Gateway to a Healthy Community

Johnson Johnson

Healthier Kids

Program Update

4/11/2016
Challenges associated with a Sedentary Lifestyle

**Social:**
- Poor family connection
- Isolation
- Anti-social behavior

**Physiological:**
- Diseases of excess weight
- Poor cardiovascular fitness
- Bad posture

**Emotional:**
- Low self-esteem
- Depression
- Low motivation

**Cognitive:**
- Poor study skills
- Short attention span
Model for Whole Child Health

- **Physiological**
  - Aerobic Fitness
  - Coordination and Balance
  - Motor Skills

- **Cognitive**
  - Attention and Focus
  - Memory
  - Creativity

- **Emotional**
  - Stress reduction
  - Self Image
  - Positive mood affect

- **Social**
  - Life skills development
  - Positive social interaction
  - Community building

**Impact**
- Increased Physical Activity and overall health
- Better Academic Performance
- Increased Knowledge
- Improved Teamwork
- Improved Attendance
- Improved Confidence
- Improved Aspirations
Gateway to a Healthy Community™: Healthier Kids

Johnson & Johnson, through its Office of Diversity & Inclusion, has undertaken an enterprise-wide initiative called the Gateway to a Healthy Community™ (GHC) with the mission to help create a world free of health disparities by addressing un-met and under-served medical needs.

Johnson & Johnson has incorporated, under the GHC umbrella, the Gateway to a Healthy Community™ - Healthier Kids program (GHC-HK), to contribute to the national effort to combat childhood obesity and diabetes in a very meaningful way.

GHC-HK consists of innovative tools and applications that were developed, with the support of Johnson & Johnson, to identify and help to address the problem of childhood obesity.
Gateway to a Health Community – Healthier Kids™

Overall Strategy

Driven by our Credo, our strategy is to reach at-risk children, and engaging their families and the communities, to drive changes in behavior resulting in longer, healthier and happier lives. Schools offer the ideal location to co-educate children, parents and communities and are a catalyst for maximum family and community impact.

Entry Point

SCHOOLS

• Activity Works @ School
• Education and enlistment
• School activity goals
• Field support
• Tracking and reporting
• Recognition and rewards

HOMES

• Activity Works @ Home
• Teacher-parent connection
• Student activity goals
• Family activity goals
• Social media connection
• Local community connections

COMMUNITIES

• Community calendar and activities
• YMCA’s & YWCA’s
• Boys & Girls Clubs
• Churches
• Health care providers
• Local media and businesses
• Elected officials; government education, ELC and social welfare agencies

Target Impact and Reach
Building on Success: Performance to date

Spring 2015 Footprint

- 192 Schools
- 3,314 Classrooms
- 239,850 Students

GHC is creating significant impact on a large scale

Years 2012-2015
- 800,000+ Students
- 640,889 Activity Sessions
- 3,204,445 Cardio Hours
- 672,933,450 Calories Burned

New Programs:
- All Star Health Squad
- Microsoft Kinect
- Calorie Cloud Challenge

Partnership with
- Wakefern
Gateway Program Vision

• A Balanced Mix of *On-the-Ground Programs* Delivered in the Community and *Digital Content* Delivered via the Whole Child Health Portal
  
  • Physical and Digital Programs will be Designed to Co-exist and not Compete with Each Other

• Both Physical Programs and Digital Content Must Adhere to Similar Sets of Standards:
  
  • Demonstrate Reusability & Repeatability
  • Provide an Easy Path for Training & Implementation
  • Achieve Economic Sustainability / Be Self-Supporting Over Time
  • Generate Data to Support Evaluation of Proven Effectiveness Toward Desired Outcomes
  • Support Research Goals
Physical Programs

- Physical Programs cost more on a per student basis, but are essential to maintaining GHC’s connection with the Community.

- GHC has learned the importance of being involved with the implementation in a hands-on manner, to see and hear first-hand which programs are more or less effective, and to experience the day-to-day opportunities and challenges for the students, teachers, parents, and administrators.

- A move from GHC’s proven regional program to a national initiative would significantly benefit from a large national retail partner like Target who could help shoulder the costs of roll-out by city and by school.

- Program Management Includes
  - Communications
  - Event Management
  - Implementation / Training
  - Support Teams
  - Research & Evaluation
Digital Content Strategy

• Accessed Securely Via Trusted Johnson & Johnson Whole Child Health Portal

• Accessible in School Classrooms, After-School Programs and Direct-to-Home

• Scales Cost-effectively
  • Can address 100X - 1,000X the Number of Students via Digital Distribution

• Proven, Effective Content may be Sourced from any of the Following
  • Established programs with third parties partners, leveraging an account management approach
  • 3rd Party Developers funded by Johnson & Johnson
  • Existing content internal Johnson & Johnson business units (maybe adapted for GHC Audience)
JNJ Healthcare Disparities – Potential Partnerships

Civic Organizations: working through affiliates to expand program outreach and bring content to children engaged in those organizations

- United Way
- NAACP
- National Council of La Raza

Medical Organizations: promote the program through national chapters, potential engagement of ethnic physicians to deliver messages in communities and bring the community closer to the local doctors

- National Medical Association
- National Hispanic Medical Association
- American Association of Pediatrics

Government Organizations: builds on corporate reputation with key policy stakeholders

- Congressional Black Caucus Foundation
- Congressional Hispanic Caucus Institute
- Federal & State Governments important to J&J’s Government Affairs Division