## Johnson Johnson

# Closing the Gaps of Maternal Health in Conflict and Crises: Private Sector Perspective



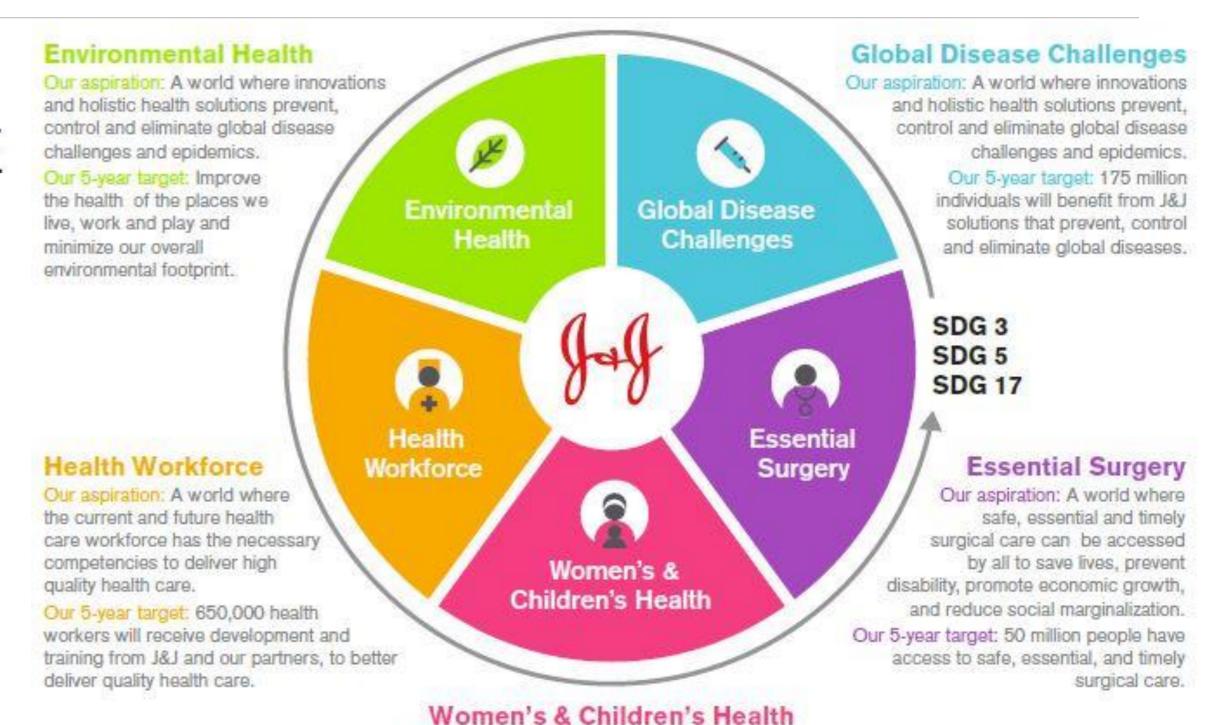
December 8, 2016

Joy Marini Executive Director, Global Community Impact Johnson & Johnson

### Johnson & Johnson's Commitment to the SDGs

### **OUR 2030 PROMISE**

A giant leap towards a world where a healthy mind, body, and environment is within reach for everyone, everywhere.



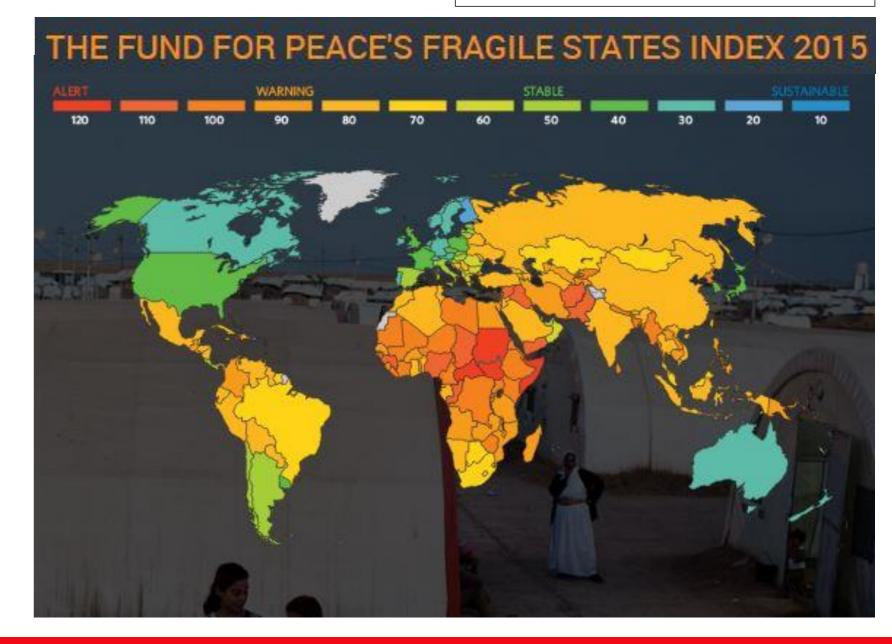
Our aspiration: A world where every woman and child survives and has the opportunity for a healthy future. Our 5-year target: 60 million women and children will receive support and tools to enable a healthy future.

## Our Reality: Fragile & Conflict Affected States (FCAS)

Fragility: When a nation is unable to provide basic services to its population

By 2030, well over 60% of the global poor will be in fragile contexts. Private sector intervention is critical to achieve peace and security in these regions.





## Maternal, Newborn, & Child Health Challenge in FCAS

- Today, 75 percent of the world's people affected by humanitarian crises are women and children
- More than 500 women die each day in pregnancy or childbirth every day in humanitarian and fragile settings
- Areas affected by crisis remain responsible for 60 percent of all preventable maternal deaths
- 1 in 5 refugees or displaced women in humanitarian settings have experienced sexual violence
- 225 million women and girls around the world have an unmet need for family planning. Only 17% of health facilities in three crisis settings were found capable of providing all methods of family planning





## Filling the Gap: The Private Sector Role in FCAS

The private sector helps close the gap between increasing demand for assistance in FCAS and increasingly constrained aid budgets and government resources.

#### The private sector also brings:

- Resources, capabilities, expertise, advocacy and visibility to the issues
- Propensity for risk-taking, creativity, anticipation, adaptation and entrepreneurship
- Has the capability to deliver services faster and/or at higher standards than the public sector in times of crisis

Foundations, private donors and public-private partnerships have fundamentally reshaped the funding of global MNCH assistance

DAH for newborn and child health by channel of assistance, 1990-2015

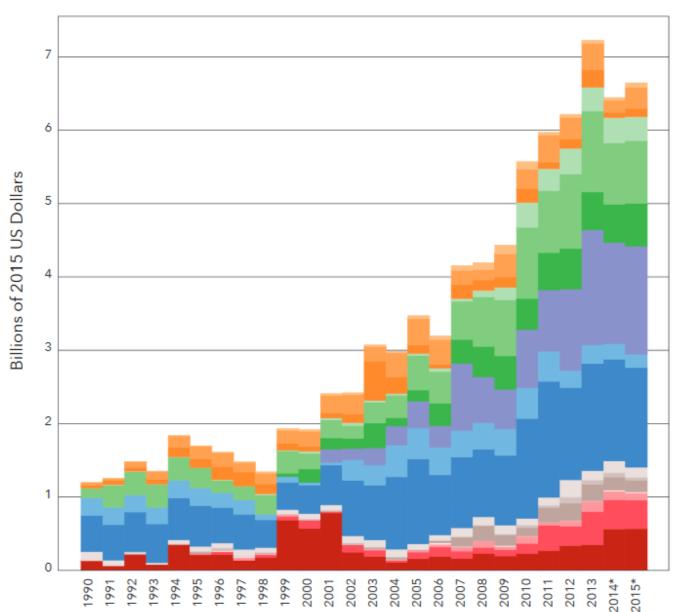
Regional development banks

World Bank - IDA





<sup>\*2014</sup> and 2015 are preliminary estimates.



## Constraints on Private Sector Engagement in FCAS

#### **Constraints:**

- No current business interest
- Higher rate of failure: perception of risk
- Rapidly changing conditions encourage development actors to adopt shorter time horizons. Scale is a long-term endeavor.
- Weak institutions in FCAS, render sustainability more difficult

Consider Alternate Rationale for Engagement

Balance portfolio to accommodate FCAS

Align with Local Priorities Tailor Models that Respond to High Volatility

Partner to reduce risk

Increase Timelines

Sources: Adapted from: Humanitarian Futures Program, King's College, 2012 Adapted from: Scaling Up Fragile States, Brookings, 2016





## Johnson & Johnson Example Programs



#### Safe Birth Even Here: Health Systems & Advocacy

J&J joined with five private sector companies, and UNFPA, the government of Denmark in this campaign to increase support for women and girls in fragile and conflict-affected settings. J&J also supporting health systems building in Liberia and Haiti



#### **Syrian Refugee Crisis**

Supporting children's resilience and healthcare with global partner, Save the Children, in Syria and neighboring countries of resettlement, incl. Lebanon, Jordan and Turkey. >\$2.75MM



#### **Humanitarian Relief**

Cash and product donations directly into in-country partners and through AmeriCares, Direct Relief and Heart to Heart International.



#### Zika Response

Participating countries: Brazil, Puerto Rico, El Salvador, Haiti, Mexico, Colombia

**Co-creation health worker training model:** with participation from local government, public health organizations and local NGOs

#### **Brazil Early Progress**

**30+ global health and development stakeholders** included in the cocreation of the projects

6 states Recife, Paraíba, Tocantins, Minas Gerais, Bahia e Mato Grosso

76 trainings for 390 health care professionals

**92 articles** published on national media, impacting more than **16M viewers** 

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