Insights, Analysis & Planning: In 2020, Johnson & Johnson MedTech’s successful, first-of-its-kind, award-winning, My Health Can’t Wait (MHCW) public education campaign gave patients the resources and confidence they needed to prioritize their health during the first year of the COVID-19 pandemic. It raised awareness about the importance of communication between patients and their healthcare professionals (HCPs), and drove Johnson & Johnson MedTech’s reputation among patients and providers.

One year into the pandemic, the effect on patient health due to deferred care vaulted to the top of the list of concerns among HCPs. And a year’s experience with the pandemic revealed where the impacts of deferred care are most pronounced, by geography, population, and disease state – with particular concerns around cancer, cardiovascular disease, and elective, but not optional orthopaedic procedures.

In 2021, we expanded the My Health Can’t Wait program by tailoring it to six regions around the world, chosen based on insights that showed: 1) Patients were continuing to defer care due to the pandemic in these regions 2) There was an unmet need for information on the dangers of deferring care 3) They were priority markets for the organization.

The campaign reached patients and providers in Australia, India, Italy, Japan, and Latin America to address the impacts of deferred care among the highest risk patient populations. In the U.S., since the bulk of our campaign was launched in 2020 at a national level, we evolved the campaign based on insights that showed that Black and Hispanic patients were delaying and deferring care at higher rates than their white counterparts. We focused specifically on Chicago, a key market where we could have the greatest impact.

Campaign goals varied slightly based on the specific needs of each market, however the overarching goals remained the same:

- Raise awareness among patients in key markets about the importance of prioritizing their health.
- Develop and/or maintain relationships with local community groups, societies, KOLs and officials to ensure a collaborative, coordinated rallying cry about the My Health Can’t Wait message.
- Drive patients to take action to prioritize their health.

Execution: In Australia, India, Italy, Japan and Latin America, we replicated the My Health Can’t Wait Resource Hub (MyHealthCantWait.com) providing downloadable tools for patients in the local language and tailored to the specific market needs (patient-caregiver discussion guides, telehealth resources, safety FAQs, patient story videos) and HCPs (surgery discussion checklist, direct patient communication recommendations, patient outreach templates).

We then executed a localized 360-degree, surround-sound approach in each of these regions to help both patients and providers stay connected, and coordinated with societies, local policymakers, and experts in their respective fields. This included identifying the greatest areas of need via quantitative research, forging partnerships with patient advocacy organizations, key opinion leaders (KOLs), scientific societies, research institutions, and public officials; and conducting a range of tactics across social media, print, television, radio, and digital channels to reach our targeted populations. In each region, we pursued this effort in ways specific to the local healthcare system, patient needs and market dynamics.

In Australia, we surveyed the public and partnered with a leading surgeon at the Prince Alfred Hospital in Melbourne to provide commentary and insight around the results across television, print, online, and trade outlets, as well as an audio news release that was downloaded by more than 280 radio stations across Australia.

In India, we developed a multi-pronged approach to engage the public and all industry stakeholders through a series of targeted mini-campaigns in Western India (Maharashtra, Gujarat), Southern India (Karnataka, Telangana) and Northern India (Punjab and National Capital Region Delhi that includes Noida, Gurugram etc.). We partnered with the Indian Cancer Society and engaged 115 KOLs through a week-long awareness campaign highlighting the importance of early detection for gastric, lung cancer, and colorectal cancer; both on social media, as well on radio stations across 22 cities. We also engaged KOLs on separate social media campaigns building awareness of early detection for arthritis on World Arthritis Day and of osteoarthritis on Mother’s Day.

In Italy, we conducted a qualitative analysis through focus groups to understand the psychological barriers, feelings, and fears of targeted patients (cancer, cardiovascular disease, obesity, and orthopedic) in pursing care during the pandemic. We used these insights, combined with the data provided by Foundation GIMBE and ACOI – Italian Association of Surgeons, to inform our campaign. We set up 2 national workshops with 5 patient associations and 10 scientific societies, and then implemented joint, proactive outreach and promotion of these materials (which included Q&As, checklists, video tutorial and a decalogue for decision makers) through earned, paid, and owned media channels, targeting the public, providers, and policymakers.

In Japan, we conducted a survey of 15,000 members of the public and 300 HCPs in partnership with the Cancer Institute Hospital Tokyo, leveraging 15 KOLs to publicize the findings with a focus on the need for cancer screenings. Relying on our...
KOLs, we created 12 videos, 4 advertorials, and conducted activities across social media, print, television, and online channels to engage the public, providers, and policymakers – which contributed to the issue becoming a priority of the national government and resulting in a 240% increase in cancer screenings.

In LATAM, we conducted a regional survey across Argentina, Chile, Colombia, Mexico, and Brazil, that provided local insights and relevant variations across countries to make the results more relevant for media. We also had survey analysis per franchise specialty that we included in toolkits for commercial teams to increase the value proposition of the sales force relationships with HCPs. We convened a webinar for professionals and administrators of the healthcare sector from all over Latin America, positioning a regional conversation among stakeholders and offered exclusive media interviews with J&J MedTech executives. In our main markets, we set up partnerships with KOLs like Dr. Drauzio Varela in Brazil and built advocates like a foreign member of the Panamerican Health Association Dr. Rubén Torres in Argentina and Chile. A social media campaign was also included in the plan.

In the U.S., we optimized our website for older patient populations, added new downloadable materials and developed a targeted SEO and social media campaign to reach this key audience to supplement ongoing earned media activities. A survey of the public gauging the reach of this effort found that 21 percent of the population was familiar with the My Health Can’t Wait campaign – of those, nearly a quarter visited the My Health Can’t Wait website and more than a fifth contacted their HCP. We also launched a localized effort in Chicago focused specifically on reaching Black and Hispanic communities, who have deferred care at higher rates throughout the pandemic. This included targeted outreach to 10 leading state legislators, including Illinois House Speaker Rep. Chris Welch – the first Black Speaker of Illinois – who filmed a personal video message on the importance of prioritizing health and Chair of the Illinois House Black Caucus Rep. Kam Buckner who published a piece in the Chicago Sun-Times. We generated more than 1,000 views of our custom landing page and reached a combined 4+ million people with campaign messaging through earned and paid media placements in English and Spanish. We also donated 5,000 J&J Consumer products to area churches and community groups paired with My Health Can’t Wait messaging.

Evaluation: With the key goals of raising awareness, developing and/or maintaining relationships with key third parties and driving patients to action, the metrics below demonstrate how we successfully met or exceeded each of these goals across all regions.

Reach & Action:
- U.S./Chicago: 10 million impressions, 4 million impressions in Chicago alone. The campaign drove awareness and drove patients to action (as measured by our global reputation intelligence system (GRIS) metrics) with 21% of the population saying they were familiar with the My Health Can’t Wait campaign – of those, nearly a quarter visited the My Health Can’t Wait website and more than a fifth contacted their HCP.
- Australia: 7 million impressions, India: 56.7 million impressions, Italy: 52 million impressions, LATAM: 136.3 million impressions
- Japan: 108 million impressions. The campaign drove patients to action with a 240% increase in cancer screenings as a result of our efforts.

Earned Media
- US: 9 placements | Australia: 148 placements | Italy: 498 placements | Japan: 429 placements | LATAM: 262 placements

Social/Digital—all metrics at or above benchmarks from 2020 campaign
- U.S.: 2021 Website Metrics: 22,656 page views | SEM Campaign (6/21-8/31): 299,513 impressions, 7,635 clicks, 2.5% CTR
- India: Reach: 29,553, Engagement: 1000, Impressions: 11,237
- Italy: 15,000 contacts reached (website unique visitors and JMD Italy LinkedIn views)
- LATAM: Reach: 48,556, 38,000 unique visitors to the website, 132 document downloads

Third Party Engagement—one of the key goals of the campaign was to establish and/or maintain relationships with key third parties. In all regions, these third parties helped lend credibility and additional voices to the My Health Can’t Wait rallying cry.
- U.S.: 10 elected officials engaged, including the first Black Speaker of Illinois
- Australia: 1 KOL, and 1 hospital engaged, India: 115 KOLs engaged, Italy: 10 scientific societies, 1 parliamentary association, 5 MPs, 5 patient organizations, 2 research institutions engaged, Japan: 15 KOLs engaged, LATAM: 2 KOLs (Brazil and Argentina); 1 Hospital (Colombia)

###