

Making a Difference

Addressing and Reducing Health Disparities

An Interview with John L. Damonti,
President, Bristol-Myers Squibb Foundation and
Vice President, Corporate Philanthropy, Bristol-Myers Squibb



EDITORS' NOTE Prior to joining Bristol-Myers Squibb in 1991, John Damonti served as Associate Director of State Government Relations for Ciba-Geigy Corporation, Director of the Primerica Foundation, and Manager of Contributions and Community Relations for Mutual of New York. He received an undergraduate degree from Bowling Green State University and a master's degree in social work from Fordham University. In 2007, Damonti received the Schriver Award for Creative Grant Making from the Council on Foundations and an honorary doctorate degree from Fordham University.



John L. Damonti

COMPANY BRIEF Founded in 1945 and based in New York, the Bristol-Myers Squibb Foundation (www.bms.com/foundation) funds a broad range of programs that aim to build bridges to better health in communities around the world. A key program has been SECURE THE FUTURE™, a \$150 million commitment in Africa to fight HIV/AIDS, created in partnership with Bristol-Myers Squibb Company.

New York-based Bristol-Myers Squibb (www.bms.com) is a global biopharmaceutical and related health care products company, whose mission is to extend and enhance human life by providing the highest quality pharmaceutical and related health care products. Over a century old, Bristol-Myers Squibb (NYSE:BMJ) has nearly 40,000 employees and roughly \$19 billion in global sales.

How engaged are the employees of Bristol-Myers Squibb [BMS] in the company's corporate social responsibility activities? Is it a cornerstone of your culture?

Yes, it is very much part of our operating culture and embedded in our values as a company. So while I have 15 people who work directly for the Bristol-Myers Squibb Foundation, I often feel as though our nearly 40,000 employees around the world are also working alongside us. One reason for that is that our business is all about improving and saving people's lives. If you tie that to the foundation's mission, which is basically aligned with the company's mission to extend and enhance human life, you can understand why the outpouring of support from our employees about our various programs is enormous.

About two years ago, we took a real step forward in the way we approached philanthropy at Bristol-Myers Squibb. We said let's not focus just on the initiatives that we at the Bristol-Myers Squibb Foundation develop or support. Rather, let's look at philanthropy and charitable giving as it is manifested across the entire company. Let's look at how we're contributing in the communities where our employees live and work and where we operate facilities and let's look at it through the efforts of our individual businesses. The goal was to develop strategic alignment across every part of our company for all our philanthropic efforts. As part of that process we decided to carry a single theme across the entire company: addressing some of the serious health disparities that exist around the world. The idea was to determine how we can use our philanthropic dollars – not only foundation dollars, but all aspects of charitable giving – to address disparities in health care as a result of race, gender, geography, social status, economics, or other factors.

We further refined this concept by also examining the role that communities can play to help assure better health outcomes. For instance, a person could be standing in a village in an African country, be HIV positive, and have the medicine he or she needs to treat their disease. But if the support services for that person aren't there – if food supplements for proper nutrition are inadequate, if the stigma of the disease is too high, if they can't get to a clinic for treatment, or if they face any of a host of other issues – the likelihood is that person is not going to benefit adequately from medical treatment alone. With that in mind, our efforts aim to mobilize community support services so that we maximize health outcomes in every way we can. Indeed, that whole concept of the importance of the community has become a central pillar for the foundation. We're modeling programs that tackle this issue in four geographies, focusing on four diseases: HIV in Africa, hepatitis in Asia, cancer in Central and Eastern Europe, and serious mental illness in the U.S.

With so many needs, how did you hone in on particular issues to address?

Our focus was on chronic diseases, all of which require ongoing community mobilization and support. After all, because patients

with these diseases need lifelong treatment and care, they also require lifelong support where they live. It's also the case that these four diseases are among our company's strategic priorities, providing us with a significant amount of expertise within our organization. Ultimately, in each of these areas, the unmet medical need is greatest in specific regions of the world and so that's where we're trying to have the greatest impact.

A lot of your work must evoke strong emotions. Is it ever difficult to stop yourself from becoming emotionally involved?

Yes, sometimes it's nearly impossible. Whether you're in a village in an African country or you're visiting the Bristol-Myers Squibb Children's Hospital in New Brunswick, New Jersey, you see people suffering, people who need help. So it's hard not to get involved and to feel both empathy and a sense of responsibility to do whatever we can to alleviate that suffering. I find that the best way to deal with that is to take action and by looking at the long view, to know that our programs can make a positive difference over time. Consider HIV/AIDS and how dealing with that pandemic has evolved over time. In 1999, when we first became involved with a program to help women and children affected by HIV/AIDS in sub-Saharan Africa, we spent a great deal of our efforts trying to enhance the capacity and capabilities of grass roots organizations, including enhancing health care infrastructure so that as treatments became more available, they could be most effectively used. Much has changed since then. And while we have a long way to go, now in 2008, we're able to offer new hope for many individuals. Drug treatments are more widely available, health care infrastructures are improving to get treatments to people, a wide range of organizations are involved and HIV/AIDS is now – at least for many – a chronic instead of a fatal disease. So, for example, we're working on helping the living – on reintegrating HIV positive people into jobs to help them support their families. We're helping people get on with their lives. So, as you get emotionally caught up in parts of this work, you also get emotionally caught up in the success that is possible and that you can bring over the longer term. At the end of the day, that's what keeps you going. ●

Groundbreaking HIV reference laboratories, built with SECURE THE FUTURE grants, track the virus as it mutates.