

Q4 OCT
NOV
DEC

2021 REPORT

STRONGMINDS®

Ending the depression epidemic in Africa

In 2021, we treated depression in more than 42,000 individuals, nearly doubling our pre-pandemic record.



@Karin Schermbrucker/Cartier Philanthropy

QUARTER HIGHLIGHTS

- 2021 was a record-setting year for StrongMinds. We treated depression in over 42,000 individuals, nearly doubling our pre-pandemic totals and far exceeding our annual target of 36,500. This is a huge achievement for us, bringing our cumulative number of patients treated to over 121,000.
- In a move to shift global leadership to Africa, StrongMinds has moved the position of Chief Operating Officer to Uganda, and created a new Global Leadership Team to guide future strategic growth. The US office will assume a supporting role for fundraising, communications and marketing, and finance.
- We adopted an ambitious new strategic plan. Over the next three years, we will treat 300,000 new patients and raise \$30 million to support programming and strategic growth.

StrongMinds treats depression using Group Interpersonal Psychotherapy (IPT-G), a simple, proven and cost-efficient community-based model that focuses on interpersonal communication as the root of--and source of recovery from--depression. IPT-G was first tested in Uganda by Johns Hopkins University in a randomized controlled trial in 2002 using lay community workers with only a high school education; it was found to be successful.

METRICS TO DATE



Met target



In progress



Did not meet target

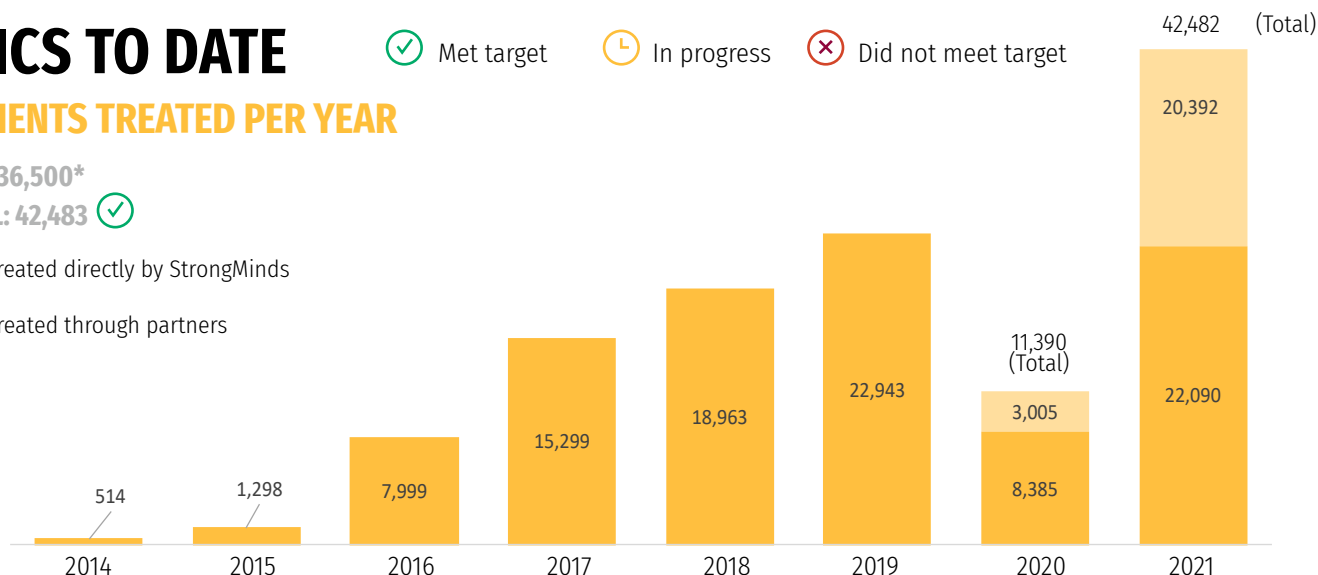
TOTAL CLIENTS TREATED PER YEAR

2021 GOAL: 36,500*

2021 ACTUAL: 42,483

Clients treated directly by StrongMinds

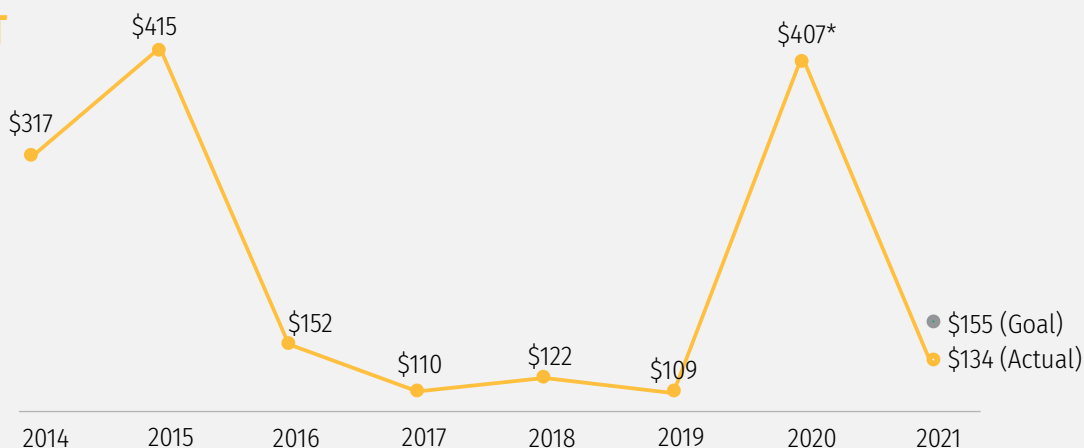
Clients treated through partners



COST-PER-PATIENT

2021 GOAL: \$155

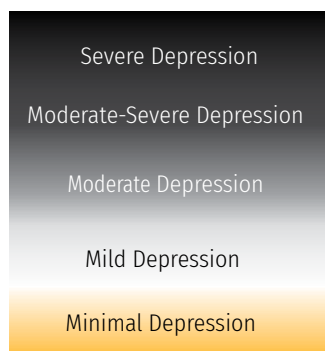
2021 ACTUAL: \$134



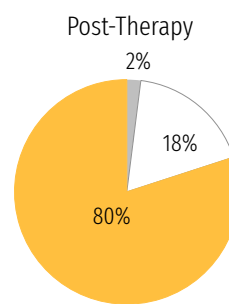
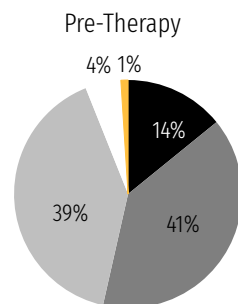
*Our pivot to teletherapy in response to COVID-19 resulted in start-up expenses that increased our per-patient delivery costs.

REDUCTION IN DEPRESSION SYMPTOMS*

PHQ-9 SCALE



Depression Score



(Average across all programs)

■ Severe ■ Moderate-Severe ■ Moderate □ Mild ■ Depression-Free

Therapy delivery method**	Goal***	Actual	% Depression-Free****
StrongMinds-led	-8 points	-13 points	86%
Peer-led	-8 points	-13 points	80%
Partner-led	-8 points	-12 points	76%

*Results based on most recent therapy cycle

**Teletherapy is incorporated into our StrongMinds-led and partner-led results

***A 4-point drop on the PHQ-9 is considered a clinically significant reduction in depression score in the US

****Depression-free is defined as achieving minimal depression on the PHQ-9



Technology is transforming our ability to train and support partners, and to mobilize and treat new clients.

IMPACT & DELIVERY

@Karin Schermbrucker/Cartier Philanthropy

A YEAR THAT EXCEEDED EXPECTATIONS

In 2021, we treated 42,482 individuals with depression, far exceeding our projections of 36,500 patients treated, and nearly doubling our highest pre-pandemic annual numbers.

We attribute much of this success to leveraging technology in new ways. Not only do we continue to provide teletherapy, technology now enables us to offer remote supervision and training to partners who provide in-person therapy. We have also expanded our mobilization efforts to include SMS, WhatsApp, radio ads, and paid social media posts. Together, these efforts have enabled us to substantially increase our ability to reach new patients. See more in the Key Learnings section below.

OUR THREE-YEAR OUTLOOK

In 2021, we completed our three-year high-level operating plan, which will focus on the following key areas:

Scaling our Impact

We aim to treat approximately 300,000 depression sufferers from 2022 to 2024, bringing our cumulative number of patients to over 400,000 people.

Simplifying Therapy Delivery and Measurement

We will formalize an Innovation Laboratory in Uganda—with dedicated staffing—to develop state-of-the-art methods to streamline and optimize our therapy delivery, rooted in data and science.

Embracing Technology as a Primary Scaling Tool

Building on our teletherapy model, we will continue integrating technology into our training and therapy delivery. This will enable us to rapidly reach new populations through partners and expand into new countries. In 2022, we will pilot a first-of-its-kind teletherapy call center based in either Uganda or Zambia that could eventually serve clients in multiple neighboring countries.

Reducing Costs-Per-Patient

We have significantly reduced our cost-per-patient (CPP) to \$134 in 2021. We will continue to aggressively drive down costs and ensure our approach to CPP measurement is world-class.

Expanding our Fundraising Capacity

StrongMinds seeks to raise \$30M over the 2022-2024 period, and will increase the number of larger, multi-year grant awards and growing foundation and individual giving.

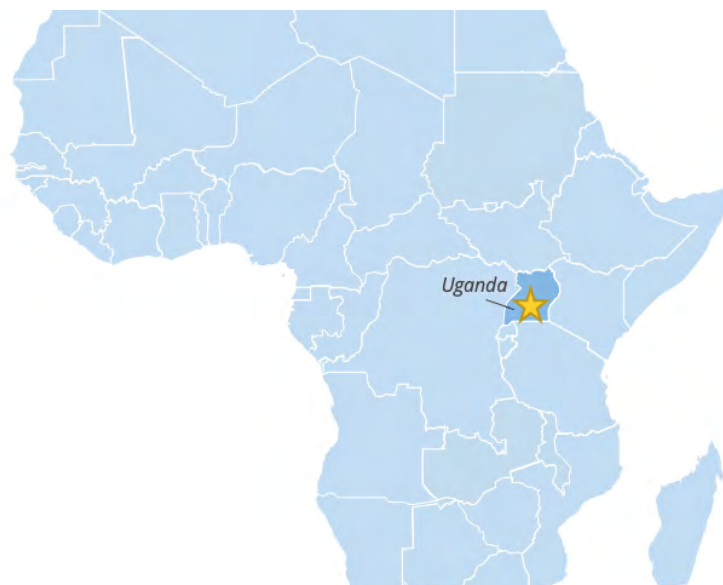
Establish StrongMinds as a Global Mental Health Thought Leader

We will strive to be recognized internationally as trusted providers and innovators in global mental health.

Pilot StrongMinds Therapy Groups in the United States

Building on our successes in Africa, we will pilot our model in the United States in 2022 to democratize access to mental health care among marginalized and underserved communities.

StrongMinds has moved its global headquarters to Uganda, which will serve as our center of leadership and innovation.



ORGANIZATIONAL DEVELOPMENT

SHIFTING LEADERSHIP FROM THE US TO AFRICA

StrongMinds is taking significant steps to shift global leadership positions to Africa, establishing a Global Leadership Team to drive strategic decision-making. The US office will provide fundraising, marketing, and administrative support for the organization.

As part of this move, Peter Okwi, former Director of StrongMinds Uganda, has been promoted to Chief Operating Officer. In this role, Peter oversees all global operations, including innovation, partnerships, technology, monitoring and evaluation, and human resources. His newly established office in Kampala will serve as our global hub for leadership and innovation.

Christina (Tina) Ntulo now takes the helm of StrongMinds Uganda, serving as our new Country Director. Tina, who previously served as our Deputy Country Director, brings her two decades of experience in clinical mental health to provide technical leadership on the implementation, quality, and reach of StrongMinds programs in Uganda.

To meet our \$30M fundraising target, Rasa Dawson, formerly Director of Development and Communications, has been promoted to Chief Development & Communications Officer, providing strategic leadership and integration of our global fundraising, marketing, and communications efforts.

Peter, Tina, and Rasa now serve on our new Global Leadership Team alongside Sean Mayberry (CEO), Kim Valente (CFO), and Frank Harle (Zambia Country Director).

The efficiencies created by this new structure will enable us to treat more individuals with depression in the years ahead.



KEY LEARNINGS

A new approach to delivering group therapy leverages technology to serve hard-to-reach populations through partners.

FUELING OUR WORK WITH TECHNOLOGY

Building on our successes scaling through teletherapy during the pandemic, StrongMinds has now integrated phone-based technology throughout our operations, enhancing our ability to identify and treat individuals with depression, even as in-person operations resume across Uganda and Zambia.

We continue to offer a pathway to depression screenings in Uganda through *252, a short-code phone number easily accessible to those with mobile access across the country, and through WhatsApp in Zambia. We utilize social media, radio ads, and media appearances to invite individuals to call into these numbers to receive mental health information or proceed to a 1:1 depression screening. Those who screen as depressed are invited to join a StrongMinds teletherapy group.

Where phone-based therapy is not appropriate, particularly in areas with sporadic access to electricity, poor telephone networks, and limited phone ownership, StrongMinds is now providing remote training, coaching, and supervision to volunteer Peer Facilitators. These volunteers, supported by technology, now treat thousands of clients with depression each year in remote and marginalized communities that we could not otherwise reach, including refugee populations.

Remote training and supervision methods have also fueled rapid growth in the number of clients we have treated through partnerships. In Uganda, we partnered with the Ministry of Health and local governments to train village health teams (VHT) to facilitate therapy groups on a volunteer basis – under StrongMinds supervision. VHT members are the foot soldiers of the Ugandan health system--volunteer community health workers who connect health services with community members in collaboration with local health center staff. This new hybrid model is similar to our Peer Therapy Group model, except that VHT group leaders may not have a lived experience of depression and have not participated in StrongMinds therapy. Ultimately, we treated depression in 12,123 individuals through government Village Health Team partners.

We credit this full-scale integration of technology into our operations for helping us surpass our 2021 goals for patients served, putting us on course to treat 300,000 individuals with depression over the next three years.



COMMUNICATIONS, FINANCE & FUNDRAISING

COMMUNICATIONS & MARKETING

Q4 MEDIA COVERAGE

Borgen, November 21, 2021

[Western Influence is Impacting Mental Healthcare in Uganda](#)

Vox, November 18, 2021

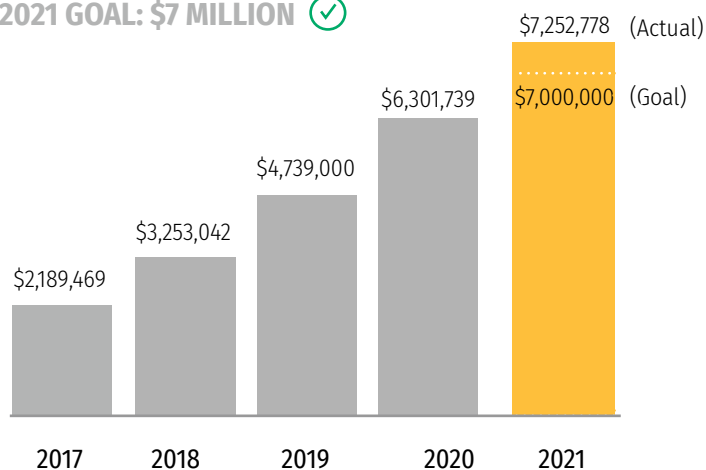
[Is Therapy Making the World Happier?](#)

United for Global Mental Health, October 2021

[Half a Million People in Sub-Saharan Africa Reached](#)

TOTAL FUNDS RAISED

2021 GOAL: \$7 MILLION ✓



*Funds received through Q4 against 2021 goal

FINANCE

We have completed all 2020 audits without findings.

View our [2020 audited financial statements](#).

View our [latest quarterly financial statements](#).

GLOSSARY OF KEY TERMS

STG: StrongMinds-led Therapy Group

PTG: Peer-led Therapy Group (led by volunteer former clients)

MHF: Mental Health Facilitator

IPT-G: Group Interpersonal Therapy

MOH: Ministry of Health

PHQ-9: Patient Health Questionnaire (for depression)

GAD-7: Generalized Anxiety Disorder Scale

CONTRIBUTIONS & EXPENSES ✓

