COVID-19 RESPONSE

QUARTER HIGHLIGHTS

• In March, the global pandemic forced StrongMinds to suspend in-person group therapy to keep our staff and patients safe. In response, we are increasing our range of mental health services in Uganda and Zambia to serve those impacted by COVID-19.

• To date, the StrongMinds team has interviewed over 11,000 current and former patients by phone to provide emotional support and to understand the impact of the COVID-19 crisis on their mental health.

• From these learnings, we are expanding our basket of mental health services beyond depression to include anxiety and acute stress.

• We are creating a phone-based therapy model to deliver mental health support remotely. This teletherapy curriculum is currently under intense development and will begin pilot operations by mid-June.

• We are excited to increase our impact in ways we never would have dreamed possible in pre-pandemic "business-as-usual" mode, and reach many more people than previously imagined.
COST PER PATIENT*

<table>
<thead>
<tr>
<th>Year</th>
<th>STG</th>
<th>PTG</th>
<th>Partner-led</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td>8,233</td>
<td>7,999</td>
<td>234</td>
</tr>
<tr>
<td>2017</td>
<td>15,299</td>
<td>12,229</td>
<td>3,000</td>
</tr>
<tr>
<td>2018</td>
<td>18,963</td>
<td>12,998</td>
<td>5,965</td>
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<tr>
<td>2019*</td>
<td>15,829</td>
<td>5,783</td>
<td>1,331</td>
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**AVERAGE REDUCTION IN DEPRESSION**

**STG GOAL:** -12 points
**PTG GOAL:** -10 points

<table>
<thead>
<tr>
<th>Depression Level</th>
<th>STG</th>
<th>PTG</th>
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<tbody>
<tr>
<td>Severe Depression</td>
<td>20-27</td>
<td>-13 POINTS</td>
</tr>
<tr>
<td>Mod-Severe Depression</td>
<td>15-19</td>
<td></td>
</tr>
<tr>
<td>Moderate Depression</td>
<td>10-14</td>
<td></td>
</tr>
<tr>
<td>Mild Depression</td>
<td>5-9</td>
<td></td>
</tr>
<tr>
<td>Minimal Depression</td>
<td>0-4</td>
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</table>

**COVID-19 RESPONSE**

Due to the interruption of group therapy in Q1, we are revising our metrics page to reflect our new areas of work. In Q2, we will begin reporting on:

- Number of women treated for depression, stress, and anxiety through teletherapy
- Depression-free rates and average reduction in depression for women treated through teletherapy
- Number of people reached through psychoeducational messaging

*Numbers represent adult women treated in Uganda, excluding refugees and adolescents.

*Based on the PHQ-9 Depression Screening Tool
**-4 points considered clinically significant reduction in depression score in US

*Pie charts illustrate a breakdown of depression-free scores for STG Cycle 3 in Uganda, which runs from September through December.
IMPACT & DELIVERY

OUR COVID-19 RESPONSE

While COVID-19 has temporarily inhibited our ability to conduct in-person group therapy, mental health support is needed in Uganda and Zambia now more than ever. StrongMinds has committed to the following:

**Phone screening:** Our team of Mental Health Facilitators (MHFs) is currently reaching out to former clients to offer advice and guidance, and to collect critical baseline data to assess the mental stressors these at-risk individuals are experiencing as a result of COVID-19. Results of these screenings are detailed in the Key Learnings section.

**Teletherapy:** We are adapting our in-person group therapy to provide remote group interpersonal therapy (IPT-G). Through this model, individuals will join an MHF in groups of five to meet by phone twice a week for five weeks to address mental health conditions triggered by COVID-19, including depression, anxiety, and acute and/or persistent stress. The program will serve both existing patients (identified through phone outreach) and new patients (identified through public education/outreach and partner referrals), who meet threshold symptom levels for depression, anxiety, and/or stress. The first cycle of teletherapy is expected to begin in mid-June.

**Mental Health Hotline:** In Zambia, StrongMinds has partnered with the Psychological Association of Zambia and a number of local NGOs on the Wellbeing and Mental Health Alliance Lifeline hotline. StrongMinds will train hotline staff to use a baseline screening tool to identify individuals suffering from particular mental health distress (depression, anxiety, stress). Those who meet threshold depression/anxiety symptom levels will be referred to StrongMinds for further support and teletherapy.

**Public Mental Health Awareness Campaign:** Given the lack of widely available, reliable mental health information in Uganda and Zambia, we have launched a multimedia psychoeducation campaign to promote emotional literacy and healthy coping skills to the general public. The campaign consists of five animated videos, radio ads, social media messages, and print assets distributed through paid and earned media, as well as in partnership with the Ugandan and Zambian Ministries of Health (MOH). The campaign will invite those struggling with acute stress, anxiety, and depression to engage with our mobile-based mental health resources, with the potential for mental health assessment and invitation to join a teletherapy group.
Supporting Staff and Volunteers During the Pandemic
Beginning in mid-March, all 150+ staff in Uganda, Zambia, and the US began working from home and will continue to do so for the foreseeable future. We are providing comprehensive support to our staff, including safety briefings, mental health support, and technology upgrades. StrongMinds remains at full employment levels as we re-focus our teams on supporting our new mental health initiatives during this pandemic period. To alleviate food insecurity resulting from COVID-19, we disbursed an emergency relief package to 275 StrongMinds volunteer Peer Facilitators.

Fundraising for COVID-19 Response
We are grateful to our supporters and partners for providing steadfast funding and strategic guidance during this time of accelerated innovation. Due to increased COVID-related expenses, we continue to search and apply for new funding opportunities for COVID-related response.

New Staff
Hanna Baldwin joined us as our new Partnerships Director, bringing 20 years in public of experience in public health, primarily with Population Services International country programs. Hanna has developed and led projects and partnerships, introduced new technical areas, developed systems, and managed organizational change. She has an MSc in Economics from the Turku School of Economics and Business Administration from Turku, Finland and has lived in East Africa with her family for more than 15 years.

New Board Members
Rehmah Kasule is a senior fellow at the Harvard Advanced Leadership Institute (ALI) and the founder and former president of the Ugandan non-profit Century Entrepreneurship Development. She brings to StrongMinds expertise in gender, youth empowerment, and enterprise development.

Paul Watford is a senior financial executive whose background includes manufacturing, utilities, transportation, real estate, and not-for-profit experience. Paul brings us his expertise in financial reporting and analysis, auditing, and management presentation, human resources, compliance, and controls.
Many of the triggers of depression are magnified during COVID-19.

KEY LEARNINGS

COVID-19 MENTAL HEALTH CONCERNS

To better understand the mental health needs of communities in Uganda and Zambia, we immediately turned to our pool of 70,000 former clients to learn how they are coping. To date, we have reached and administered a phone-based general health and wellness questionnaire (GHQ) to 11,000 women. Of those assessed, 3,300 (or 30%) demonstrated mental health distress. We suspect the need is much higher in populations that have not received treatment from StrongMinds. In May, the UN released a policy brief citing the severe psychological distress that COVID-19 is causing globally. Our data support these results - that the pandemic is triggering an increase in depression, anxiety, acute stress, gender-based violence, and suicidality. These varied mental health challenges are driving us to expand therapy services and deploy a rapid-response and referral system for those at greatest risk.

On the positive side, these interviews have also revealed that 100% of those assessed are currently using coping strategies they learned in StrongMinds therapy groups. This is an important indication of the lasting impact our therapy has on former group members and their ability to continue to draw from their experience in a past group to help them cope with the situation now.

Early results of our baseline assessment show the impact the pandemic has had on our former clients:

- 68% of respondents have lost their jobs and/or income due to the pandemic.
- 80% of households are eating two or fewer meals per day.

**In Uganda:**
- 27% are experiencing general distress/dysfunction according to GHQ assessment tool.
- 75% are experiencing food insecurity (80% consuming two or fewer meals).
- 25% are experiencing one or more triggers of depression surrounding violence and safety.
- 79% report these triggers are recent due to COVID, flooding, and locusts.

**In Zambia:**
- 19% are experiencing general distress/dysfunction according to GHQ assessment tool.
- 80% are reporting food insecurity (70% say two or fewer meals per day).
- 35% experiencing at least one trigger of depression, and 61% say the trigger is recent.
COMMUNICATIONS & MARKETING

In January, StrongMinds was thrilled to be the feature of a 23-minute BBC World Service radio piece, entitled “Fighting Depression Together.” The show also included an accompanying short video that was published in March.

Sean Mayberry was also featured on the Great.com podcast: Great.com Talks to StrongMinds.

The Bernard van Leer Five published a piece on Medium: Five ways health and social services can support babies, toddlers and the people who care for them through the Covid-19 pandemic. The piece featured StrongMinds’ work providing phone-based mental health check-ins and support throughout Uganda and Zambia in the wake of the COVID-10 lockdown.

FINANCE

To view our latest financial statements, click here.

COMMUNICATIONS & FINANCE

TOTAL FUNDS RAISED

2020 GOAL: $5.5 MILLION

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<th>2017</th>
<th>2018</th>
<th>2019</th>
<th>2020</th>
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*Funds received through Q1 against 2020 goal

CONTRIBUTIONS & EXPENSES

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<th>2020 YTD Q1</th>
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<table>
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<tr>
<th></th>
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<td>$887,865</td>
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