INNOVATION AND INSPIRATION
OUR MISSION
To discover, develop and deliver innovative medicines that help patients prevail over serious diseases.

OUR COMMITMENT
To our patients and customers, employees, global communities, shareholders, environment and other stakeholders, we promise to act on our belief that the priceless ingredient of every product is the integrity of its maker. We operate with effective governance and high standards of ethical behavior. We seek transparency and dialogue with our stakeholders to improve our understanding of their needs. We take our commitment to economic, social and environmental sustainability seriously, and extend this expectation to our partners and suppliers.

To our patients and customers
We commit to scientific excellence and investment in biopharmaceutical research and development to provide innovative, high-quality medicines that address the unmet medical needs of patients with serious diseases. We apply scientific rigor to produce clinical and economic benefit through medicines that improve patients’ lives. We strive to make information about our commercialized medicines widely and readily available.

To our employees
We embrace a diverse workforce and inclusive culture. The health, safety, professional development, work-life balance and equitable, respectful treatment of our employees are among our highest priorities.

To our global communities
We promote conscientious citizenship that improves health and promotes sustainability in our communities.

To our shareholders
We strive to produce sustained strong performance and shareholder value.

To our environment
We encourage the preservation of natural resources and strive to minimize the environmental impact of our operations and products.
At Bristol-Myers Squibb, people are at the center of everything we do: The patients who inspire us. The neighbors who live in our global communities. The employees who make it all possible.

Whether we are addressing unmet medical needs, preserving our natural resources and minimizing the environmental impact of our operations and products, protecting the health and safety of our colleagues, or strengthening our communities around the world, we are always searching for innovative solutions that will have a lasting and beneficial impact.

This report provides an update on our efforts and outlines our new goals and initiatives in the areas of philanthropy and sustainability.

Specifically, this report discusses the important work being done by the Foundation and its partners in various parts of the world to bring new hope to patients with serious diseases by strengthening community-based health care worker capacity, integrating medical care and community-based supportive services and mobilizing communities in their fight against disease. It highlights the Bristol-Myers Squibb Foundation’s work to promote health equity and improve health outcomes for people disproportionately affected by cancer, HIV, hepatitis B and C, type 2 diabetes and for U.S. military veterans with mental health needs. And as the Foundation prepares to celebrate its 60th anniversary, this report introduces several new Foundation initiatives to expand access to specialty care for underserved populations, to address the epidemic of lung cancer in the Tobacco Belt region of the U.S., and to prevent and care for cervical and breast cancer among women living with HIV in sub-Saharan Africa, building on the Foundation’s landmark SECURE THE FUTURE initiative, which is in its 15th year.

This report also discusses Bristol-Myers Squibb’s corporate Sustainability 2015 goals, including our efforts to expand access to our medicines to patients around the world, our innovations in green chemistry, packaging and logistics, and our commitments to environmental health and employee diversity, inclusion and safety that are designed to make Bristol-Myers Squibb — and the world around us — more sustainable.

Alongside useful background information about our various initiatives, this report shares the compelling stories of some of the people at the center of our work. You will read about Sajal Ganguly of India, whose lasting legacy is a support network to help people living with hepatitis. You will learn about our efforts in support of children and communities in Tanzania, where a Foundation project is expanding access to clean water and providing education about sanitation and hygiene in an effort to stop the spread of water-related diseases, such as cholera and typhoid. You will be inspired by Svetlana Konovalova, who is part of a growing movement of oncology nurses working to improve cancer care in Russia, and by Bryan Doerries, whose Theater of War program helps soldiers and their families deal with the feelings of anger, frustration and helplessness that often accompany military service and stay with veterans long after they have left the battlefield.

MESSAGE FROM THE CHIEF EXECUTIVE OFFICER

Lamberto Andreotti
Chief Executive Officer, Bristol-Myers Squibb

In April 2014, Bristol-Myers Squibb was again ranked No. 1 overall on Corporate Responsibility magazine’s annual list of the 100 Best Corporate Citizens, a leading benchmark for socially responsible investors and other stakeholders. Bristol-Myers Squibb is the only company to achieve the No. 1 overall ranking three times, including 2009 and 2012, and has ranked among the top 10 overall each of the last six years.
Achieving More Optimal and Equitable Health Outcomes

As Bristol-Myers Squibb continues its evolution to a Diversified Specialty BioPharma company, the Bristol-Myers Squibb Foundation also is evolving and launching a new philanthropic initiative to address inequities in access to and navigation of specialty health care services in the United States.

A particular focus of the initiative will be working with safety net providers – and the patients and communities they serve – to strengthen systems of care and supportive services so that more patients can effectively navigate their care, play an educated and active role in their treatment plans, and realize better health outcomes.

According to the 2013 National Healthcare Disparities Report and National Healthcare Quality Report, racial and ethnic minorities, the poor and people living in rural areas experience greater disparities in accessing recommended care from preventive screening to diagnostic services to disease monitoring and management to specialist services. Delayed diagnoses and inadequate care lead to poorer health outcomes, greater need for specialist care and higher health care costs.

Barriers to specialty care exist at the patient, provider, practice and health systems levels.

- At the patient level, social determinants of health such as socioeconomic status, education, transportation and health system literacy affect a patient’s ability and efforts to seek and engage in medical care.
- At the provider level, there is a shortage of specialists in many areas of the country and primary care clinicians may lack the experience, confidence or licensing necessary to manage more complex cases within their practices.
- At the practice level, there are weak referral and follow-up mechanisms between primary care practices that serve vulnerable and high risk populations such as Federally Qualified Health Centers and specialty practices such as those offered at academic medical centers.
- At the health system level, the financial burden of co-pays for specialty service and state Medicaid restrictions on where patients can go to receive specialty care services are barriers that can result in patients delaying or going without care.

The Bristol-Myers Squibb Foundation’s newest grants program aims to address some of these barriers by mobilizing proven best practices such as telemedicine and patient navigators and supporting the exploration of new and innovative solutions.

As the implementation of the Affordable Care Act enables greater access to health services for many Americans, including specialty care, the Foundation will seek to develop public-private partnerships to help achieve quality care and equitable and optimal outcomes.
The statistics for lung cancer are startling: One in two will die within a year of diagnosis. Only 16 in 100 will be alive in five years. Lung cancer is the leading cause of cancer deaths in the U.S., claiming more lives than the next three leading cancers combined. Stage I diagnosis rates are a dismal 16%.

However, there is hope: when comparing survival rates by stage, 57% of those diagnosed in Stage I will survive five years compared to a 4% five-year survival rate for those who receive late-stage diagnoses. A marked increase in earlier diagnosis of lung cancer combined with groundbreaking new treatments on the horizon and improved disease education, care and support could lead to a very different story about this disease.

Since 2007, the Bristol-Myers Squibb Foundation’s Bridging Cancer Care initiative has addressed cancer disparities in Central and Eastern Europe by engaging partners in enhancing psychosocial support for cancer patients and their families, providing disease education and screening, expanding training for health workers and engaging nurses as key members of the medical team. Now, the Foundation is expanding Bridging Cancer Care to tackle the dire situation of lung cancer in the U.S.

Focusing on southeastern states that have the highest lung cancer incidence and mortality rates in the country, the Foundation aims to transform the thinking about community-based care and support for lung cancer. The programs receiving Foundation grants will expand the current limited scope of community-based resources and survivorship support by focusing on disease awareness and education for community health care providers and patients, implementing high-quality screening programs in community hospitals and oncology centers according to national guidelines, adopting smoking cessation programs for use with diagnosed patients, delivering psychosocial support, developing best practices for lung cancer nurse navigation and palliative care.

The Kentucky Cancer Consortium (KCC) is one of the Foundation’s first partners in this area. Comprising more than 55 organizations committed to reducing the cancer burden in the state, KCC was instrumental in significantly reducing the colorectal cancer burden in Kentucky by convening government and community partners to design and implement a statewide screening effort and champion policy and system changes. Now, KCC is looking to make a similar impact on lung cancer through the “Comprehensive Kentucky Lung Cancer Survivorship Program” that is supported by a $7 million grant from the Bristol-Myers Squibb Foundation.

The KCC program includes three components – Provider Education, Lung Cancer Survivorship Support, and Prevention and Early Detection – that will integrate best practices in medical care, increase the focus on survivors and caregivers, and promote and expand best-in-class community screening programs based on nationally recognized screening guidelines across the state.

The program is being implemented on the heels of the United States Preventive Services Task Force’s groundbreaking recommendation for low-dose CT screening for patients at risk of developing lung cancer, which is expected to dramatically increase lung cancer screening and survival rates. Being piloted in the state with the dubious distinction of being first in the country for both new cases and deaths from lung cancer, this program has the potential to serve as a national model.

“There is a tremendous need for innovative and community-engaged survivorship care that integrates a patient’s psychosocial needs, targeted tobacco cessation programs, palliative care and early screening and detection efforts,” says Katie Bathje, program director, KCC. “The three components of our program share an overarching mission to increase optimal lung cancer care and will work together to encourage sustainable, effective linkages between clinical and community settings.”
Svetlana Konovalova, an oncology nurse at a municipal outpatient hospital in Balakovo, Russia, has spent 30 years working with cancer patients. Throughout her career she has faced many problems that have limited her ability to care for patients. “A shortage of oncologists, lack of hospice care and dealing with the psychological impact of cancer on patients and their families are all challenges that we deal with,” she says.

Ms. Konovalova is better equipped to face those challenges since participating in a pilot program that expanded the scope of practice for nurses in cancer care by shifting certain responsibilities related to patient education and coordination from physicians to nurses, which in turn frees up the physicians to concentrate more on patient care and treatment. The program, funded by the Bristol-Myers Squibb Foundation’s Bridging Cancer Care initiative, was developed by World Services of LaCrosse in collaboration with Balakovo Secondary Medical College in the Saratov Oblast region of Russia.

Not only has the program enhanced the perceived and actual value of nurses in caring for cancer patients, it has also introduced an entirely new nursing position into the Russian medical system: the oncology nurse care coordinator. Nurses trained as care coordinators take an active role in guiding cancer patients and their families through the entire treatment process, paying special attention to explaining all aspects of the treatment process and assessing psychological, physical and emotional needs.

The pilot program in which Ms. Konovalova participated served as the framework for the new Cancer Care Nursing Practice Center of Excellence.

The Center of Excellence, located in Saratov Oblast, is also providing technical assistance to help the Moscow Oblast.

“Oncologists are delighted that nurses are taking a larger role in caring for patients, and it’s satisfying for nurses because their work is more meaningful.”

establish a satellite Center of Excellence. Each center is attached to a medical institution, Balakovo Secondary Medical College in Saratov Oblast and Ramenskoye Secondary Medical College in Moscow Oblast.

The two Center of Excellence sites are training nurses in contemporary evidence-based models of nursing practice and promoting nurse involvement in community and patient education about cancer prevention and screening to allow for greater capacity within the health system to engage in these activities. Through this new model, the Centers of Excellence are leading and managing the changing role of nursing in Russia, moving it from primarily an underappreciated support function to a valued and impactful member of the medical team.

“Oncologists are delighted that nurses are taking a larger role in caring for patients, and it’s satisfying for nurses because their work is more meaningful. At the same time, patients are very happy because someone is talking to them directly about issues that relate to their family and to their overall health as they progress through the disease process,” says Maureen Jameson, operations director, World Services of LaCrosse.

The Cancer Care Center of Excellence is one of three centers of excellence funded by the Bristol-Myers Squibb
While cancer is the second-most common cause of death across Europe, mortality rates for most cancers are highest in Central and Eastern European countries. Low awareness of cancer risk factors, a lack of adequate cancer prevention and screening efforts, and limited health care resources in the region contribute to this gap.

Recognizing the increasingly important role nurses can play in improving health outcomes for cancer patients in the region, the Bristol-Myers Squibb Foundation’s Bridging Cancer Care initiative is working with its partners to improve cancer nursing skills and education for specialist, general practice and public health nurses in the Czech Republic, Hungary, Poland, Romania and Russia.

In 2014, the European Journal of Oncology Nursing published a peer-reviewed journal supplement on Bridging Cancer Care. The supplement, dedicated to the body of work that the Foundation has funded over the past five years, includes a section detailing the strategy, goals and achievements of the overall grant program as well as case studies on selected projects. This publication serves as an important resource to grow the body of knowledge around how nurses in Central and Eastern Europe can successfully play a role in improving cancer outcomes and may also serve as a guide for public health experts in other resource-limited countries.

Among other projects funded by Bridging Cancer Care:

TRIEDINSTVO is increasing community awareness and providing disease education to cancer patients and caregivers in Russia by training nurses to run educational programs on screening, risk factors, survivorship and home care at community health centers. The quality of patient care is also being improved through nurse trainers who are running courses for general practice nurses at clinics and hospitals on cancer prevention, screening and care.

PROJECT HOPE POLAND is helping to improve early detection of childhood cancers in Poland by training community nurse/physician teams and developing and disseminating a national guideline for best practices on examination and referral for suspected cancer in children in the primary health care setting.

RUSSIAN NURSES ASSOCIATION is improving the safety and quality of care for cancer patients undergoing chemotherapy in multiple care settings across Russia through the development of an oncology nursing curriculum and training program with the Oncology Nursing Society of the United States. Sixty oncology nurse trainers will be educated to deliver the curriculum and will in turn train 1,200 nurses from regional hospitals and ambulatory home care settings.
When the Bristol-Myers Squibb Foundation launched its groundbreaking SECURE THE FUTURE initiative to address the HIV epidemic in sub-Saharan Africa 15 years ago, HIV was a veritable death sentence. Today, thanks to the Foundation’s work mobilizing communities and an increase in national and international resources to educate the population and build a health care infrastructure to address HIV, women who are infected with the disease are living longer and healthier lives.

That’s the good news. The bad news is that women living with HIV in Africa are now more likely to die from cervical or breast cancers than they are from HIV. What’s worse, awareness of breast cancer among women who may be at risk is low and the potentially lethal consequences of cervical cancer are generally unknown.

The link between HIV infection and cervical cancer is high: Women who have cervical cancer are twice as likely to be HIV-infected, and HIV-positive women develop cervical cancer 10 years earlier than women who are not infected.

Leveraging the legacy and infrastructure it helped build in Africa, SECURE THE FUTURE is now working to raise awareness about both breast and cervical cancer and is helping to support a number of programs throughout Africa that are rallying communities in the effort.

These programs led to a partnership with Pink Ribbon Red Ribbon (PRRR), a coalition led by the George W. Bush Institute, USAID, UNAIDS and Komen for the Cure. The Bristol-Myers Squibb Foundation is a founding corporate member of the PRRR coalition. PRRR combines public and private investments to leverage HIV platforms to expand the availability of cervical screening and treatment and breast care education, especially for women most at risk of developing cervical cancer in developing nations.

In Tanzania, cervical cancer is the leading cause of cancer-related death. The country has one of the highest cervical cancer burdens in the world. According to the World Health Organization, the incidence of cervical cancer in Tanzania is significantly higher than the rest of the world: 40.6 per 100,000 compared to 16 per 100,000 elsewhere.

In partnership with PRRR, several organizations are working together in Tanzania to increase community awareness, capacity and treatment for cervical and breast cancer and to advocate for policy changes for breast and cervical cancer services.

The Medical Women Association of Tanzania (MEWATA), Tanzania Marketing and Communications, Tanzania Youth Alliance and Mbeya HIV/AIDS Network-Tanzania have received funding and technical support from the Foundation to work with community and faith-based organizations to raise awareness about cervical cancer and improve access to screening and prevention in the Mbeya, Mwanza and Iringa regions.

The groups have developed social networks of community leaders and linked them with health centers and women’s groups, provided transportation to screenings, established helpline services and advocate for national and regional support that will fund cancer services and interventions at the community level.

MEWATA, a non-governmental organization of women medical and dental practitioners, has been taking a lead in addressing the problem of cervical and breast cancers in Tanzania. Through the support of the Foundation’s SECURE THE FUTURE initiative, MEWATA in collaboration with Wanawake na Maendeleo (WAMA) Foundation, met with members of Parliament and regional and district health management teams to advocate for allocating resources for breast and cervical cancer screening services. During

| CANCER AND HIV IN AFRICA |

Targeting the Link Between HIV and Cervical Cancers

As part of its continuing efforts to mitigate the social impact of HIV’s uneven burden on women in sub-Saharan Africa, SECURE THE FUTURE is now addressing the link between cervical and breast cancers and HIV.
Swazis have a strong respect for their traditional structures, so it was important that we involved members of the community.

a mass screening campaign for breast and cervical cancers in Mwanza, more than 5,200 women were screened for breast cancer and 3,800 women for cervical cancer.

“The Bristol-Myers Squibb Foundation has been a valued member of Pink Ribbon Red Ribbon since its inception, keeping a focus on the community component of the continuum of cancer care,” says Doyin Oluwole, M.D., MRCP, FRCP, FWACP, executive director, Pink Ribbon Red Ribbon, George W. Bush Institute. “In Tanzania, additional community-based health providers have been trained, allowing us to expand screening and treatment services and save the lives of more women and girls. We look forward to continuing our partnership as we strengthen capacity at the community level in Tanzania and make plans to engage in Ethiopia and other countries.”

In another project funded by the Foundation, the Swaziland Breast and Cervical Cancer Network (SBCCN), a non-governmental organization, is training teams of community members called Rural Health Motivators to raise awareness and early detection of HIV, breast and cervical cancer in communities across the country. The organization, in collaboration with the Ministry of Health, operates three breast cancer clinics and four cervical cancer screening points throughout the nation.

One of these is in Ngculwini, a traditional Swazi community ruled by a chief with a team of elders. Ngculwini has an estimated population of 30,000, of whom 9,000 are women. The SBCCN worked with community leaders, schools and churches to create a cervical cancer awareness campaign and in May 2013, won the endorsement of Chief Mgebiseni Dlamini for establishing a cervical cancer awareness campaign.

“Swazis have a strong respect for their traditional structures, so it was important that we involved members of the community and collaborated with and received the endorsement for cervical cancer screening from Chief Mgebiseni,” says Lena Preko, program manager, SBCCN. “It engendered community acceptance and participation.”

Over the past 15 years, the Bristol-Myers Squibb Foundation has made a positive and lasting difference in the lives of more than 1 million women and children living with HIV through its support of more than 250 projects in 22 countries in sub-Saharan Africa.

Today, as disease awareness and education, expanded treatments and improvements in health care system capacity have helped transform HIV and AIDS from an acute health crisis to a manageable chronic disease in some countries, people living with HIV in Africa are now dying from diseases such as tuberculosis (TB) and cervical cancer at greater rates.

Building on the legacy of its groundbreaking work in HIV/AIDS, the Foundation’s SECURITY THE FUTURE initiative is now demonstrating the positive impact that communities can have on preventing the transmission of TB and reducing deaths from cervical and breast cancers, by leveraging the HIV experience and infrastructure especially among women.

For example, SECURITY THE FUTURE is working with SAVE THE CHILDREN to integrate community-based TB and TB/HIV services into maternal, newborn and child health programs for about 100,000 people living in the rural Dolo Ado and Dolo Bay woredas in Ethiopia.

The project trains health extension workers (HEWs) and partners with schools to increase community knowledge about how to prevent the spread of TB, increase the number of people screened for TB and help those suspected of TB infection obtain care.

The project has trained nearly two dozen HEWs, who in turn have educated more than 840 students and their teachers in 15 schools about TB and how to prevent the communicable disease from spreading. Save the Children also conducts household visits to provide TB health information and referral to care for people with suspected TB infections. During the second half of 2013, 107 suspected TB cases were referred to health facilities for diagnosis and 27 people (25%) tested positive for pulmonary TB.

In the Mwanza Region of Tanzania, as part of the Pink Ribbon Red Ribbon initiative of the George W. Bush Institute, the MEDICAL WOMEN ASSOCIATION OF TANZANIA is working with the Tanzania Ministry of Health and Social Welfare, WAMA FOUNDATION and TAYOA on a disease awareness and screening campaign for cervical and breast cancers.

Fifteen health care providers from 10 hospitals and health care centers in the Misungwi, Nyamagana and Ilemela districts have been trained to provide free cancer screenings in the community. During the training sessions, 314 female volunteers were screened for cervical cancer. Twenty-three tested positive for cervical cancer (7%), two for suspected cancer (0.6%) and 54 for other cervical problems (17%).

The project later conducted a two-day mass screening in the same communities. More than 7,000 women were tested, including 5,224 for breast cancer and 2,039 for cervical cancer.

Twenty patients were suspected to have breast cancer (0.4%) and 140 had breast lumps detected (2.7%). All were referred to care. An additional 104 women (2%) were treated for other breast lesions, including mastitis and breast fungal infections. Eleven women (0.5%) were suspected of having cervical cancer and biopsies were performed. Another 105 had pre-cancerous lesions (5.1%) and 170 were treated for other cervical lesions (8.3%).
2014 marks the 15th anniversary of the Bristol-Myers Squibb Foundation’s SECURE THE FUTURE initiative, a groundbreaking commitment to develop, deploy and evaluate cost-effective, sustainable and replicable models for providing care and support to people living with HIV/AIDS in sub-Saharan Africa.

When SECURE THE FUTURE launched in 1999, it was the first and largest private commitment to fight HIV/AIDS in Africa. The initiative initially focused on five countries and, over the years, its reach has extended into 22 African nations. Since 1999, SECURE THE FUTURE has committed more than $180 million to more than 250 projects.

SECURE THE FUTURE has had many landmark achievements and has touched—and improved—the lives of millions of women and children living with HIV/AIDS. The program serves as a model of excellence in leveraging community, national and global support to bring HIV care, services and treatment to the world’s neediest populations. It has also developed innovative approaches and models that have impacted the prevention and management of HIV and related illnesses globally.

In its 15-year history, the program has achieved a number of milestones, including:

- Building a network of five Children’s Clinical Centers of Excellence and satellite clinics, and establishing the Pediatric AIDS Corps, to treat HIV-positive children and their families in partnership with Baylor College of Medicine. More than 215,000 children are currently in care through the program.
- Training over 52,000 health care professionals through the Pediatric AIDS Corps.
- Extending its impact by leveraging the health care infrastructure built by SECURE THE FUTURE and its partners to focus on patients with HIV who also have other chronic conditions:
  - ENGAGE-TB, a collaboration between the World Health Organization and the Bristol-Myers Squibb Foundation, helps HIV patients co-infected with tuberculosis (TB). Since 2011, partners in South Africa, Ethiopia and Tanzania have screened nearly 32,000 people for TB and referred almost 2,000 to care;
  - A program focused on the comorbidity of HIV and mental illness as well as those with physical disabilities.
- The NGO Training Institute for non-governmental organizations (NGOs) in five countries was created to increase the number of people with the skills and tools needed for effective and efficient institutional and program management.
- Funding medical research that resulted in the creation of an effective, fast and low-cost CD4-count test for HIV and in demonstrating that mother-to-child transmission of HIV can be reduced through postnatal single-dose antiretroviral therapy.
- Innovative research on the efficacy of postnatal antiretroviral therapy earned the researchers the Nelson Mandela Award for Health and Human Rights.
- Establishing the Community Based Treatment Support Programme, that has supported the delivery of antiretroviral treatment to more than 20,000 people in hard to reach areas throughout southern Africa.
- Leveraging the successes, experiences and learnings from SECURE THE FUTURE's many projects and partners to create a Technical Assistance and Skills Transfer Program (TAP) in 2008 whose faculty empowers communities to harness resources and capacity to improve the effectiveness and sustainability of multi-sectoral, community-based HIV/AIDS programs. The TAP project transfers skills and knowledge in eight African countries while focusing on community-based solutions.

To date, more than 3,700 NGO leaders and managers have been trained.

- Funding medical research that resulted in the creation of an effective, fast and low-cost CD4-count test for HIV and in demonstrating that mother-to-child transmission of HIV can be reduced through postnatal single-dose antiretroviral therapy.
- Innovative research on the efficacy of postnatal antiretroviral therapy earned the researchers the Nelson Mandela Award for Health and Human Rights.
- Establishing the Community Based Treatment Support Programme, that has supported the delivery of antiretroviral treatment to more than 20,000 people in hard to reach areas throughout southern Africa.
- Leveraging the successes, experiences and learnings from SECURE THE FUTURE’s many projects and partners to create a Technical Assistance and Skills Transfer Program (TAP) in 2008 whose faculty empowers communities to harness resources and capacity to improve the effectiveness and sustainability of multi-sectoral, community-based HIV/AIDS programs. The TAP project transfers skills and knowledge in eight African countries while focusing on community-based solutions.
Tuberculosis (TB) is one of the world’s deadliest diseases and a leading killer of people living with HIV. In countries with high levels of HIV, such as those in sub-Saharan Africa, about 80 percent of people with TB also have HIV.

For the past three years, the Bristol-Myers Squibb Foundation and the World Health Organization’s (WHO) Global TB Programme have collaborated on ENGAGE-TB, a strategy to strengthen community-based care for patients with TB, including those who also have HIV, in five countries in sub-Saharan Africa.

ENGAGE-TB takes a community-based approach to TB prevention, case identification, care and support by engaging a broad range of community-based health partners in primary health care, HIV and maternal and child health.

Leveraging the national health care infrastructure and technical assistance faculty developed by the Foundation’s landmark SECURE THE FUTURE initiative, ENGAGE-TB works with non-governmental organizations (NGOs), national TB programs and ministries of health in South Africa, Tanzania, Kenya, Ethiopia and the Democratic Republic of the Congo to better identify and bring into treatment people with TB and to help prevent the disease from spreading.

“Thanks to these efforts, NGOs previously unengaged in TB care are now implementing innovative models of community-based TB activities as part of their routine work and serving society’s most underprivileged people,” says Mario Raviglione, M.D., director, WHO Global TB Programme. “This is a giant step forward. We went from neglect to providing grassroots TB care for those who need it most.”

Since 2011, the Foundation has awarded two grants totaling $4.7 million to support ENGAGE-TB’s work in Africa through 2016.

“Since it began in 1999, the Foundation’s SECURE THE FUTURE initiative has attended to the needs of patients with TB as part of its HIV mandate, and our collaboration with the WHO Global TB Programme and selected national TB programs on ENGAGE-TB was based on the positive outcomes we achieved with some of these activities,” says John Damonti, president, Bristol-Myers Squibb Foundation. “Now as our collaboration moves into the next phase, we are confident that we will see the continued benefits on TB prevention, early diagnosis and treatment by strengthening capacity in local communities, including preventing unnecessary deaths.”

In Ethiopia, a pilot program involving Save the Children in Somali, AMREF in Afar and Doctors with Africa-CUAMM in Wolisso integrates TB, HIV and maternal, child and neonatal health and shows that community involvement strengthens and facilitates the management of TB.

“The integrated TB/HIV project has been implemented as a collaborative initiative by integrating with the existing maternal, neonatal health and child projects in two districts where the burden of TB is significantly high,” says Awoke Tasew, M.D., deputy director, AMREF Ethiopia. “Through the project, we hope to develop working models that will increase TB case management and enhance community engagement.”

The ENGAGE-TB initiative is expected to boost the meaningful engagement of NGOs and community organizations and will draw on technical assistance through community care experts from SECURE THE FUTURE, in an effort to reduce TB incidence in Africa and globally.
Hepatitis B takes an exacting toll on patients, especially those who live in developing countries such as India and China. Depending on the stage at diagnosis and the treatment regimen, frequent doctor visits for intensive monitoring and case management may be required. Proper nutrition during treatment is essential. When patients live in remote areas, lack of access to care combined with other socioeconomic factors can present seemingly insurmountable challenges.

In 2012, 37-year-old Sajal Ganguly of Barrackpore, India, was finding that his medical expenses were becoming more than he could handle. In liver failure, he sold his house to pay for dialysis as his monthly medical expenses began outpacing his income. Then he contracted hepatitis B during one of those dialysis treatments.

With his physical and fiscal conditions worsening, Mr. Ganguly turned to the Liver Foundation of West Bengal (LFWB) for help. Things began to change for him when the Hepatitis Patients’ Forum, a self-help group of patients from LFWB, an initiative established with funding from the Bristol-Myers Squibb Foundation’s Delivering Hope initiative in India, presented Mr. Ganguly much-needed peer support and counseling along with financial aid.

Mr. Ganguly, understanding the benefits of interacting with others in similar circumstances, became an active member in the group’s activities, becoming an inspiration to others in their daily struggle with hepatitis B.

“I had lost all hope till [sic] the Liver Foundation came to my rescue,” Mr. Ganguly later told a local newspaper. “In addition to the financial assistance, I have been inspired by others to live on.”

Unfortunately, Mr. Ganguly died in February 2014. However, his father, also a hepatitis B patient, and his mother are active members of the organization and are dedicated to carrying on its mission in their son’s memory.

“Sajal loved this organization, and now his parents want to continue the work of their only son as he endeavored to fulfill his dream,” said Partha Mukherjee, project director and chief functionary, LFWB.

The Hepatitis Patients’ Forum was created to empower its members to better care for themselves. It did not take long for them to discover that one way to do that was by helping each other. The group decided to provide funding for hepatitis patients who could not afford treatment and began making and selling a variety of handicrafts to raise money.

Mr. Ganguly’s story is just one example of how Delivering Hope, the Foundation’s initiative to address hepatitis B and C in Asia, is empowering patients to make a difference in their lives and in the lives of others with viral hepatitis. By supporting organizations and projects that provide disease intervention, encourage compliance and wellness and supply resources for better disease management, the Foundation and its partners in China and India are helping patients understand what their care involves and how important it is to comply with treatment.

The region is heavily burdened by viral hepatitis, which is an urgent public health issue. In China and India together, it is estimated that more than 123 million people are infected with chronic hepatitis B and about 60 million with hepatitis C. Awareness is considerably low and while countries have developed policies and initiated programs to control hepatitis infection and provide vaccinations for hepatitis B and C, there is still a need to coordinate and implement programs at the community level and to create general awareness about these preventable and, in the case of hepatitis C, curable diseases.

Delivering Hope works to reduce these health disparities by funding and initiating programs that provide broad support for hepatitis B and C awareness, education and care, including the adoption of hepatitis B and C interventions, and education in public health programs.

Outreach efforts are being implemented across China and India, empowering and motivating patients to remain informed about their disease and treatment, and working to remove the stigma associated with hepatitis B and C.

In China, the Wu Jieping Medical Foundation sponsors a number of Hepatitis Patient Clubs. Members of the Beijing You’an Hospital club receive...
weekly communications from a nurse who provides general information and daily care tips and reminds them to maintain their treatment schedule. Another club, at Second People’s Hospital of Nanjing, established close connections between patients and their doctors through text and phone messages. Doctors even provided their cell phone numbers and encourage patients to contact them if their status changes or if they need a quick consultation.

“Since we need to familiarize patients with the science of the disease, we should keep them informed. Direct consultation with patients and their family members is the most effective way to do that,” says Professor Tan Shangzhong, who works at the Second People’s Hospital.

In order to reach the minority Tibetan population in Qinghai in Western China, the Fourth People’s Hospital of Qinghai Province has sent teams of doctors to Huangnan to educate people about hepatitis B and C, provide free treatment and train local patient volunteers to work with members of their villages and towns.

“The financial burden for hepatitis B or C patients who require monitoring, care and treatment is quite heavy, especially for those living in remote areas. We not only empower patients with the latest disease prevention and treatment knowledge, but also provide access to care with ‘one call to city physicians.’ I am pleased to see that, through the combined efforts of all stakeholders, patients are better able to self-manage their disease,” says Professor Duan Zhongping, director, Liver Disease Department, Wu Jieping Medical Foundation.

Because the main transmission routes for hepatitis B and C are through sexual contact and intravenous drug use, the Shanghai Charity Foundation began an intervention program that focused on providing intensive education, prevention and screening programs to populations at highest risk of infection. A blog featuring short, frequent messages was also developed and has a strong following among the high-risk populations and the general public, pointing to the growing interest in learning more about the diseases.

The program has had a significant impact on raising basic awareness about hepatitis infection, Shanghai Charity Foundation reports. More than 85 percent of patients surveyed at the end of the program were more aware of hepatitis B and C and approaches to managing and preventing the disease compared to about 30 percent when the program began.

Since 2002, the Bristol-Myers Squibb Foundation’s Delivering Hope initiative has supported more than 40 projects in China and India to help communities more effectively address hepatitis B (HBV) and C infection by building the capacity of health care providers and communities, preventing disease in the hardest-hit and greatest at-risk populations, and informing national health policy and programs. Over the past 12 years, millions of people at high risk of viral hepatitis infection have benefited from Delivering Hope programs.

To extend the impact of these projects into the future, in 2013 the Foundation established three Centers of Excellence to more broadly share successful, innovative and evidence-based practices and more comprehensively address viral hepatitis among vulnerable populations in China and India.

One Center of Excellence is located at the CHINA FOUNDATION FOR HEPATITIS PREVENTION AND CONTROL (CFHPC). The others are in India at the LIVER FOUNDATION OF WEST BENGAL and at the HOPE INITIATIVE in Uttar Pradesh.

These centers will scale up and replicate evidence-based community interventions developed by previous Foundation-funded projects and also inform public policy in liver and metabolic diseases.

In China, for example, CFHPC will work with the WU JIEPING MEDICAL FOUNDATION, SHANGHAI CHARITY FOUNDATION and the INNO COMMUNITY ORGANIZATION, to develop toolkits and establish a resource center that will create training modules for different populations and geographies, with special emphasis on rural medical training for women of reproductive age, patient empowerment and high-risk groups and work place interventions.

The two centers in India also will build on past successful models and interventions.

Since rural health care providers have limited or virtually no formal medical training, yet are responsible for 70 percent of outdoor health-related visits in rural India, the Center of Excellence at the Liver Foundation, West Bengal, will continue to build capacity among rural health care practitioners and provide primary and preventive care for liver and metabolic health. The center will develop a hepatology curriculum and conduct research to better understand rural health care needs and help strengthen awareness in hepatitis and metabolic health among rural populations.

The second India center, at the HOPE Initiative, will continue its work with schools to educate children and their families about HBV prevention and control. With children constituting up to 40 percent of the population in developing countries such as India, HOPE has found them more receptive to new ideas, quicker to learn and adopt new practices than adults, and capable of serving as ambassadors for new ideas with their neighbors and families.

HOPE has trained more than 9,000 teachers how to use its health book to educate children about HBV and other health concerns, reaching more than 5 million students. Children received personal copies of the book to read with their families. As a result of HOPE’s efforts, HBV vaccination and testing rates in Uttar Pradesh, India’s most populous state, are on the rise.

HOPE Initiative’s health book has been adopted as part of the formal curriculum at more than 300 government-run and private schools and the Education Ministry of Uttar Pradesh has included the hepatitis B chapter in the curriculum for all 10th graders. The book also is being adapted and adopted by non-governmental organizations in Mumbai and Assam, among other states.
When veterans of 20th century wars and conflicts gathered on the homefront, they often convened at their local American Legion or Veterans of Foreign Wars post. Today’s generation of veterans prefers to connect through a less traditional, yet widely used channel: social media.

That’s what U.S. Army Reserve veteran Phillip Hatfield did when he logged on to Vets Prevail (www.vetsprevail.org) seeking information and support from fellow veterans after 32 years of service that included three tours of duty in Europe, the United States and Iraq.

“There were no dramatic issues I was facing,” says Mr. Hatfield, a retired lieutenant colonel. “It was more a matter of having trouble getting used to a daily routine that didn’t involve the stresses of deployment or active duty. The biggest benefit is knowing that other people have the same problems and are going through the same thing that you are.”

Vets Prevail is an online behavioral health solution that helps veterans where they are and provides an easily accessible, cost-effective and stigma-free option for accessing mental health help or support.

The key goal of Vets Prevail is to connect reluctant care-seekers with mental health support as soon as they start to experience distress or impairment and prevent them from developing disorders. Vets Prevail works as an effective alternative or adjunct to care by delivering a unique combination of social media tools, standardized assessments, multimedia content, and structured peer support.

In addition to 24-hour convenience from the comfort of one’s home, Vets Prevail provides an alternative for veterans who are hesitant to seek care because of the stigma associated with mental or emotional problems or who may not have access to a mental health professional.

“Having the program available online knocks down those barriers,” says Richard Gengler, program director, Prevail Health Solutions. “It’s completely anonymous and is a great way for veterans to take that first step toward getting help when they otherwise wouldn’t.”

More than 900 veterans enroll in the formal program every month. Users first take an assessment and are then guided through a customized and dynamic program of lessons and tasks to learn strategies and techniques to deal with the problems they are facing. Structured instant message support is also available and links users with veteran peers who make a personal connection with them and can chat about the context of the lessons.

A pilot program of Vets Prevail funded by the Bristol-Myers Squibb Foundation found that measures of depression and post-traumatic stress improved significantly among veterans who participated in the pilot just through the peer connections and support. A partner referral program is available if veterans feel they need to or are ready to seek additional professional help at any time.

“A good percentage of our returning veterans are not getting the help they need,” says Hobfoll. “Vets Prevail is reaching veterans who may otherwise fall through the cracks.”
felt like I was watching myself,” says Major Jeff Hall. “The anger, the frustration, the feelings of helplessness that Ajax had – that was me.” Major Hall was not referring to a fellow soldier or the latest blockbuster combat move, but rather a Theater of War performance of the Greek tragedy Ajax.

Major Hall, a field artillery officer with the U.S. Army, had returned from deployment to Iraq in 2008, two and a half years before attending that performance, and was suffering from post traumatic stress disorder (PTSD). At the urging of his wife, Sheri, he sought treatment at Walter Reed Army Medical Center in Bethesda, Maryland, and was later asked by the U.S. Department of Defense Center of Excellence to speak with other military personnel suffering from PTSD. He and his wife were both invited to serve on a post-performance discussion panel that is part of all Theater of War presentations.

Although Sophocles wrote Ajax in the 5th century B.C., Major Hall and his fellow soldiers were able to identify with the main character, a warrior like themselves who is suffering from the visible and invisible wounds of war. Sheri, too, felt a close affinity with Techmessa, Ajax’s battle-bride. “When Jeff came home, he would go through bouts of anger and then five minutes later, everything was fine. It was a roller coaster,” she says.

Theater of War is produced by Outside the Wire, a social impact company that began presenting dramatic readings from Greek plays to diverse military and civilian audiences in 2008. Last year, it kicked off the Theater of War: Soldiers and Citizens Tour, created especially for military Reservists, National Guard members, their families and communities. The tour is visiting 25 cities across the U.S. and is funded by the Bristol-Myers Squibb Foundation’s Mental Health & Well-Being initiative. Outside the Wire is organizing the tour with its partners, Massachusetts General Hospital, National Council for Behavioral Health and Points of Light.

“The Reserves and the National Guard are underserved components of our military. When they return from a deployment, they come back to a community that doesn’t have a solid understanding of what they went through and often does not have any mental health or vocational resources that are easily accessible,” says Bryan Doerries, artistic director and founder of Theater of War.

The Soldiers and Citizens Tour aims to change that. Each presentation includes a dramatic reading from the play by such well-known actors as Paul Giamatti, Jeffrey Wright and Adam Driver, followed by comments from members of the panel and a town hall discussion that engages both military and civilian members of the audience in a dialog about their experiences in combat and at home.

“Theater of War blew the doors open on a conversation about what it’s like when you return from combat. Guys who never wanted to say anything because they didn’t want to be seen as weak were just opening up right in front of an audience of hundreds of people,” says Major Hall.

Theater of War also presents similar readings and discussions from Sophocles’ Philoctetes, about a soldier left behind by the Greek army on its way to Troy. “These Greek dramas were driven by and informed by military experience. The presentations serve as a catalyst for a discussion that probably never would happen otherwise,” Doerries says. “When people hear from members of the military who are suffering from the invisible wounds of war, it opens the door to understanding and compassion for our service men and women while mobilizing →
MENTAL HEALTH & WELL-BEING IN THE U.S.

Helping Military-Connected Families Stay Strong at Home

Shortly after “Katie” (not her real name) started kindergarten at Franklin Elementary School in Newton, Massachusetts, her mother’s U.S. Army unit was deployed to Afghanistan. Katie soon began having behavior problems and visited the nurse’s office several times a week complaining of a stomach ache.

School nurse Patti Bohling knew what was wrong. She had attended a conference about Home Base, a program of the Red Sox Foundation and Massachusetts General Hospital that provides clinical mental health care and support services for military service members, veterans and their families throughout New England. There she learned about Staying Strong, a web-based initiative that provides support and guidance to military-connected children in their care.

The educator and school nurse toolkits on the website helped me make the connection between Katie’s behavior and her mother’s deployment. It gave me and her teacher constructive ways to work with her and to let her know she was not alone,” Ms. Bohling says. Katie’s behavior in school improved as a result of employing the techniques taught in the toolkits.

Today, Katie is in the third grade. “She’s doing great,” Ms. Bohling says. “Whenever I see her in the hallway she’s got a smile on her face.”

It just so happened that during this time Ms. Bohling’s family was living through a deployment situation of its own – her son Danny, a marine, and her nephew, a soldier serving in the U.S. Army, were both on tours of duty in Afghanistan. “I was able to apply what I had learned on the Staying Strong website to my own situation and to support my two younger daughters and my husband,” she says.

Since 2010, the Bristol-Myers Squibb Foundation’s Mental Health & Well-Being initiative has focused on funding community-based models of care and support for military veterans and their families. The Staying Strong program was developed with funding from the Foundation.

Staying Strong helps educators, school nurses, counselors and military parents address the unique stresses of military-connected children in their care. Online materials and videos are categorized by age group and promote practical advice for parents as well as classroom practices and activities that can ease the emotional burdens children face during a parent’s deployment or reintegration into family and civilian life. The videos were recorded by Paula Rauch, M.D., Program Director of the Home Base Family Team, and a nationally renowned child psychiatrist at Massachusetts General Hospital who also serves on the Science Advisory Board of the Military Child Education Coalition.

“We have to keep in mind that when a family member serves in the military, everyone in the family serves as well,” says Rauch. “The resources that we developed help build key skills in the most important adults in a child’s life – communities to help improve the lives of service members, veterans and their families,” he adds.

Since that first presentation, Major Hall and his wife have served on panels for 11 other performances, sharing their experiences and breaking down barriers that have kept many returning soldiers and their families suffering in silence. “With the presentations and discussions, you can see light coming through the clouds, and the healing process begins,” he says.
For many soldiers and reservists who served in Iraq and Afghanistan, major depression and post-traumatic stress (PTSD) are an ongoing battle. When left untreated, these mental health needs can lead to long-term consequences for soldiers and their families, yet many soldiers are not receiving appropriate care. Fewer than one in three veterans with PTSD or depression seeks help from the Veterans Administration health system, according to a RAND study.

The Bristol-Myers Squibb Foundation’s Mental Health & Well-Being initiative focuses on community-based solutions to address the mental health and community reintegration needs of veterans, military service members, their families and families of the fallen. The Foundation’s projects serve as models of community-based care and support for soldiers and the communities to which they return.

For example, the Foundation is supporting an innovative program developed by the BEDFORD VA RESEARCH CORPORATION (BRCI) that helps prevent intimate partner violence (IPV) among veterans by raising awareness about IPV within the Veterans Administration community and providing screening and referral for those at highest risk for IPV.

Veterans are involved in IPV at rates higher than their civilian peers, according to BRCI, and the lifetime prevalence of IPV is far higher among veterans who are living with post-traumatic stress and substance abuse than among those not facing those issues.

BRCI’s Intimate Partner Violence Prevention Program intervenes with individuals at high risk of becoming violent in their intimate relationships. All veterans receiving services at BRCI’s Outpatient Mental Health Clinic and Psychiatric Emergency Services are screened for risk factors associated with IPV, including substance use disorder, PTSD, marital/relationship discord, unemployment, history of IPV, history of childhood abuse and history of witnessing IPV as a child.

A grant provided to the UNIVERSITY OF CALIFORNIA-SAN FRANCISCO is making online courses available to veterans and building an online mental health community for veterans. The university’s Next Mission program leverages camaraderie, teamwork and leadership, the signature strengths of military service, to help facilitate successful transitions into civilian life.

Next Mission serves veteran and active duty service members and their families by building online communities around college-level courses, self-paced mental health and general health protocols, and peer support. The program transforms the way health care is promoted and delivered by creating confidential, collaborative health communities comprised of veteran and active duty service members and their families who support each other in the attainment of common health and transition goals.

The UNIVERSITY OF MICHIGAN is piloting the Peer Advisors for Veteran Education (PAVE) Program on 10 college campuses throughout the country. PAVE is a peer-to-peer program that connects veterans with upperclassmen who serve as peer advisors on participating campuses.

While large numbers of veterans have entered universities and community colleges in recent years to take advantage of the post-9/11 GI Bill, about half of veterans drop out after one year in part due to the lack of social support and mental health concerns such as depression and PTSD. The PAVE peer advisors help veterans navigate college life, identify challenges they are experiencing and refer them to the appropriate resources on or off campus.
When Lizette Martinez meets with diabetes patients, she offers them something health care providers cannot – connection with a peer – and that has made a big difference in how they manage their disease.

“Several of my patients who were unable to get their diabetes under control for years have lowered their HbA1c levels (a measure of glucose in the blood) and lost weight since I’ve been seeing them,” she says.

Martinez, who grew up in Chicago’s predominately Latino neighborhoods, is one of seven promotores, Spanish-speaking community health workers, at Alivio Medical Center.

“A lot of patients visit their primary care doctors but feel more comfortable talking to a member of the same community,” she says. “Promotores are able to spend more time with them than other health care providers and, because we’re from the same community, we know the other issues they face that can complicate their disease.”

Alivio’s Compañeros en Salud program, which links type 2 diabetes patients with promotores, is part of a three-year study that will measure the impact of community health workers on outcomes for diabetic patients. The program is conducted through Peers for Progress, an initiative of the American Academy of Family Physicians Foundation that promotes peer support as a key component of health, health care and disease prevention around the world. It is funded by the Bristol-Myers Squibb Foundation’s Together on Diabetes initiative.

Together on Diabetes is working with 26 grantees in more than 60 communities in the United States – and others in China and India – to pursue integrated and scalable approaches to achieving optimal and equitable outcomes for people living with type 2 diabetes.

Alivio serves about 3,800 adults with diabetes. Since the Peers for Progress/Alivio study began in August 2012, the promotores have reached 419 or 89% of the 472 “high priority” patients – those with high HbA1c levels, psychosocial distress or whose physicians think they may have other needs the program can help address. Additionally, promotores have been able to reach 2,597 or 78% of the remaining 3,328 “normal priority” patients, showing that promotores can be an important strategy for reaching all with diseases like diabetes, not just those who join a program.

In addition to elevated HbA1c levels, patients contend with other disease management-complicating factors as well, including lack of insurance coverage, language barriers, transportation and child care issues. Some feel like they have nowhere to turn for help.

Promotores contact their patients at least once a month, either in person or by telephone. They provide diabetes information and educational materials and also help them navigate health care and social services systems and provide ongoing encouragement and emotional support.

“Frequently people who are underserved or disadvantaged are alienated from the health care system,” says Ed Fisher, Ph.D., global director of Peers for Progress and professor of health behavior at University of North Carolina, Gillings School of Global Public Health. “Peer support provides a linkage between the health care system and the underserved population through people drawn from the community who not only provide support, but spread messages and encourage healthy living patterns.”

Grant making for Together on Diabetes ended in December 2013, but the Foundation will continue to support currently funded diabetes grants through 2018.
Partnership Seeks Best Community Solutions for Managing Diabetes

Building community coalitions to eliminate inequities in diabetes outcomes is more than a lofty goal. There are real-world impacts on individual lives: a mother who will not go blind, a father who can run and play with his children because a leg will not be amputated and a grandmother who will not have to undergo kidney dialysis three days a week.

Through a partnership between the Bristol-Myers Squibb Foundation and the National Center for Primary Care (NCPC) at Morehouse School of Medicine, landmark projects that are helping communities learn from one another and build their own coalitions to address the pressing needs of those hardest hit by the diabetes epidemic are now available nationwide.

The Morehouse School of Medicine/Bristol-Myers Squibb Foundation Partnership for Equity in Diabetes showcases best practices gathered from successful, evidence-based projects supported by the Foundation’s Together on Diabetes initiative and other successful programs. Since November 2010, Together on Diabetes has worked with more than three dozen grantees – and dozens more of their grantees’ partners – in the United States, China and India to transform communities of highly affected populations into healthier places with more resources to support people living with diabetes.

The Partnership serves as an online clearinghouse and archive for best practices around managing diabetes in the community and through clinic-community partnerships. It also offers educational webinars and discussion boards to foster communication and collaboration.

“People, coalitions and communities interested in developing programs to address type 2 diabetes will not have to reinvent the wheel,” says George Rust, M.D., professor of Family Medicine and director, NCPC, Morehouse School of Medicine.

The best-practices featured on the Partnership’s website (www.diabeteshealthequity.org) provide links to the tools, templates and resources that other communities have implemented to address the needs of diabetes patients, develop a community support system or engage partners in care, and can be applied...
People Living with Diabetes in Asia

As the world's largest countries by population, China and India have the most people living with type 2 diabetes. More than 92.3 million Chinese and 63 million Indians – about 9% of each nation's total population – had type 2 diabetes in 2012. By 2030, those numbers are expected to grow to 130 million in China and 101 million in India.

Since 2012, the Bristol-Myers Squibb Foundation's Together on Diabetes initiative has been working with nine partners in China and India to strengthen community-based health care worker capacity and integrate medical care and community-based supportive services with the goal of achieving equitable and optimal diabetes outcomes.

For example, the Foundation is helping the CHINESE CENTER FOR DISEASE CONTROL AND PREVENTION build the capacity of rural health care providers to manage and prevent type 2 diabetes at the village level in western and central China, where diabetes is growing at a faster rate than in China's cities.

China CDC’s efforts in Chongqing and Shanxi Provinces focus on identifying high-risk rural populations and ensuring timely interventions to prevent diabetes. These interventions include health care provider training, disease screenings and patient education. China CDC also is mobilizing government and community leaders to prioritize diabetes disease management.

In Shanghai, a city of 23 million people, SHANGHAI CHARITY FOUNDATION is working with the Shanghai Center for Disease Control and the Shanghai Public Health Bureau in the city’s Lianyang and Ruijin districts, to leverage existing information management systems and technology to build, pilot and integrate a community-based model of disease prevention and management that can be deployed throughout Shanghai and other Chinese cities. The project not only is using technology to measure, record and analyze patient health data but also to help people better manage their disease while on the go.

CHINA SOONG CHING LING FOUNDATION is piloting a new family-centric model for diabetes management that promotes home and community-based education and interventions anchored by outreach teams at 15 hospitals in Beijing, Shanghai and Guangzhou. The project seeks to prevent complications and reduce the socio-economic burden of diabetes management for families and public health facilities by using the Internet and home visits to provide better tools for both physicians and individuals for family-based disease self-management.

In India, ALL INDIA INSTITUTE OF DIABETES AND RESEARCH is working with Swasthya Diabetes Hospital and the Indian Institute of Public Health to improve access to diabetes education, prevention and care for patients using public health centers in rural districts and tribal blocks and among the urban poor in Gujarat.

SANJIVANI HEALTH AND RELIEF COMMITTEE is conducting a household-by-household study in about 350 villages in rural Gujarat to identify people with type 2 diabetes, hypertension and heart disease. The project’s eight mobile medical clinics visit as many as 13 villages a day and screenings are done at 14 centers across the region. Patients diagnosed with diabetes receive free medicines and are monitored regularly.

to start-up programs. A pool of champions and real-world implementation experts drawn from the grantees and their partners is available to offer guidance, one-on-one or through teleconferences.

“By displaying best practices, providing tools and templates and opportunities to connect with experts and champions, our web portal will help reduce disparities as those best practices are replicated,” says Rust, “and the impact will move patients in the community toward more equitable diabetes outcomes.”

About a dozen communities are being recruited in 2014 to implement Morehouse’s sustainability model of evidence-based practices in the community and the clinic and using health outcomes data. “The more we’re able to tie improved diabetes outcomes that result from increased community support to fewer hospitalizations, lower costs and improved quality of life for the patient, the better we’re able to demonstrate a model that can be sustained and replicated in other communities,” Rust says.

Bringing diabetes solutions to communities provides direct value to patients, especially those in minority populations that are at higher risk of experiencing preventable blindness, amputations, strokes and kidney failure.

“Patients will benefit from team approaches that close the gap between the advice they get in the clinician’s exam room and the realities they face when they try to manage their own diabetes at home,” says Rust. “Our model proposes to move care from the silos of provider-convenient exam rooms and clinics into the community where patients live, work and play. It facilitates empowerment and engagement for the patient, family and the community at large, and the result is more effective care. Patients get not only what they need, but also what they want, how they want it and where they want it.”

The Partnership for Equity in Diabetes is leveraging NCPC’s extensive relationships with the primary health care and health equity communities to spread the word about the online resource center, training programs, learning collaborative and available technical assistance. It also is developing a database of diabetes and health equity community coalitions and will feature on its website videos and success stories from the coalitions as they move toward health equity in chronic disease outcomes.
For the second year, the Bristol-Myers Squibb Foundation has implemented the Balanced Score Card (BSC) methodology to even more strongly align grant making with its mission of promoting health equity and improving health outcomes for populations disproportionately affected by serious diseases and conditions. The BSC also allows the Foundation to more accurately measure the impact that its grants are having on the lives of the people and strength of the communities it serves and partners with around the world. Below is a selection of key indicators and results for July 2013 through July 2014.

### INITIATIVE

**DIRECT CARE & SUPPORTIVE SERVICES**
Number of people enrolled in or receiving direct care and supportive services through Foundation-funded programs

**VULNERABLE & HIGH RISK POPULATIONS REACHED**
Number of people reached through Foundation-funded programs

**CAPACITY BUILDING & TRAINING**
Number of professional and lay health care workers (HCW) trained through Foundation-funded programs

**IMPACT**
Measurable health equity or health outcomes achieved by Foundation-funded programs

<table>
<thead>
<tr>
<th>INITIATIVE</th>
<th>DIRECT CARE &amp; SUPPORTIVE SERVICES</th>
<th>VULNERABLE &amp; HIGH RISK POPULATIONS REACHED</th>
<th>CAPACITY BUILDING &amp; TRAINING</th>
<th>IMPACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Together On Diabetes</td>
<td>28,887</td>
<td>41,418</td>
<td>Professional HCW – 216 Lay HCW – 303 Total – 519</td>
<td>Range of reported average reduction in HbA1c% in projects – up to 2.1%</td>
</tr>
<tr>
<td>Bridging Cancer Care</td>
<td>77,077</td>
<td>243,529</td>
<td>Professional HCW – 2,421 Lay HCW – 2,564 Total – 4,985</td>
<td>90% of projects have shown improvement in health equity, including access to care</td>
</tr>
<tr>
<td>In Central &amp; Eastern Europe</td>
<td>39,071</td>
<td>2,637,272</td>
<td>Professional HCW – 6,213 Lay HCW – 259 Total – 6,472</td>
<td>Nearly 19,000 patients have received psychosocial support</td>
</tr>
<tr>
<td>Delivering Hope</td>
<td>6,611</td>
<td>269,135</td>
<td>Professional HCW – 1,795 Lay HCW – 1,939 Total – 3,734</td>
<td>90% of projects have increased the standards of care for veterans and their families suffering from mental health issues</td>
</tr>
<tr>
<td>Secure The Future</td>
<td>111,434</td>
<td>1,204,540</td>
<td>Professional HCW – 1,441 Lay HCW – 3,013 Trainees – 10,088 Total – 14,542</td>
<td>82.4% of projects have shown improvement in health equity, including access to care</td>
</tr>
<tr>
<td></td>
<td>750,308</td>
<td>5,406,035</td>
<td>Professional HCW – 136,342 Lay HCW – 27,456 Total – 163,798</td>
<td>100% of projects have shown improvement in health equity, including access to care</td>
</tr>
</tbody>
</table>

* Non-govermental organizations (NGO)/community-based organizations (CBO)/ faith-based organizations (FBO)
| SUSTAINABILITY |

2015 GOALS

Our Sustainability 2015 Goals address a broad spectrum of company responsibilities to its stakeholders – patients and customers, employees, global communities, shareholders and the natural environment. It is intended that these goals will focus attention on those areas that are of great importance for the future success of the company’s BioPharma strategy and for the health and well-being of the global community.

To our patients and customers

- Address focused unmet medical needs to improve health
- Develop and commercialize medicines that address serious diseases
- Improve health outcomes by partnering to strengthen health care infrastructure, services and education
- Increase transparency and access to information on our medicines

Enhance the environmental and safe handling aspects of our medicines throughout their life cycle

- Integrate design principles (e.g., green chemistry and safe handling) throughout new product development and commercialization
- Reduce packaging waste by 5%

To our employees

- Provide a safe and healthy work environment
- Achieve injury and illness rates in top 25% of pharmaceutical industry performance, with rates improving
- Achieve a high performing workforce as a recognized employer of choice
- Build and develop a globally diverse leadership and talent pipeline to drive innovation

To our global communities

- Increase key supplier sustainability aligned with our Commitment
- Expand principles of sustainability and performance indicators at key suppliers

Educate and engage our organization to actively drive progress in environmental and social responsibility

- Increase employee understanding and commitment to implement sustainability initiatives

To our environment

- Improve the environmental footprint of our company
- Reduce total energy use and greenhouse gas emissions by 15%
- Reduce total water use by 10%

To our shareholders

- Financial benefits, enhanced reputation and risk reduction
Helping patients in Africa who are co-infected with HIV and tuberculosis, educating Americans about melanoma and how to prevent it, making an essential HIV medication broadly available in developing countries and training decision makers in the Middle East on health economics and outcomes research are several of Bristol-Myers Squibb’s programs that are helping to expand access to health care and health education around the world.

They are also case studies highlighted by the Business for Social Responsibility (BSR) Healthcare Working Group as part of its Guiding Principles on Access to Healthcare (GPAH). Bristol-Myers Squibb is a founding member of the initiative to develop the Guiding Principles.

The Guiding Principles were introduced in 2013 to help frame and describe the health care industry’s approach to reducing the global burden of disease and improving global health outcomes. They have been endorsed by Bristol-Myers Squibb Chief Executive Officer Lamberto Andreotti, along with CEOs from 12 other pharmaceutical and medical device companies. They outline the key areas in which Bristol-Myers Squibb does its part to increase access to medicines for societies in need where it operates around the world.

The Guiding Principles recognize the importance of five core areas in addressing global health challenges:

- Collaboration across stakeholders
- Research and development
- Expanding availability of health care services
- Developing health system resources
- Respecting human rights

Last year, one Bristol-Myers Squibb Foundation program, Engage-TB, and one Bristol-Myers Squibb Company program were cited as case studies on the GPAH website as examples of programs that promote collaboration across stakeholders and expanding availability of health care services, respectively.

**Engage-TB** leverages the legacy and infrastructure of the Bristol-Myers Squibb Foundation’s Secure the Future initiative to address HIV/AIDS in sub-Saharan Africa and applies it to efforts to combat tuberculosis (TB) in patients who are co-infected with HIV. The Foundation is collaborating with the World Health Organization (WHO) on the initiative and utilizes the WHO’s brokering role and Secure the Future’s community-based model to connect non-governmental organizations and national governments to promote TB prevention, care, and control.

**Medicines Patent Pool:** An agreement between Bristol-Myers Squibb and the Medicines Patent Pool (MPP) will potentially expand access to Reyataz (atazanavir sulfate) for approximately 29 million people living with HIV/AIDS in 110 developing countries around the world. As of mid-2014, three sublicense agreements with generic manufacturers, including the first ever signed by MPP with a China-based company, have been signed. The agreement complements the company’s existing Global HIV Access program that helps provide access to its HIV medicines in a broad range of resource-limited countries. It also allows sublicensees to manufacture atazanavir sulfate as part of fixed-dose combinations for the treatment of HIV/AIDS in the countries covered under the agreement.

**Middle East Program in Health Economics and Health Technology Assessment:** Regulatory restrictions, pricing pressure and complicated legislative environments around the world mean that health care companies need to show decision makers what sets their products apart and the value these products bring to patients and society. Health Economics and Outcomes Research (HEOR) is proving a very significant way to do that. By examining product efficacy in real-world settings and evaluating costs and patient feedback, HEOR puts an actual figure on the clinical and economic outcomes of a particular treatment.

A program developed by the University of Washington’s Department of Pharmacy and supported by a grant from the Bristol-Myers Squibb Middle East/Africa division educates decision makers from United Arab Emirates, Kuwait and Bahrain about the principles of HEOR, enabling them to more effectively and comprehensively evaluate the health economics of pharmaceuticals and assess health technologies. Twenty-five representatives from the three countries have received training on the principles and practice of Health Technology Assessment as well as decision modeling, patient-reported outcomes, micro-simulation and uncertainty assessment. This initiative is an example of developing health systems resources.
The letters come from across the country, penned on plain paper and colorful note cards. Some are several paragraphs long, others just a sentence or two. But they share the same sentiment – heartfelt gratitude for patient assistance programs that offer a lifeline to patients who cannot afford their medication.

“Please accept my thanks … I am 80½ years old and am not working and Social Security does not cover all my expenses,” reads one letter.

“Without your generous assistance program I would be lost,” reads another.

A third reads: “I just want to thank you for all the good you do for patients who can’t afford the medication they need to stay alive.”

These notes of thanks, and hundreds more like them, are a regular part of the correspondence that flows in daily.

Bristol-Myers Squibb Company provides free medication through company-sponsored patient assistance programs and makes product donations to other charities, including the Bristol-Myers Squibb Patient Assistance Foundation (PAF), which was established 15 years ago to provide free prescription medicine manufactured or marketed by the company and its partners to eligible patients in all 50 states, Puerto Rico and the U.S. Virgin Islands.

“Patient Assistance is critical for patients with a financial hardship who have a chronic disease or a life-threatening illness and have no prescription drug coverage,” says Robin Chittick, director, Patient Assistance, Corporate Philanthropy.

The company makes its virology products, including medications for HIV/AIDS and hepatitis B, available to needy patients through the company’s Patient Assistance Program. The company also donates medicines for cardiovascular disease, diabetes, cancer, mental illness and rheumatoid arthritis that are manufactured by the company or its partners to other charities, such as PAF.

In 2013, PAF and company programs provided more than $620 million in free medicines to more than 107,000 patients in the United States. The company also provided through PAF bulk donations of $198 million in medicines to the U.S. Veterans Administration to treat nearly 200,000 military veterans.

“There are so many circumstances and barriers to access that patients face,” says Alicia Coghlan, group director, Patient Assistance, Corporate Philanthropy. “It could be financial, or patients could suddenly fall into unemployment or become underinsured. We’re touching the neediest of the needy.

“Over the past three years, we have seen a definite increase in patients who are underinsured or who can’t pay their portion of the cost-sharing of some plans,” she adds.

“The Affordable Care Act has helped, but we’re seeing more and more patients who just can’t afford the co-pays and co-insurance premiums.”

Outside the U.S., in 2013, the company donated more than $66 million in medicines in developing countries. More than $17 million went to the Asia/Pacific region, more than $22 million went to Latin America and the Caribbean and nearly $9 million went to countries in the Middle East and Africa. The products were distributed through AmeriCares, Catholic Medical Mission Board, Direct Relief, MAP International and Project HOPE.
Bigger is not always better, especially when it comes to product packaging. Smaller packages require less material to produce, fill less space and complement logistical improvements that improve supply chain sustainability. The result: significant benefits for the environment and the company’s bottom line.

A cross-functional team at Bristol-Myers Squibb discovered how small changes can produce big results when they began a project to reduce the size of package inserts for Abilify (aripiprazole). The team initially focused on reducing the insert size to contribute to one of the company’s Sustainability 2015 Goals: Reduce packaging by 5%.

The redesigned insert uses 25% less paper and requires 25% fewer insert trays, 15% less corrugated material and 40% fewer finished goods pallets. The savings: 70 tons of paper, 1.5 million gallons of water and $1.8 million.

As the team looked at the project more closely, they realized they could achieve even greater savings by making changes throughout the finished goods production cycle, from sourcing to distribution.

They found that printing the insert locally – in Humacao, Puerto Rico, where Abilify is manufactured – instead of in the United States, further reduced costs by $340,000. And, shipping the finished product to the U.S. by boat instead of air saved another $540,000.

In all, the project achieved annualized savings of $2.7 million and reduced carbon emissions by 1,180 tons, equivalent to the emissions produced by 220 cars in a year.

Through ongoing continuous improvement efforts, Global Procurement and Global Packaging Technology are assessing additional opportunities to reduce the environmental impact of product packaging. For example, in Japan, the size of the Orencia (abatacept) carton will be reduced by 45% and, for certain markets, the outer paperboard carton for Reyataz (atazanavir) will be eliminated.

Although these changes are delivering against 2015 sustainability goals, there are many more opportunities, especially in the company’s pipeline of Diversified Specialty BioPharma products.

“There is no need to replace products only to add more packaging material,” said Matthew Walls, director and head of packaging and device procurement, Global Manufacturing and Supply.

“The redesigned insert reduces waste and ultimately allows for a more efficient production cycle, which is something we can all support,” said John Janson, principal packaging engineer, Global Packaging Technology.

The company is also achieving its Sustainability 2015 Goals by partnering with suppliers. Bristol-Myers Squibb’s footprint is global, with many moving parts involved in getting products to their destinations around the world.

After looking at production rhythms, the U.S. Logistics team found that large, but less frequent shipments would maximize efficiency, reduce costs and help the environment by conserving natural resources and reducing greenhouse gas emissions.

Last year, the team and one of its U.S. commercial distribution partners consolidated 29 separate distribution centers into one. Bristol-Myers Squibb now delivers all of its products for the U.S. market to a central location. The annual savings are significant: an estimated $1.9 million in transportation costs and an estimated 680,000 tons of carbon emissions.
It isn’t easy being green.

Reducing the environmental, health and safety (EHS) impacts of pharmaceutical products throughout their lifecycles requires innovation at every step, from design and development to manufacturing and distribution.

One such innovation is green chemistry, a concept that involves designing chemical products and processes in a way that reduces or eliminates the use and creation of hazardous substances while also reducing the consumption of natural resources such as energy and water and enhancing overall process efficiency, safety and cost-effectiveness.

“Green chemistry is safe chemistry,” says Dave Leahy, principal scientist at Bristol-Myers Squibb and past co-chair of the American Chemical Society’s (ACS) Green Chemistry Institute Pharmaceutical Roundtable. “It minimizes industrial hygiene issues, lowers worker exposure to hazardous materials and results in fewer incidents. It also has a positive effect on security of supply, lowers emissions and greenhouse gases, is more economical and can produce higher quality products. When we talk about sustainability, we’re talking about having environmental, social and economic impact. Green chemistry gives us all three.”

Bristol-Myers Squibb is one of 16 global pharmaceutical companies that participate in the ACS Pharmaceutical Roundtable and come together in a pre-competitive space to advance green chemistry. The company’s Green Chemistry program – established nearly 15 years ago – gives scientists and researchers the tools they need to design more sustainable development processes for the medicines patients use.

One key tool designed and used by the company’s Green Chemistry team, the Process Greenness Scorecard, rates the EHS implications and greenness of both new and existing processes used for company compounds. The fully automated scorecard evaluates a variety of factors at each step in the development process – emissions, number of chemical transformations, process hazards, potential for worker exposure, etc. – and calculates a score. The Green Chemistry team evaluates that score and the Process Mass Intensity – a measure of how much material is used to make one kilo of product – to pinpoint where process improvements can be made. For example improvements in the manufacturing process for a product in development for treatment of HIV/AIDS would save more than 22,000 metric tons of waste per year at peak sales if approved.

Since green chemistry is a work in progress, Leahy and his team work with the ACS Roundtable to identify areas of common opportunity and support academic research into programs that promote green chemistry principles and practices. In one recent joint research collaboration, Bristol-Myers Squibb and a Princeton University researcher are exploring new ways to use common base metals such as iron and cobalt in chemical processes instead of expensive rare-earth metals such as palladium, rhodium and iridium, which require extensive mining operations.
The innovation taking place in Bristol-Myers Squibb’s laboratories extends far beyond discovering medicines to help patients prevail over serious diseases. It also is helping to build a more sustainable company and support our commitment to environmental stewardship.

A new innovation: An internal Green Labs certification program that recognizes and encourages employees to reduce the environmental impact of their work, and keep such efforts high among their priorities.

In July 2014, 60 labs at four of the company’s R&D centers – Lawrenceville, Hopewell, and New Brunswick, New Jersey; and Wallingford, Connecticut – participated in a Green Labs certification program. The labs provided valuable feedback on the main component of the program, an electronic scorecard that evaluates “green” practices within lab spaces and calculates a final score. Labs exceeding the threshold score are then awarded one of three certification levels: certified, gold and platinum.

The scorecard tracks progress in multiple categories – administrative, process, energy, water, waste, communication and collaboration, measuring both the physical and behavioral components of lab practices and evaluate the way scientists use their space.

The program also collects feedback regarding best practices and innovation that can be applied by labs to make further environmental improvements and increase their certification level over time.

One hundred years ago, the historic Lake Union Steam Plant was built to generate electricity for the city of Seattle, Washington. For seven decades, the plant powered more than 60,000 homes and companies, and stood as a visible icon of economic and civic importance.

Today, the structure is home to Bristol-Myers Squibb’s ZymoGenetics R&D subsidiary and is at the forefront of the research, development and manufacturing of biologic medicines that help patients prevail over serious diseases. The Seattle site also is among an elite group of laboratories around the world to earn the U.S. Green Building Council’s Leadership in Energy and Environmental Design (LEED) Silver certification for Existing Buildings: Operations and Maintenance. There are four levels of LEED certification – certified, silver, gold and platinum.

The two-year project began in July 2012 and covered a wide range of categories, including exterior building management, water and energy efficiency, purchasing materials and resources, waste management, indoor air quality, green cleaning and innovation in operations.

A pivotal assessment at the onset of the project demonstrated that the Seattle site already met nine mandatory prerequisities. To amass the credits required to earn the LEED Silver certification, the site built upon those early successes, aligning sustainability goals with key vendors to ensure processes, equipment and supplies met rigorous standards, including that 100% of durable goods purchased are sustainable and 70% of ongoing consumables purchased are sustainable.

In addition, through feedback mechanisms such as the LEED comfort survey, employee considerations in areas such as air quality, temperature and acoustics were incorporated into the project plan. The site also completed a lighting upgrade project and installed new plumbing fixtures. Since the various upgrades were made, the Seattle site has reduced water and electricity usage by 17% each and natural gas usage by 38%.

ZymoGenetics occupies the historic former Lake Union Steam Plant on Seattle’s waterfront.
Employee health and safety are top priorities at Bristol-Myers Squibb. That is why the company actively promotes a culture of safety and health at work and at home and includes a specific objective related to employee safety among its 2015 Sustainability goals.

Our long-term aspiration is to eliminate work-related injuries and illnesses. The near-term target is to reduce injury and illness rates to levels that are within the best performing 25 percent of pharmaceutical industry peers, and then continue improving. To accomplish this objective, the company maintains a comprehensive occupational safety and health program. In support of our Environment, Health and Safety Corporate Policy and Directive, all sites are required to have safety programs in place and continuously improve by encouraging innovative ideas that help drive safety systems, performance and culture.

At the company’s manufacturing and R&D facility in New Brunswick, New Jersey, for example, a Safety Culture Champions program encourages scientists to think about safety as an essential component of their work. To help them, the scientists called in the SPYDRs, for Safety as Part of Your Daily Routine. Although first designed for the Early Phase and Late Phase Clinical Development departments, the campaign was quickly adopted site-wide because of its broad appeal.

The SPYDR logo is a friendly looking spider that is widely visible across campus on messages, posters and signs at site entrances and in buildings and common areas. The logo can be customized for a variety of functional areas by changing what is in the spider’s claws: test tubes and a microscope for R&D, a keyboard and telephone for administrative staff, and traffic signs on roadways and walkways.

“The SPYDR campaign is an excellent tool to enhance safety awareness at the department level and the site level,” says Bob Weiss, associate director, Environment, Health & Safety (EHS). “SPYDR is generic and, because it can be customized and adapted for all groups under all circumstances, it raises safety awareness among employees in all areas, not only those where manufacturing or active research is taking place.”

Across the company, a culture of improvement and safety is encouraged at every level and every function. The Make Every Month Safe program is a yearlong campaign that features quarterly themes including slips, trips and falls prevention; distracted driving and motor vehicle safety; ergonomics and accident prevention; and risk reduction. In June 2014, we celebrated June Safety Month and launched these quarterly topics, including a video message from CEO Lamberto Andreotti.

As part of the ongoing work to strengthen our safety culture and capabilities, Global Manufacturing and Supply (GMS) is in the midst of adopting and deploying DuPont STOP™ (Safety Training Observation Program). STOP is a behavioral safety training program that increases safety awareness and reduces accidents in the workplace by helping supervisors and employees identify and eliminate unsafe work practices and conditions.

“The joint effort between GMS-EHS and the sites, combined with DuPont STOP, will help build a sustainable safety culture to drive down our Total Recordable Incident Rate,” says Mark Caine, director, EHS, Global Manufacturing and Supply, Pharmaceutical/Biologics Operations. “At the end of the process, we hope it is truly embedded in each employee and that everyone who enters our sites, does business with us or lives in our local communities sees that safety is a top priority at Bristol-Myers Squibb.”
Being a Good Neighbor

Bristol-Myers Squibb has a long history of helping to build the communities where its employees work and live by promoting community health and wellness, enhancing science and technology education, and addressing basic human needs for food, shelter and a safe and clean environment.

Our commitment to being a good neighbor, an employer of choice and a leading corporate citizen has been consistently recognized by external organizations. For example, we have been recognized as a top place to work for 16 straight years by Working Mother magazine (100 Best Companies for Working Women) and have received similar recognition from Diversity Inc. (Top 50 Companies for Diversity), National Association for Female Executives (Top 50 Company for Executive Women) and Human Rights Campaign Foundation (Best Companies for LGBT Equality), among others, in recent years.

To get a true sense of the company’s commitment to the community, you need look no further than the numerous programs and organizations that have been supported by Bristol-Myers Squibb, the Bristol-Myers Squibb Foundation or the company’s employees.

Notable examples include:

BRISTOL-MYERS SQUIBB CHILDREN’S HOSPITAL With a grant from the Bristol-Myers Squibb Foundation, Robert Wood Johnson University Hospital established the Bristol-Myers Squibb Children’s Hospital in New Brunswick, New Jersey, in 2001. When the children’s hospital opened, it was New Jersey’s first freestanding hospital for children. Today, it remains one of the state’s largest and most comprehensive resources for specialized pediatric care. Over the years, additional grants from the Foundation helped create three pediatric clinical centers of excellence that address some of today’s most urgent childhood issues: obesity, infectious diseases and rheumatic diseases; and also helped expand pediatric surgical services.

BRISTOL-MYERS SQUIBB COMMUNITY HEALTH CENTER A new community health center for uninsured and underinsured patients at the University Medical Center of Princeton in Plainsboro, New Jersey, was funded in large part by the Bristol-Myers Squibb Foundation. For more than 80 years, the University Medical Center at Princeton has maintained a clinic to provide free or low-cost medical care to those who need it. When the hospital relocated from downtown Princeton to Plainsboro in May 2012, the Foundation’s grant helped create a larger, state-of-the-art clinic that served more than 34,500 patients in 2013.

CENTERS FOR SCIENCE TEACHING AND LEARNING The Bristol-Myers Squibb Centers for Science Teaching and Learning at Rider University and Montclair State University in New Jersey and at Quinnipiac University in Connecticut are the Foundation’s signature investments in science, technology, engineering and mathematics education. The Centers in New Jersey work with school districts and private schools in the central and northern regions of the state to help educators bring science to life for students in grades K-12 by emphasizing hands-on, inquiry-based learning, developing deep content knowledge, working on effective curriculum planning and using instructional technology to improve learning outcomes. In addition, the New Jersey centers are working with the New Jersey Department of Education to advance the Next Generation Science Standards.

FINANCE GIVES The company’s commitment to building strong communities extends around the world. Finance GIVES (Global Initiative for Volunteerism and Engagement) is a program that enables Finance employees from around the world to spend three weeks in Africa to help organizations that have received Foundation grants improve their financial management skills. The program is a collaboration between the Bristol-Myers Squibb Foundation’s SECURE THE FUTURE initiative and the company’s global Finance department.

Since Finance GIVES began in 2011, employees have worked with more than 25 organizations in South Africa, Zimbabwe, Kenya, Tanzania, Lesotho and Swaziland, helping them track project expenses, create donor reports, manage budgets, establish good financial practices and build income-generating projects. “We want the financial and management enhancements we train them on to be sustainable so that when our Finance employees return home the organizations can maintain the skills and build upon what they’ve learned,” says Bruno Lauras, head of Finance, European Markets, and head of Finance GIVES.
Dave Pease is accustomed to focusing on precision. His eight years as a helicopter pilot with the U.S. Army required it. But even that did not prepare him for what he saw on a visit to Bristol-Myers Squibb’s biologics manufacturing facility in Devens, Massachusetts.

“It reminded me of the inner workings of the CH-47 helicopter I flew, although the science and complexity at the Devens plant made a helicopter seem fairly simple,” he says. “I thought the same thing when I saw the manufacturing scheduling process put into action there. It made coordinating the mission schedule of an aviation unit look like child’s play.”

Pease, 31, is one of about 60 U.S. military service veterans participating in a mentoring program offered by the Veterans Community Network (VCN), an employee engagement group inspired by the Bristol-Myers Squibb Foundation’s Mental Health & Well-Being initiative focusing on veterans and their families. Pease’s visit to Devens was arranged by his mentor, Lou Schmukler, president, Global Manufacturing and Supply, to introduce him to how a biotech manufacturing facility operates. Pease and Schmukler have been teamed for almost a year.

Since his August 2013 return from deployment to Afghanistan, Pease has been studying full time for his M.B.A at Columbia University in New York. He hopes to land a job in supply chain management in the pharmaceutical industry when he graduates.

“When I decided to leave the military, I was concerned that private industry would have little use for a helicopter pilot. I’ve since learned that many companies value the soft skills most veterans carry with them – how to work in teams, how to thrive under high stakes deadlines and how to mitigate risk,” he says. “Lou’s mentorship has given me the confidence that the skills I gained in the military will translate well into the civilian workforce.”

VCN’s mentoring program began in April 2013, when the group partnered with American Corporate Partners, a nonprofit dedicated to helping veterans transition to the private sector through one-on-one mentoring relationships with corporate professionals.

Ron Miller, vice president, Federal Government Affairs and Policy, is a founding member of VCN and a veteran of the U.S. Air Force. He is also mentoring a returning veteran who has a strong interest in politics. “I remember how challenging it was trying to figure out how to re-enter the working world after being in the service, and I wanted to help someone navigate that process,” he says.

Mentors give returning veterans a real-world perspective about career choices, answer questions and offer guidance about the industry, help the veteran with interview preparation and facilitate networking opportunities. And, as can often happen, the mentor gets just as much out of the experience as the protégé.

“Service men and women have devoted a large part of their lives to our country,” says Schmukler. “I’m proud that our company supports their transition back into civilian life and that I’ve personally been able to help a returning veteran navigate re-entry to the work force.”

VCN members, who include employees, contractors and business partners, participate in local and regional activities that support veterans, including adopting military families during the holidays, the National Veterans Wheelchair Games and Home of the Brave, a campaign that thanks veterans by coordinating visits to patients at Veterans Administration Medical Centers.
Preserving natural resources while also promoting a safe and healthy environment is a key sustainability commitment for Bristol-Myers Squibb.

A unique project in New Jersey that is solely supported by grants from Bristol-Myers Squibb is helping to create a healthier learning environment for the thousands of students, teachers and staff who attend public schools every day.

The company is collaborating with the U.S. Green Building Council and the New Jersey School Boards Association (NJSBA) by supporting a three-year Center for Green Schools Fellowship. Through this initiative, Fellow Kara Angotti has been providing direction, training and resources to leaders of the state’s 586 public school districts with the goal of “greening” school buildings and helping districts reduce operating expenses. Bristol-Myers Squibb has provided funding to support the Fellow’s work for the first two years of the project.

During the 2013-14 academic year, Angotti worked directly with administrative leaders and school board members to identify opportunities for facility and curriculum improvements. She also conducted professional development workshops and training programs on sustainability topics for school board members.

Angotti is also leading a pilot program for the New Jersey Sustainable Schools project, a collaboration between NJSBA and Sustainable Jersey. As part of the pilot, she oversees conservation and sustainability projects developed and led by students in 11 districts and works with team leaders to track their progress.

In Tanzania, an estimated 50,000 children younger than five years old die each year from water-related diseases such as cholera and typhoid.

Over the past three years, Global Sustainable Partnerships (GSP), a nonprofit organization certified by the Center for Affordable Water and Sanitation Technology, has been working to change that by installing Hydraid® BioSand Water Filters produced by Triple Quest LLC in schools and promoting positive behavior change through water, sanitation and hygiene (WASH) education.

GSP’s “Water is the Lifeline of Life” program has made clean, safe drinking water available to about 33,000 teachers and students at 80 schools, orphanages and a community center in Tanzania. The simple lightweight filters are powered by gravity and reduce biological contaminants when surface or ground water passes through, producing water that is safe for drinking, food preparation, personal hygiene and sanitation.

Now, through a program expansion, funded by the Bristol-Myers Squibb Foundation and developed in cooperation with Bristol-Myers Squibb’s Environment, Health, Safety and Sustainability department, GSP will install 400 BioSand filters to proactively support the health of 100,000 people in 18 rural villages.

“We’ve been concentrating on children and schools but the problem is that when the children go home, they drink contaminated water,” says Kimberly Fogg, GSP founder, noting that the program expansion will help reduce the cycle of recontamination by more than 80 percent by making filters available in homes and clinics.

“This expansion impacts the cycle of poverty as well because sick people can’t go to work to earn a living,” she adds. “It also involves mothers and fathers who have to stay home to care for their sick children and miss work.”

GSP’s WASH education materials are being used to train teachers, students, women and key community leaders to build local capacity, ensure sustainability and encourage healthy habits that reduce waterborne illness.

In a letter of support for “Water is the Lifeline of Life,” Tanzania’s ambassador to the United States, Liberata Mulamula, said the project is “a wonderful opportunity to save lives” that will positively impact populations of children, youth and families, as well as the elderly, people with disabilities and people living with HIV.

“Water is the Lifeline of Life” is one of several ongoing philanthropic initiatives in Tanzania receiving support from the Bristol-Myers Squibb Foundation. Other efforts through its SECURE THE FUTURE initiative focus on HIV and cervical cancer through the Pink Ribbon Red Ribbon campaign (page 6).
Each year during Earth Week in April, Bristol-Myers Squibb employees around the world demonstrate their commitment to environmental stewardship and a sustainable future by participating in activities ranging from planting trees to attending workshops about the benefits of keeping honeybees and the conservation of energy and water.

Led by the Go Green team, the company’s 2014 global Earth Day theme was “The 5Rs:"

**RETHINK • REDUCE • REUSE • RECYCLE • RESPOND**

The 5Rs theme reinforces one of Bristol-Myers Squibb’s key commitments – encouraging the preservation of natural resources and minimizing the environmental impact of the company’s operations and products.

Below are some examples of the activities from the 50-plus sites that participated in this annual event.

**MANATI, PUERTO RICO**
Displays and exhibits from local companies focused on ways to reduce fuel and electricity consumption. A local car dealer displayed hybrid cars and discussed the benefits of hybrid technology and an alternative energy company presented options for reducing home energy consumption. Employees dropped off their obsolete home electronic equipment at a recycling center set up for the day and participated in an art contest using recycled materials.

**BANGKOK, THAILAND**
A full year of activities kicked off on Earth Day when office- and field-based employees devoted a day to planting trees at Bangpu Mangrove Forest. The plantings help regenerate degraded forest areas and rebuild the natural mangrove forest that provides a habitat for wildlife.

**RUEIL-MALMAISON, FRANCE**
To raise awareness about biodiversity and the essential role that bees play in the ecosystem, the company introduced employees and their children to its apiary. Workshops and discussions were led by professional beekeepers who introduced the hive and the role of the bees and their queen. Thirty-five children participated in the program, which also included a presentation of the movie “More than Honey,” an award-winning documentary that takes an in-depth look at honeybee colonies around the world.

**TLALPAN, MEXICO**
A range of activities including a rally, mural painting, renewable energy workshop and art contest drew 200 employees and 130 of their children. A video captured the children’s views on what Earth Day means to them and what they can do for the environment.

**SYRACUSE, NEW YORK**
More than 100 employees attended a vendor fair, where they received eco-friendly items such as reusable grocery bags and silver maple and Douglas fir saplings, and entered raffles for a water bottle and a rain barrel.
MUNICH, GERMANY

Forest directors reported on the environmental benefit of the 55,000 trees planted by Bristol-Myers Squibb around Munich over the past three years to offset the carbon emissions from the sales fleet in Germany and answered questions about the tree-planting campaign and forests in general. Employees received Klimasparbücher (climate savings books) from a sustainable book publisher and Go Green drinks. Han Steutel, general manager, Germany, planted a tree at Bristol-Myers Squibb headquarters.

SEATTLE, WASHINGTON

Captain Wasteful visited ZymoGenetics to remind employees about the 5Rs. He fit the day’s pirate theme, which featured a treasure hunt for more than 100 employees searching for prizes from local green program vendors. The Green Parrot Award was awarded for the break room that collected the most compost.

CENTRAL NEW JERSEY

At sites in Lawrenceville, Hopewell, Plainsboro and New Brunswick, numerous groups and green vendors set up displays with information about topics such as single-stream recycling, Green Lab certification, home recycling tips, green office do’s and don’ts, agriculture, composting, waste and energy reduction, and soil and water conservation. Electric and hybrid cars were on display and a recycling robot paid a special visit to one site as well. Since the event coincided with Take Your Child to Work Day, children’s activities were part of the event. A lighting fair at one site featured energy-conserving lamps and fixtures.

DUBAI, UNITED ARAB EMIRATES

Employees spent Earth Day cleaning the area around their office building, while wearing T-shirts and caps made especially for the occasion. The building is in a community located in a desert area and is not as well-tended compared to other more highly populated areas of the city.
The mission of the Bristol-Myers Squibb Foundation is to promote health equity and improve the health outcomes of populations disproportionately affected by serious diseases and conditions, by strengthening community-based health care worker capacity, integrating medical care and community-based supportive services, and mobilizing communities in the fight against disease.

The Foundation engages partners to develop, execute, evaluate and promote innovative programs to improve the health outcomes of populations disproportionately affected by type 2 diabetes in the United States, China and India; HIV/AIDS in Africa; cancer in Central and Eastern Europe; hepatitis B and C in Asia; and serious mental illness in the U.S.

Foundation Staff
John L. Damonti, President
Patricia M. Doykos, Ph.D.
Catharine Grimes
Beryl Mohr
Phangisile Mtshali
Christine Newman
Vivienne Stewart-Seaton
Damon Young
Lilibeth Zandueta

Contact Us
For more information about the Bristol-Myers Squibb Foundation visit bms.com/foundation
Bristol-Myers Squibb Foundation
345 Park Avenue
New York, NY 10154-0037
212-546-4000

Environment, Health, Safety & Sustainability
Susan Voigt, Vice President

Contact Us
For more information about the Bristol-Myers Squibb sustainability programs visit bms.com/sustainability

Global products and company programs appearing throughout in italics are referred to herein by their registered and approved U.S. trademarks, unless specifically noted otherwise. Abilify® is a trademark of Otsuka Pharmaceutical Co., Ltd. All other brand names are trademarks of Bristol-Myers Squibb Company or one of its subsidiaries. All other trademarks are property of their respective owners. © 2014 Bristol-Myers Squibb Company
AT BRISTOL-MYERS SQUIBB, sustainability means conducting our business to help patients prevail over serious diseases in a manner that contributes to economic growth, social responsibility and a healthy environment now and in the future.

SELECTED RECOGNITION FOR SUSTAINABILITY

Bristol-Myers Squibb has been internationally recognized for sustainability practices as a socially responsible company. Our recent recognitions include:

- 2014 Ranked No.1 Overall by Corporate Responsibility Magazine
- 2013 Top 50 Most Advanced US Companies for Environmental, Social and Governance Performance
- 2013 Best Company for Working Mothers
- 2014 Compliance Leader Verification Award