracuse, N.Y., which opened in late 2009. Other grants provided funding for a new outpatient clinic for indigent patients at the University Medical Center of Princeton in Plainsboro, N.J., set to open in 2011, and to expand trauma services at Capital Health Regional Medical Center in Trenton, N.J.

Seeking to align its giving with the Foundation's emphasis on serious mental illness in the U.S., the Company supports school-based mental health services in the New Brunswick (N.J.) Public Schools that ensure students in need have access to mental health professionals and supportive services. And it is a principal sponsor of the American Cancer Society's Trenton Crusade Against Cancer, a multi-lingual campaign to reduce cancer-related deaths with education and free colorectal and prostate cancer screenings for the uninsured and underinsured.

A leader in improving the quality of science education, the Company supports the Bristol-Myers Squibb Centers for Science Teaching and Learning at New Jersey's Rider University and Montclair State University and at Quinnipiac University in Connecticut. Bristol-Myers Squibb also led the development of R_xeSEARCH, an innovative multidisciplinary curriculum to educate young people about how medicines are developed, adopted by more than 40 high schools around the country. And the Company has funded purchases of laboratory equipment and other materials in New Jersey and Massachusetts to help students learn science by conducting experiments in DNA extraction, genetic fingerprinting and other high-tech projects.

Support is provided to the Governor's School in the Sciences at Drew University, a fellowship program for minority students planning careers in pharmaceutical research, and for scholarships to students studying life sciences, biotechnology, health care technology, nursing and related subjects at area colleges.

HOW WE'RE HELPING

Among many efforts to demonstrate an enduring commitment to sustainability and environmental stewardship, Company grants and in-kind contributions have supported development of the **Lawrence-Hopewell Trail**, a 20-mile public access recreation and transportation loop expected to be completed in 2012. Two Bristol-Myers Squibb-funded sections opened in 2009 and two others are expected to open in the fall of 2010.

In 2009, a major gift was awarded to the **Stony Brook-Millstone Watershed Association** to support expansion of the nature preserve's Buttinger Education Center. Other support helped foster land preservation and environmental stewardship through employee and Company support of the **Delaware & Raritan Greenway Land Trust** and similar organizations in New Jersey, Connecticut, New York and Massachusetts.



Getting Products to People in Need

Photo courtesy of the American Red Cross. IFRG/Eric Quintero



Since the catastrophic earthquake that struck Haiti in January 2010, the Bristol-Myers Squibb Foundation (BMSF), the Company and its employees demonstrated a spirit of giving and giving back, donating more than \$6.7 million in cash and products to assist survivors.

Carlynn Cadet, a Cardiovascular/Metabolics specialty representative in New York, had a personal stake in the effort. “My family lives in Haiti, very close to where the disaster struck and so this contribution from Bristol-Myers Squibb touches my heart,” she wrote.

To help relieve the immediate suffering, the Company donated nearly \$6 million in medicines, including antibiotics and analgesics, shipped to the Catholic Medical Mission Board, Project HOPE and Health Partners International of Canada, organizations caring for the sick and injured. Also, the BMSF committed more than \$700,000, including cash donations, to the American Red Cross, the Catholic Medical Mission Board and Partners in Health, providing a two-for-one match for U.S. and Puerto Rico employee donations to organizations assisting in relief efforts.

For years, Bristol-Myers Squibb has acted quickly in times of need. Whether in Haiti, after the massive 2009 flooding in Indonesia, the devastating earthquake in Italy that same year, or the horrific earthquake in central China in 2008, each disaster has demanded – and received – immediate assistance and attention. Product donations for disasters and ongoing humanitarian assistance totaled more than \$13 million (at wholesale value) in 2009.

The BMSF also has provided funding support to international relief partners to help enable timely responses with humanitarian aid to sudden natural disasters. Cash donations to Project HOPE helped victims of the recent earthquakes in China and Indonesia; those to Direct Relief International were instrumental for natural disasters in the Philippines, Vietnam and Indonesia by providing water, health care, shelter and sanitation; and aid to AmeriCares is helping it prepare for the future in India, Sri Lanka, El Salvador and Turkey.

In addition, the Foundation has used its resources and relationships with international relief agencies to expand health care resources in developing countries.

ACCESS & PATIENT ASSISTANCE PROGRAMS

Bristol-Myers Squibb and the Bristol-Myers Squibb Foundation understand that in good times, but especially in tough times, the Company has a responsibility to find ways to help those without the means to help themselves gain access to its products.

Through a wide range of patient assistance programs, for example, it helps patients facing financial hardships who may not have prescription drug coverage gain access to Company medicines. The largest of these programs, operated by the **Bristol-Myers Squibb Patient Assistance Foundation**, covers 15 different Company medications and relies on health care providers to seek assistance for qualified patients. Other programs encompass access to the Company's virology and oncology medications. Most recently (latest 2008 audited figures), the Company provided more than 244,000 patients in need with products worth \$228 million (at wholesale value).

Bristol-Myers Squibb also participates in **Together Rx Access**, an industry-wide program for those with low incomes who are not receiving Medicare, as well as in the **Partnership for Prescription Assistance**, a free nationwide service sponsored by America's pharmaceutical companies that connects people in need to more than 475 patient assistance programs throughout the country. Over the years, Partnership programs have helped more than six million uninsured patients. For more information, please visit: www.bmspaf.org.

For instance, recently it worked with Heart to Heart International to improve access to safe water supplies and provide sanitation facilities and hygiene education to indigenous Mayan children and their families in a coffee-growing region of Guatemala. In Mexico and Nicaragua, the Foundation is supporting Project HOPE's diabetes education and training program and MAP International's health training efforts.

Employee Giving to Make a Difference

The letters from some of those who have been helped by the Company's Employee Giving program can break your heart – and fill you with hope. Sifiso Ngcobo, a student in Ladysmith, South Africa, who benefits from employee donations to AIDS orphan transitional shelters, called Kids Care centers, writes: "Sometimes in life I come across difficult things, but the support I got from you good people, it inspired me... Children are benefiting a lot in this program. I beg you good people, don't give up on us. We love you." Fund donations help provide basic necessities to children in sub-Saharan Africa who have lost their parents to HIV/AIDS.

Another child, Siyanda Shabalala, a student who also attends a Kids Care center in South Africa, says: "I will like to thank you for giving us this huge support and love as orphans. As a young school boy, I will like to encourage you to do the same to others that don't have enough support and love." A shipment of school uniforms and new shoes was delivered to one of the centers thanks to the generous support of Company employees. Donations are matched dollar-for-dollar by the Bristol-Myers Squibb Foundation (BMSF).

Under the Company's Employee Giving program, first introduced in 2007, employees in the U.S. and Puerto Rico can give to traditional charitable causes, such as the United Way or other similarly qualified local charitable groups, or they can target Foundation-identified priorities to combat specific global health disparities. In addition to the Kids Care centers, they also can support Reach Out and Read, a Bristol-Myers Squibb Africa project that promotes reading among children and supplies books at several Baylor College of Medicine-Bristol Myers Squibb Children's HIV clinics in the region; a hepatitis B vaccination



program in India; or the West Alabama Mental Health Center Fund in the U.S.

Samuel Maanela, who has been receiving treatment for HIV since 2005 at the Baylor College of Medicine-Bristol-Myers Squibb Children's Clinical Center of Excellence in Maseru, Lesotho, has benefited from Reach Out and Read. He says he loves the books and what he learns from them. "I'm supposed to have a monthly check-up but I go more frequently so I can get a new book," he writes. "These books have opened my eyes to the world. I received a book from the clinic about aeronautical engineering... I'd like to become an aeronautical engineer, even though I also want to be a doctor. My teacher says that I can be both, so that's what I'm aiming for." Giving these books also has opened up horizons for Company employees. "I read to my children every night and wanted to help children and families who visit the clinics get the same opportunity," one remarks. After all, "to give the gift of reading to a child is one of the most meaningful gifts of all."

In 2008, employees were given the option to support the hepatitis B vaccination program, which seeks to serve

HOW WE'RE HELPING

In its first two years of operation, employees donated more than \$400,000 to reach those benefiting from a number of targeted giving programs. Overall in 2009, company employees gave more than \$2.8 million to hundreds of charitable causes. With the Foundation match, their donations generated more than \$5 million to help those in need.

up to 50,000 children living in Assam, a poor remote region in northeastern India. The BMSF is working with a local partner, the Christian Medical College of Vellore, to raise awareness and help bring vaccinations to those who need them most.

And in 2009, employees could also support the West Alabama Mental Health Center Fund. The Center serves people living with mental illness in an impoverished area of the state through a mobile health clinic and by recruiting additional health care workers. Such efforts help address the scarcity of mental health professionals in Alabama's rural communities and are part of a larger Foundation effort to address disparities in mental health care and support throughout the U.S.

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Additional information and updates about the **Bristol-Myers Squibb Foundation** are available online at www.bms.com/foundation.

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