



Improving outcomes in Latinas with high-risk pregnancies

Contact: adriana.soto@mindplus.io

Problem

40%

Maternal deaths surged in 🇺🇸 to the highest rate in nearly 60 years, rising by 40% in 2021.


2.6

Black and brown mothers experience 2.6 times more maternal deaths.

26B

Maternal health crisis costs the U.S. economy \$26 billion.

U.S. is the most dangerous place among high-income countries to give birth.



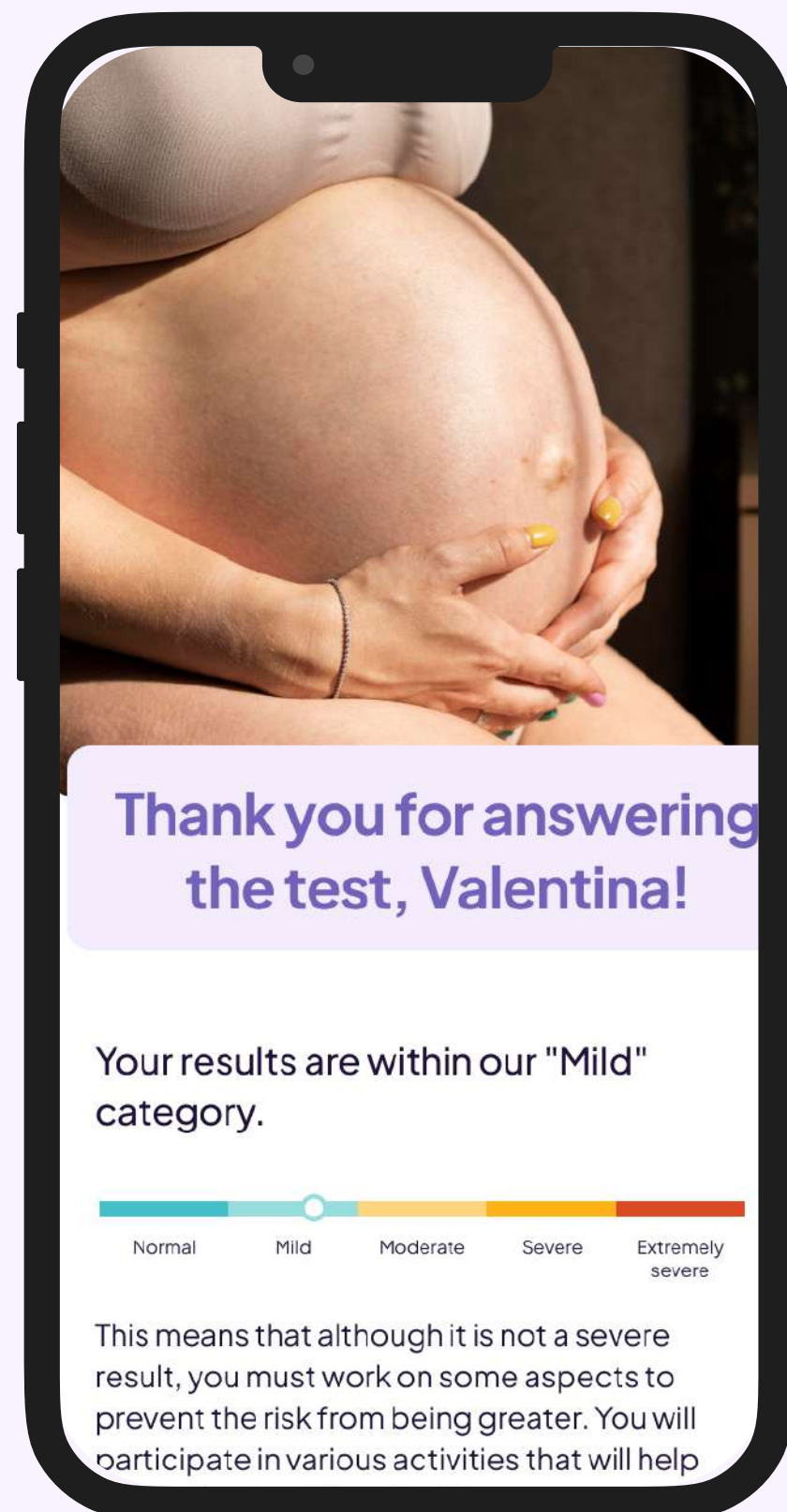
**Evidence-based
tele-health
emotional and
behavioral
support to
improve
outcomes among
Latin women with
high-risk
pregnancies**

3.

We offer support in motherhood journey

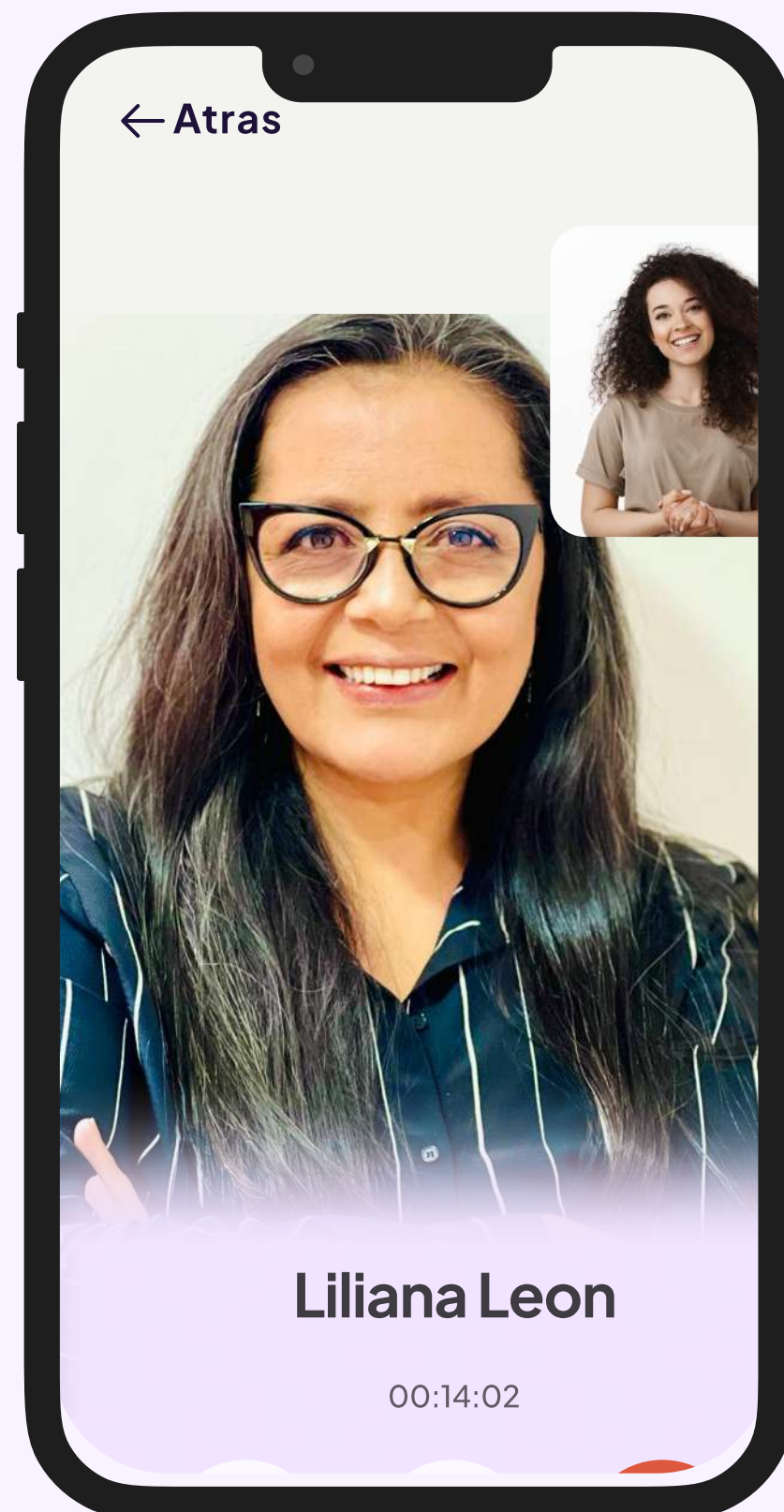
1

Identify the baseline.



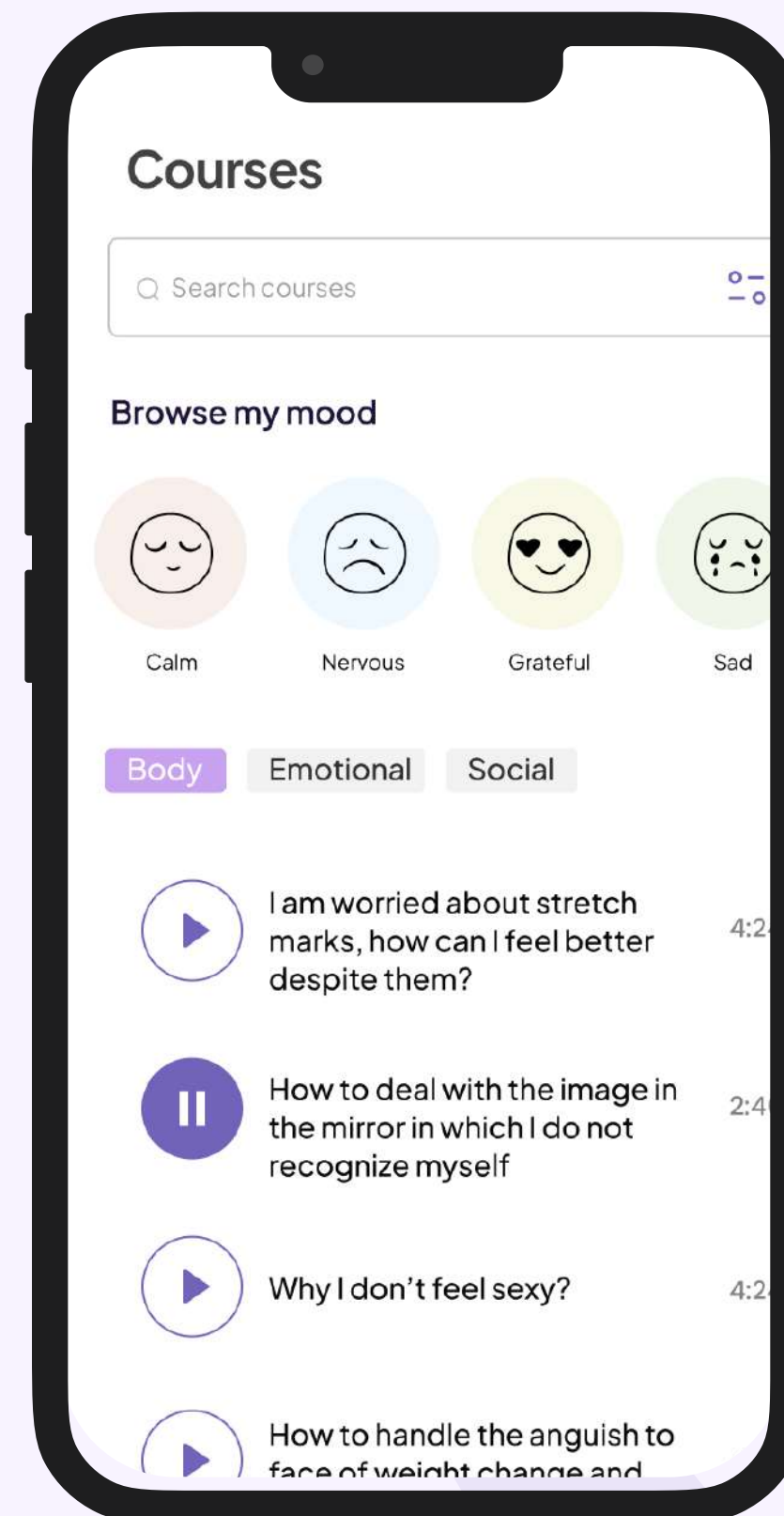
2

1:1 approach
Expert advice



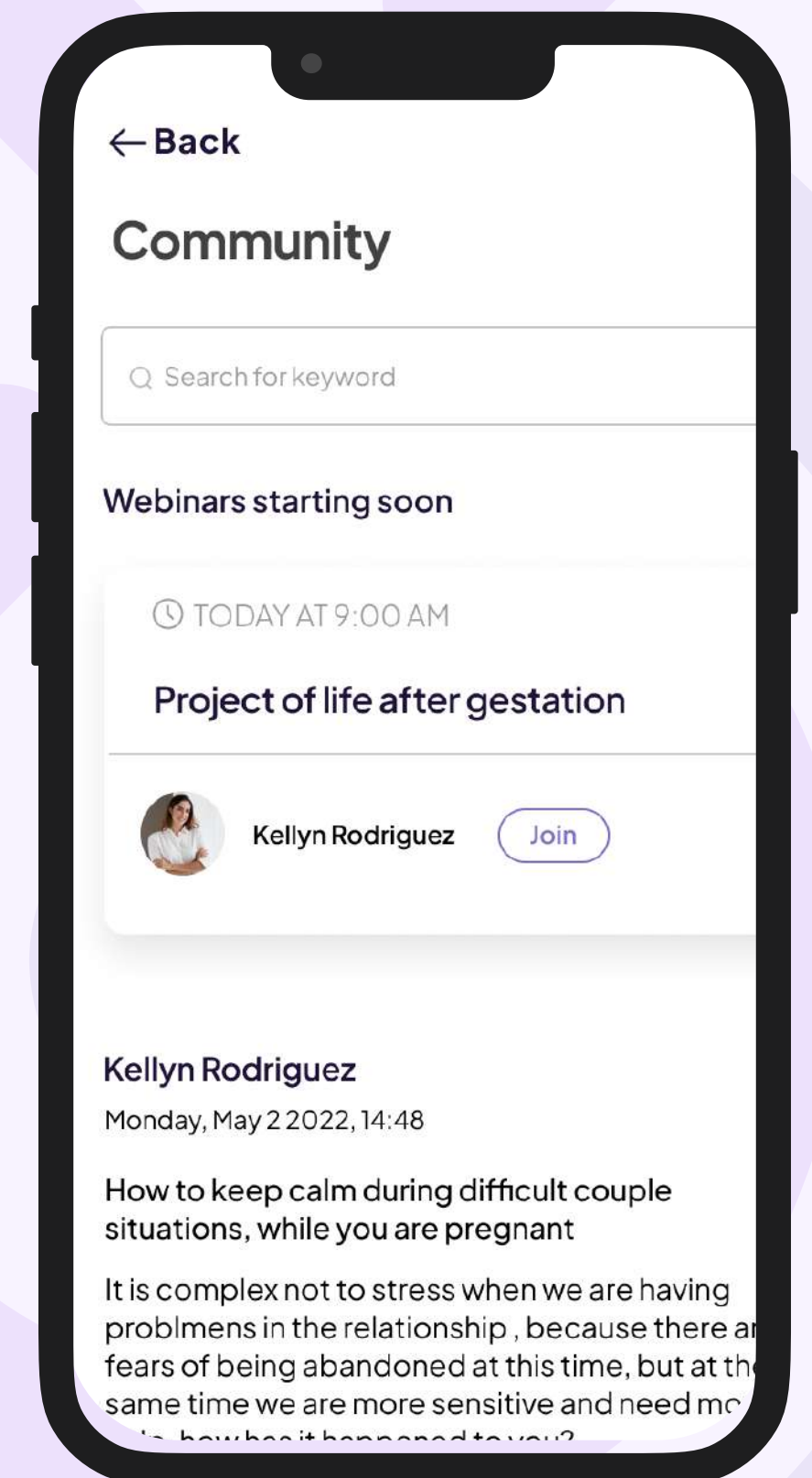
3

Self-guided tools



4

Community support



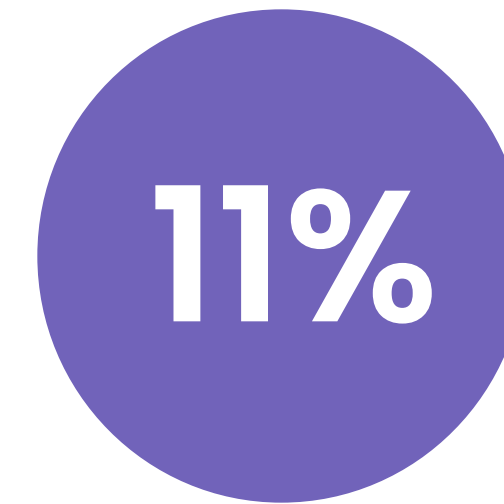
5.

Clinical pilot results

With over 200 high-risk pregnant hispanic women



Mothers experience fewer days of hospitalization



fewer women had a caesarean section



Extra weeks in gestation

67% Fewer women with possible postpartum depression | 6% Less babies with under weight
3X Reduction in perinatal deaths | 4X Reduction in miscarriages

We have the potential to unlock a 30% reduction in healthcare expenditure costs.

Business Model

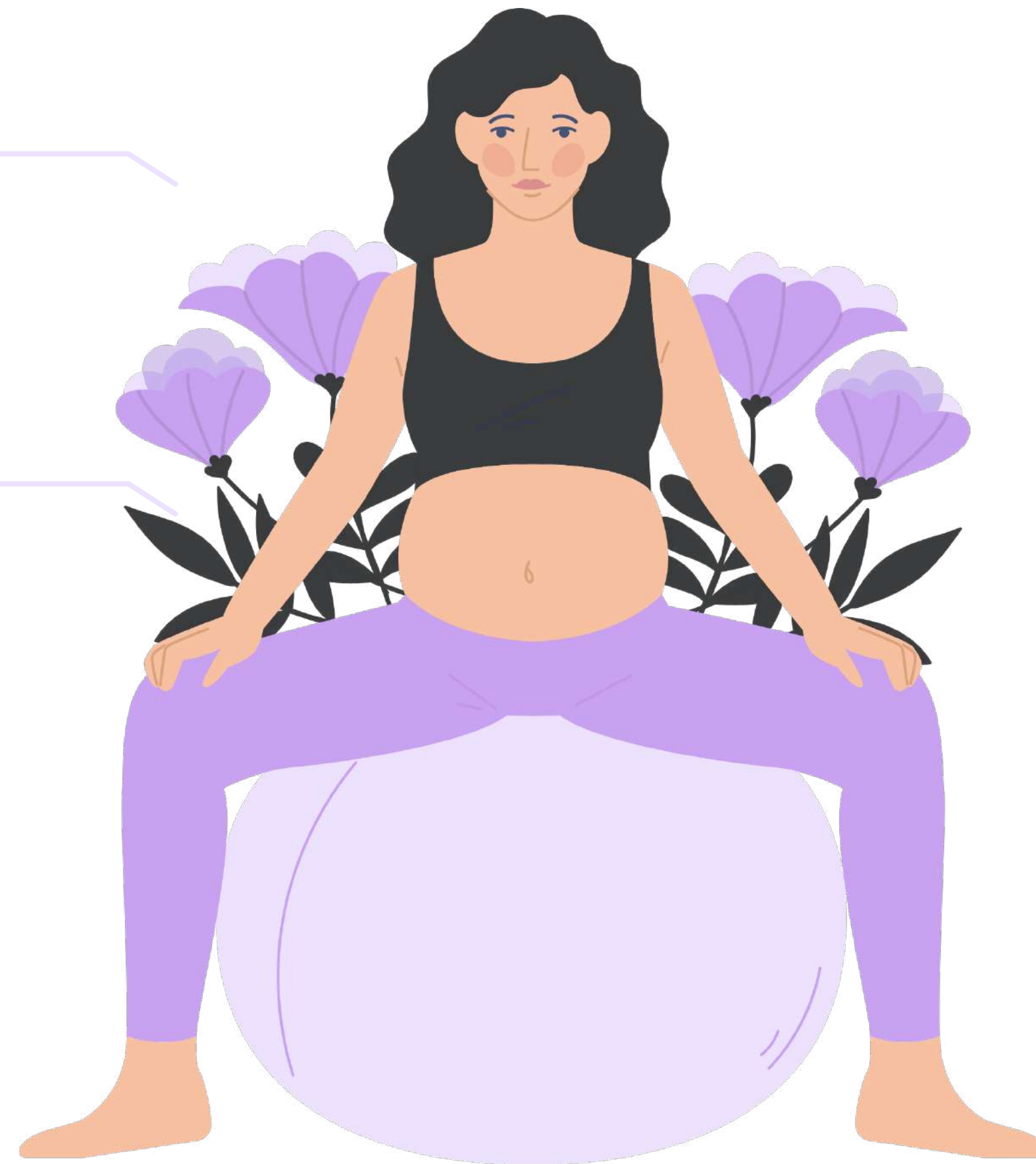
Subscription Model

B2B

- Direct to Business

B2G

- Direct to Government



- **Insurance companies**

To reduce cost and improve health outcomes

- **Non-profits**

For benefit a specific population

- **Companies**

As a benefit program for their employees.

- **Cities, local governments**

To support the community

Market Size

According to CDC, about 10% of pregnancies in the United States are considered high-risk

TAM



SAM



SOM



25% of babies born in the USA are Latinos*.

7.

*The largest percentage increase for NICU admissions in the U.S, was observed among Hispanic infants (51.4%) compared to white (29.1%) and black (32.4%) infants.

Early Traction

81%

Engagement

19%

Churn

64%

Compliance

50%

Adherence



We work with the 2nd largest healthcare insurance company in Colombia



Current pipeline

\$405k

Annually

Clients



B2B2C

Alliances, pilots and self-pay users



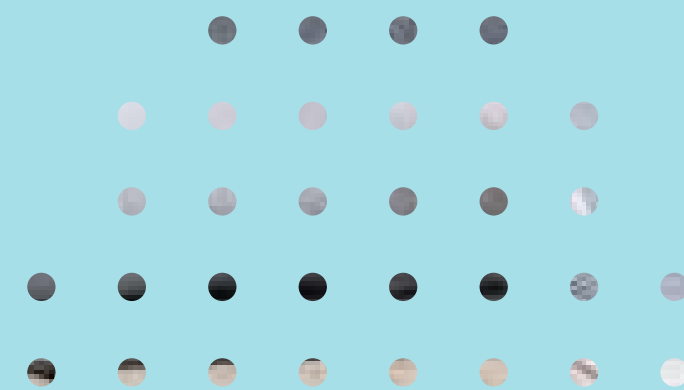
Market validation

We had clients B2C and alliances with non-profits for our first users.

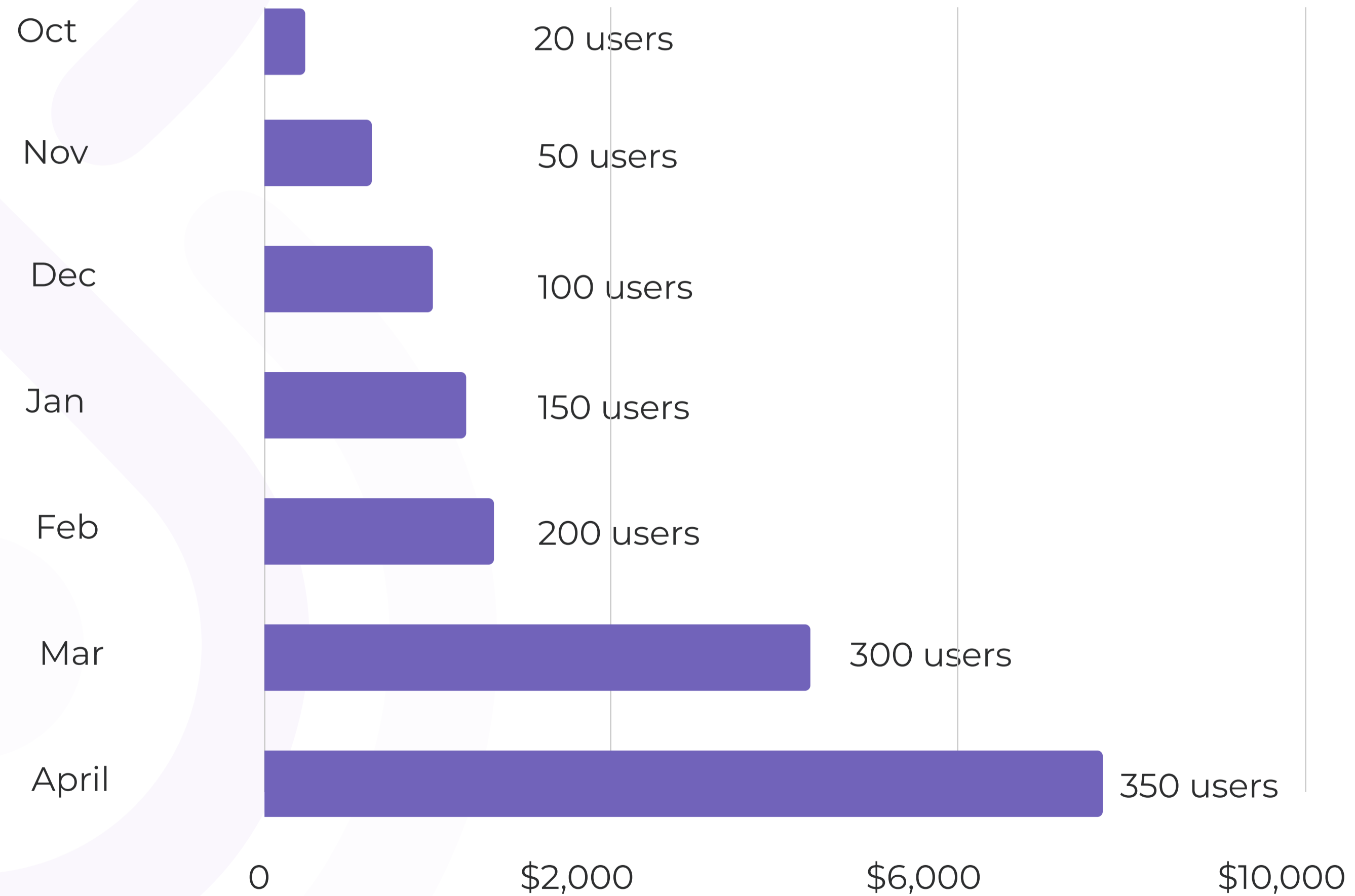
📍 Miami, Bogotá and Cali.

350

TOTAL USERS



Month-over-month growth



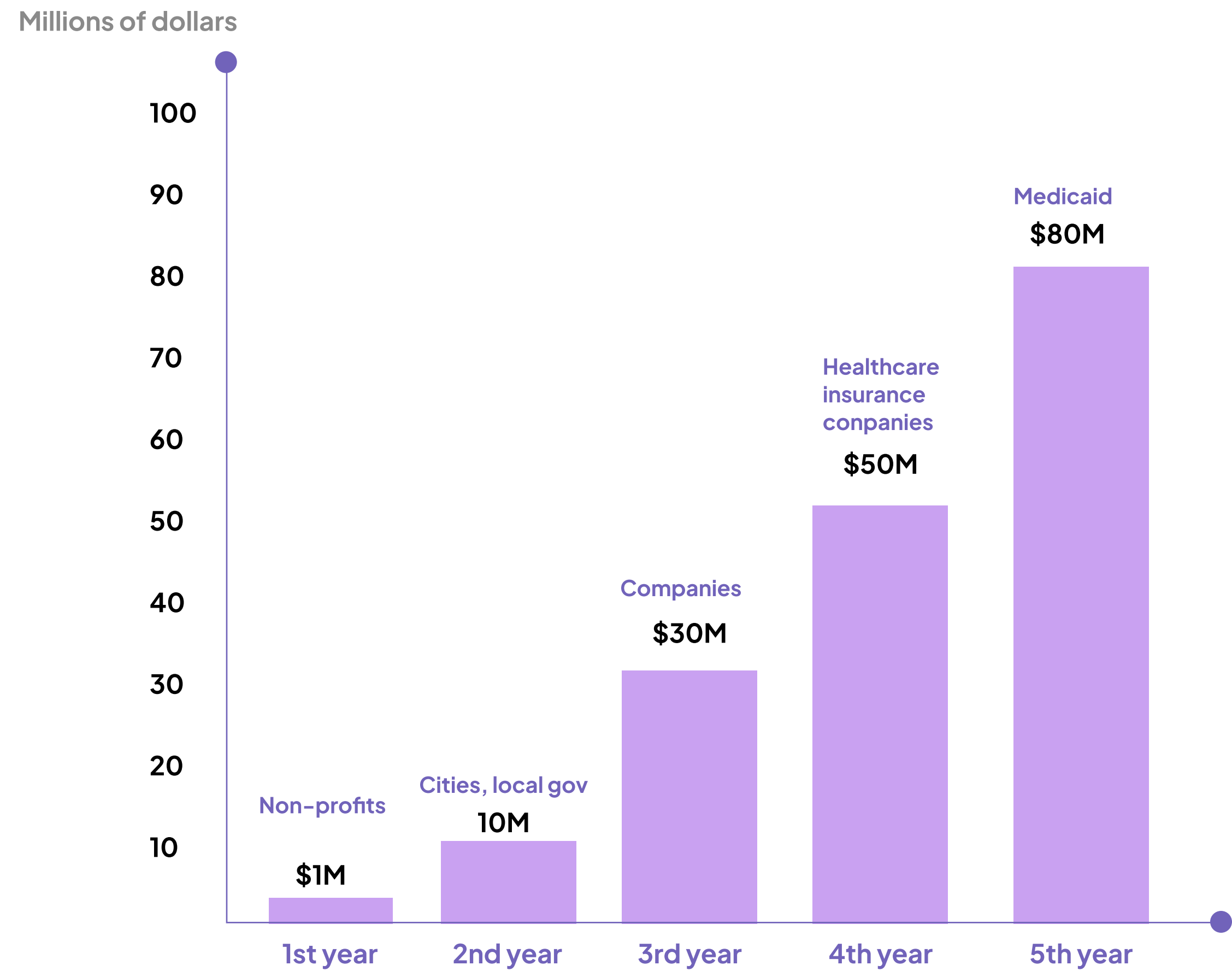
Compounding
Monthly Growth
Rate (CMGR)

77%

Total users

350

Revenue Projections



Go to market

B2B2G

 Direct sales

 Pilots

 Event Marketing



Strategic Alliances



Channel Partnerships:



Content Creation

13.

Our team

Development team



Ishtiaq Ahmed

IT management executive.
Computer science expert.
Over 18 years of experience in IT.
Incepta solutions creator (One of the most innovative companies in Canada)



Valentina Galvis

Over 3 years of experience
UX designer

Clinical and research team



Alena Prikhidko

Assistant Professor at Florida International University
Clinical Psychologist, MFT, PHD.



Herman Bonilla

Over 5 years of experience in
sales and marketing.

CEO



Adriana Soto Ospina

15 years experience in private practice as a clinician.
Over 8 years working in telehealth solutions.
Serial founder
Clinical psychologist, Occupational therapist and MBA.





Operations team



Kellyn Rodriguez

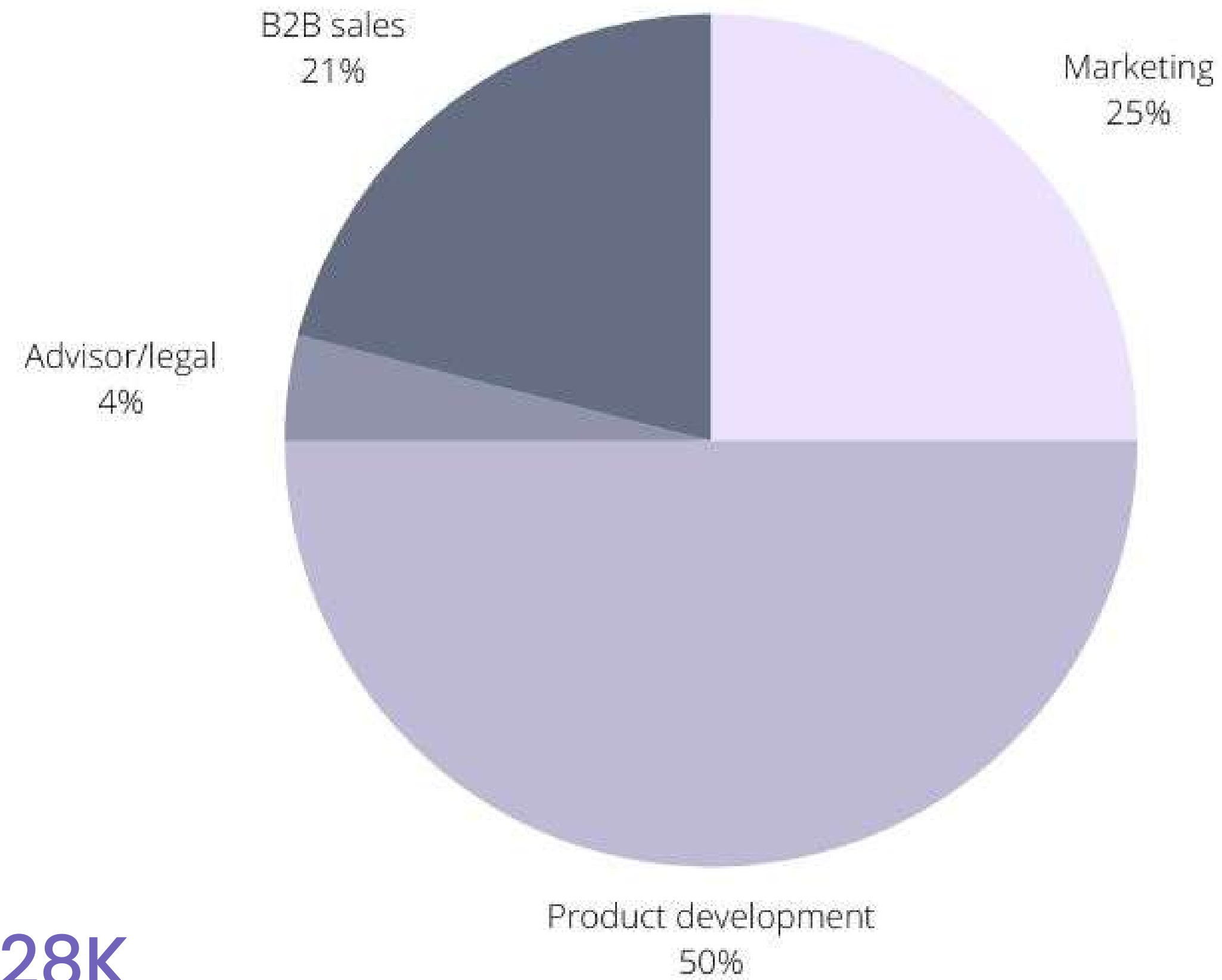
Over 5 years of experience in mental health startups.
Psychologist

Competitor analysis

| Services | |  Mind+ |  Expectful |  Mammha |  oviahealth™ |
|---------------------|---------------------------------|---|---|--|---|
| Assessment | Screening test | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| | Algorithms to classify the risk | <input checked="" type="checkbox"/> | | | |
| Cultural Competence | Specialized Latino background | <input checked="" type="checkbox"/> | | | |
| 1:1 Services | 1:1 coaching | <input checked="" type="checkbox"/> | Ads on | | <input checked="" type="checkbox"/> |
| | Telechats | <input checked="" type="checkbox"/> | | | |
| On Demand Content | Courses | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> |
| | Blog | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| | Mothers shared stories | <input checked="" type="checkbox"/> | | | |
| Peers Activities | Forums | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| | Support groups | <input checked="" type="checkbox"/> | | | |
| Life Events | Webinars | <input checked="" type="checkbox"/> | | | |

Investment Round

Pre-seed round
\$250K USD



Investment Tickets
From **50K**

Raised to date: \$28K

**No mother should face motherhood
alone, especially in underserved
communities.**

Contact: adriana.soto@mindplus.io

www.mindplus.io

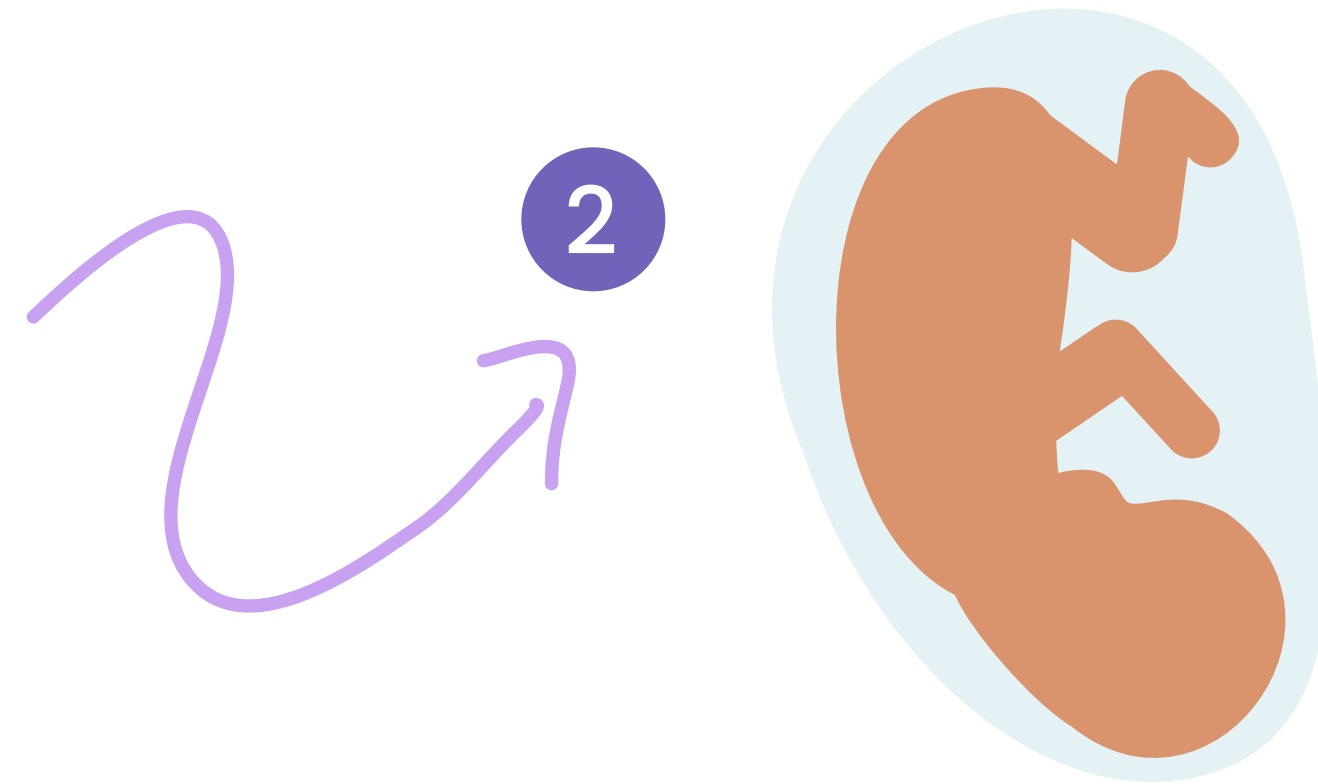
SCAN ME



How stress increases the risk to have premature labor*



1 High levels of stress produces **cortisol + cytokines.**



2 Transplacental transport to the fetus. Enters the fetal circulation. Induced effects on placental physiology, affecting the thymus, that has **effects on the inflammatory immune response.**



3 Exposure to glucocorticoids in utero due to maternal psychosocial stress during pregnancy, may program immune function of the developing organism, resulting in **life-long alterations.**

- Performance in school
- Ability to work
- Immune system
- Emotional Integrity