STRESS CLINIC UGANDA | GULU, NORTHERN UGANDA

ANNUAL REPORT

2025

Community Mental Health. Inclusion. Resilience.
Building a World Without Limitation on One's Potential



A community mental health session, Northern Uganda, 2025

2,310	2	5	54	113%
people reached	districts	schools	volunteers	of targets achieved

3 SDG	4 SDG	10 SDG
Good Health & Well-Being	Quality Education	Reduced Inequalities

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SECTION 01

Executive Summary

2025: Growing a Community-Led Mental Health Movement

2025 was a defining year for Stress Clinic Uganda (SCU). We entered the year as a growing community-led organization in Northern Uganda and emerged with stronger programmes, deeper partnerships, a wider geographic footprint, and a clearer pathway toward institutional growth.

Although the guns fell silent years ago, many people in Northern Uganda continue to live with the psychological consequences of conflict, poverty, displacement, and unresolved trauma -- yet access to affordable, appropriate, community-based mental health support remains limited. Stress Clinic Uganda exists to help close that gap.

540
young people reached (MindPower)

230
community members reached (RESET)

240
women reached (Digital Mental Health)

210 / 120 / 15
children / parents / teachers (ADILE)

76
women supported (Suicide Prevention)

57
men engaged (M-POWER)

Building an Institution, Not Just Projects

A US$31,000 partnership sub-grant with The Recreational Project for MindPower; a new partnership with Ibara Learn to launch ADILE; free office and activity space through Elephant Commons; a formal MOU with Lamwo Local Government; renewed Gulu City Authority permit; filed URSB and tax returns; and the beginning of partnership discussions with the Parliament of Uganda, formalized via MOU in early 2026.

2025 in One Sentence

2025 was the year Stress Clinic Uganda moved from building programmes to building an institution capable of taking those programmes further.

SECTION 02

Message from the Executive Director

A Year of Growth, Courage, and Collective Belief

When I look back at 2025, I do not simply see another year of programme implementation. I see a year in which I watched Stress Clinic Uganda grow, and begin to attract partnerships that once seemed far beyond our reach. I also see something more important: communities beginning to believe that healing is possible.

The gun may be silent, but the mind can remain at war. Years of conflict, displacement, poverty, loss, and unresolved trauma continue to shape how people experience themselves and their communities -- yet access to tailored, affordable, community-led mental health services remains extremely limited. Stress Clinic Uganda exists because we believe this cannot be accepted as normal.

In 2025, we reached 2,310 people across two districts and five schools. We saw young people speak more openly about their mental health. We supported women facing profound emotional distress, including through our suicide prevention work. We created spaces for men to talk about wellbeing, closing the year with a Mega Men's Day Out celebrating connection and positive masculinity. And we launched ADILE, our work on access to diagnosis and inclusive learning -- addressing a challenge still poorly understood and significantly underserved in Northern Uganda.

Perhaps one of the most meaningful developments for me personally was seeing our work extend beyond Gulu into Lamwo, while strengthening relationships with local government. We secured valuable in-kind support, including office and activity space -- proof that partnership is not always about money; sometimes it is about people believing enough in the mission to open doors. I was also honoured to take on a global mental health leadership role representing Africa, a platform to ensure communities like ours are represented in global conversations.

None of this happened because we had unlimited resources -- quite the opposite. We worked with limited funding, a lean team, and a heavy reliance on volunteers and community goodwill. Some programmes, including our livelihoods work, remained largely dormant. These limitations remind us that good ideas alone are not enough -- community-led solutions need patient, flexible, sustained investment. But 2025 also reminded me of what becomes possible when people believe: our communities, young people, parents, teachers, government partners, volunteers, and donors.

Martin Opiyo

Founder and Executive Director, Stress Clinic Uganda

SECTION 03

Who We Are

Our vision, mission, and approach

Vision

A World Without Limitation on One's Potential. We envision a world where mental health challenges, social circumstances, disability, or adversity do not prevent people from realizing their potential.

Mission

To promote community-led mental health, psychosocial wellbeing, inclusion, and resilience by connecting people to the knowledge, support, opportunities, and systems they need to thrive.

Our Approach

SCU believes mental health cannot be separated from the realities in which people live. For communities in Northern Uganda, emotional and psychological wellbeing is shaped by poverty, unemployment, conflict-related trauma, family breakdown, gender-based violence, social isolation, substance use, educational exclusion, and limited access to appropriate services. Our response therefore goes beyond treating symptoms: we work to help people understand their mental health, seek help early, receive appropriate support, build resilience, and participate fully in their communities.

Who We Work With

Young people, women, men, children, parents, teachers, community leaders, volunteers, government, and other institutions -- developing practical, locally relevant responses to mental health and social challenges.



Community Engagement in Practice

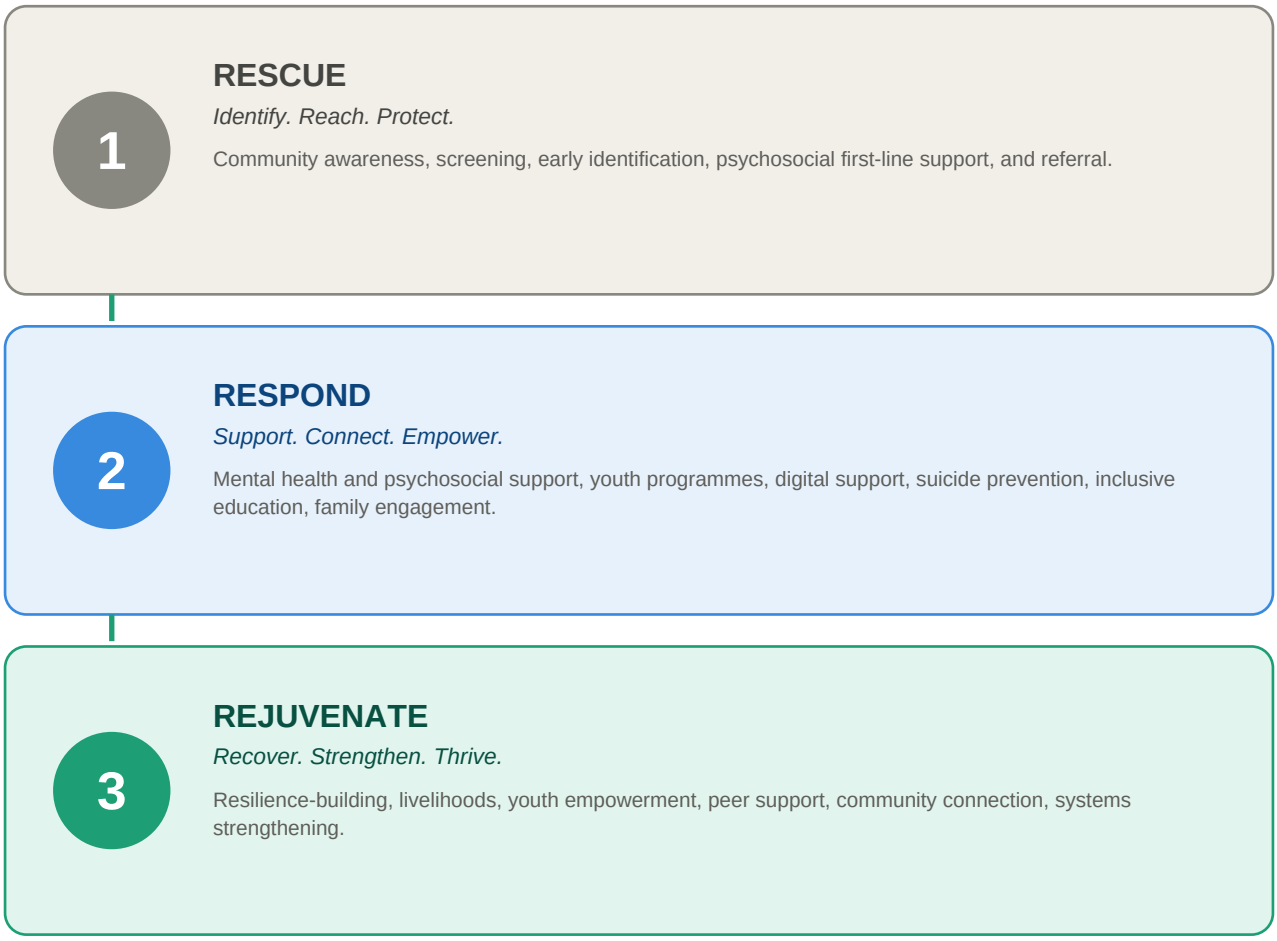
An entrance meeting with teachers at a partner primary school

SECTION 04

Our Theory of Change

RESCUE → RESPOND → REJUVENATE → THRIVE

If communities have access to relevant mental health information, early identification, psychosocial support, inclusive education, referral pathways, and opportunities to build resilience, and if families, schools, community actors, government, and institutions have the knowledge and capacity to respond, then people experiencing psychological distress, exclusion, or vulnerability will be more likely to receive timely support, remain connected to their communities, participate in education and livelihoods, and build healthier and more resilient lives.



Ultimately, SCU contributes to communities where mental health is understood, support is accessible, inclusion is strengthened, and people realize their potential.

SECTION 05

Programme Pillars & Core Values

How our work is organized

01 **Mental Health & Psychosocial Support**

Expanding access to practical, community-based mental health support, with attention to people facing barriers to conventional services.

02 **Inclusive Education & Child Development**

Ensuring children with developmental, learning, or behavioural challenges are identified earlier and supported to participate fully in education. Flagship: ADILE.

03 **Community Recovery & Resilience**

Linking psychological wellbeing with household and community resilience -- economic empowerment, livelihoods, savings, climate resilience, and social connection.

04 **Advocacy & Systems Change**

Working with government, institutions, and networks to strengthen mental health systems and bring community voices into policy decisions.

Our Core Values

Community Ownership

Solutions should be shaped with communities, not simply delivered to them.

Dignity

Every person deserves to be treated with respect regardless of their circumstances.

Inclusion

No one should be excluded because of mental health, disability, gender, age, or circumstance.

Evidence & Learning

We continuously learn from our programmes and evidence to improve what we do.

Integrity

We seek to be transparent, accountable, and responsible with the trust entrusted to us.

Innovation

We explore practical new approaches, including digital tools, to address persistent gaps.

Collaboration

The challenges we address are too complex for one organization alone.

SECTION 06

2025 At a Glance

A year of reaching people, building trust, and opening doors

2025 was a year of significant growth. We expanded our community reach, strengthened our programme portfolio, entered new partnerships, and laid foundations for the next phase of our work.

2,310
People Reached

2
Districts (Gulu & Lamwo)

5
Schools Reached

54
Volunteers

11
Board Members

5
Staff Members

2025 Programme Reach

PROGRAMME	2025 REACH
MindPower Youth Program	540
RESET Community Program	230
Women's Digital Mental Health	240
ADILE — children reached	210
ADILE — parents reached	120
ADILE — teachers reached	15
Suicide Prevention & Mental Health Support	76
M-POWER Men's Programme	57

SECTION 07

2025 In Photos

Moments from the field



M-POWER: Mega Men's Day Out

Men celebrating connection, wellbeing, and positive masculinity



Community Champions Training

The ED awards a certificate after the 3-month suicide prevention training



Stress Free Club in Session

A young person shares during a peer-led talk-show session



Reaching Students in Schools

Engaging students at a school event in Gulu



Celebrating Community Champions

Newly certified volunteers celebrating their achievement



Partnership Engagement

SCU leadership in conversation with a visiting partner

SECTION 08

Programme Highlights

Mental Health & Psychosocial Support

MindPower Youth Program

540 young people

Brings mental health promotion and psychosocial support into schools and communities -- awareness, stress management, resilience, peer connection, help-seeking, and suicide prevention awareness. Implemented with a US$31,000 sub-grant from The Recreational Project.

RESET Community Program

230 community members

Two community awareness sessions creating space to discuss mental health, family life, and everyday stress openly -- making mental health a community conversation rather than a hidden problem.

Women's Digital Mental Health

240 women

Digital platforms extending mental health information and psychosocial engagement to women facing practical, social, or geographic barriers to conventional services.

Suicide Prevention & Mental Health Support

76 women supported

Targeted psychosocial support for women experiencing significant emotional and psychological challenges, through early support, human connection, awareness, and referral.

M-POWER Men's Programme

57 men

Creating space for men to talk about wellbeing and vulnerability, culminating in a Mega Men's Day Out celebrating connection and positive masculinity.



Community Mental Health Engagement

A community awareness session bringing mental health conversations closer to people

SECTION 09

Programme Spotlight: ADILE

Access to Diagnosis & Inclusive Learning Enhancement

2025 marked the launch of ADILE, one of the most significant new developments in SCU's programme portfolio -- responding to children who experience developmental, learning, or behavioural difficulties without timely identification or support. Families can face long distances, high costs, and limited access to specialized assessment; schools may have committed teachers who lack the training and tools required. Launched in partnership with Ibara Learn, ADILE combines digital technology with community-based inclusive education.

Digital screening → Early identification → Teacher capacity → Parent engagement → Referral → Inclusive learning

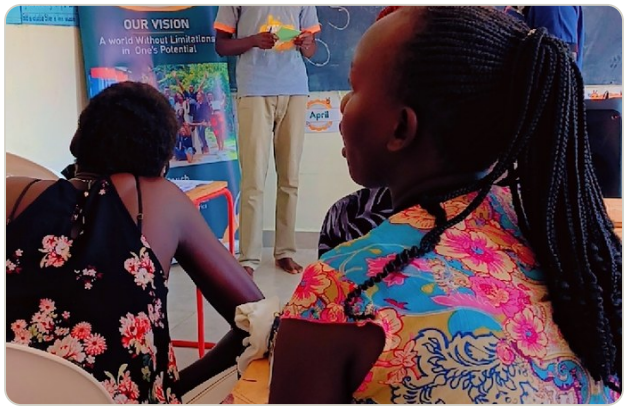
The ADILE Model

210	120	15
children reached	parents reached	teachers reached

From the Field: 167 Learners Screened

Structured digital screening at Hope of Glory Christian School and Kinder Planet International School reached 167 learners for learning and neurodevelopmental challenges. Four children were referred for specialized assessment. Before screening, children with persistent classroom difficulties were managed informally, with limited access to structured identification. The process also changed how teachers understand and respond to struggling learners.

> *"I have learned to be more patient with children showing signs of dyslexia. Before, I used to become impatient and sometimes angry, but now I understand how to support them better."*
>
> — Teacher, Kinder Planet International School



Teacher Training

Inclusive classroom practice session



Digital Screening Tool

In use on a mobile device in the field

Impact Stories

Beyond the numbers: evidence of change

From Severe Distress Toward Recovery

A client experiencing severe psychological distress following job loss completed six CBT sessions, with family members having reported concerns about possible self-harm beforehand. Noticeable improvements followed in emotional regulation, social engagement, and overall wellbeing.

> *"I see my brother less self-hateful, less isolated, and now happy. We were worried that he would take his life. Thank you, Stress Clinic Uganda."*
> — Sibling of a CBT client

"I Have Regained Myself"

A client accessed SCU's psychosocial support pathway after emotional distress began affecting her ability to work. Structured counselling over about one month focused on emotional stabilization, self-esteem, and coping strategies.

> *"I thought I was not worth anything anymore. But the counselor was very supportive. After the sessions, I have regained myself, and even my performance at work has improved."*
> — Client B

A Young Person Chooses a Different Path

During a Stress Free Club session, a young participant discussed compulsive digital content consumption affecting concentration. Peer-led discussion helped identify strategies to reduce exposure and strengthen personal discipline.

> *"After the session, I adopted new strategies to keep myself away from what was affecting me. Now I feel more focused and happier."*
> — Stress Free Club participant

SECTION 11

Monitoring, Learning & Evidence

Measuring what we do, learning what works

Numbers tell us how far we reached. Evidence helps us understand whether we made a difference. In 2025, SCU continued strengthening data collection, programme monitoring, beneficiary feedback, and case documentation.

113%

aggregate performance against measurable programme targets

Selected 2025 Evidence

INDICATOR	2025 RESULT
Aggregate performance against measurable targets	**113%**
Learners screened for learning/neurodevelopmental challenges	**167**
Children referred for specialized assessment	**4**
Parents/caregivers engaged through ADILE	**120**
Teachers engaged through ADILE	**15**
CBT sessions completed (documented recovery case)	**6**

Where Growth Was Strongest

Inclusive Education recorded the strongest proportional growth, driven by expanded caregiver engagement and school-based screening. Mental health programming achieved broad multi-channel reach across community, youth, faith, and clinical engagement channels, while Community Protection began establishing an initial case-response capacity.

SECTION 12

Learning from Implementation

Seven lessons that will shape 2026

1 **Identification must be connected to action**

Screening alone is not enough. Children identified as requiring support need appropriate referral, family engagement, and accessible services -- this will inform ADILE's expansion in 2026.

2 **Teachers are critical mental health and inclusion actors**

Capacity building influenced not only knowledge but attitudes and classroom practice, showing teacher training should address confidence and strategy, not only technical content.

3 **Community-based support can reach people before crisis**

Stigma, distance, cost, and fear of judgement keep many from formal services. Community awareness, peer engagement, and digital platforms are vital entry points into care.

4 **Structured intervention can restore functionality**

Documented clinical and psychosocial cases showed measurable improvement in emotional regulation, social engagement, and daily functioning after structured support.

5 **Youth engagement works best when participatory**

The Stress Free Club experience showed young people respond positively when discussions are practical, participatory, and peer-oriented -- not simply delivered to them.

6 **Partnerships increase organizational capacity**

Collaborations provided far more than funding -- technology, office space, government relationships, and sector networks all converted limited resources into greater impact.

7 **Funding predictability matters**

Demand for SCU's programmes exceeds available resources. Limited activity in livelihoods/VSLA reinforced that integrated programming requires predictable, longer-term funding -- shaping our 2026 resource mobilization strategy.

SECTION 13

Partnerships & Recognition

Growing through partnership

SCU's growth in 2025 was not achieved alone. Partnership value cannot always be measured in dollars -- funding, infrastructure, technology, government access, and advocacy opportunities all strengthened our ability to deliver programmes.

The Recreational Project

US$31,000 sub-grant enabling MindPower implementation and expansion.

Elephant Commons

Free office space and an activity hall, reducing operating costs.

Lamwo Local Government

Formal MOU, expanding SCU's footprint beyond Gulu into Lamwo District.

Ibara Learn

Technology partnership supporting the launch of ADILE's digital screening.

Gulu City Authority

Renewed operating permit, maintaining local regulatory compliance.

Lacor

Strengthened collaboration around community mental health.

Parliament of Uganda

Partnership discussions begun in 2025, formalized via MOU in 2026.

Mental Health Working Groups

Sector coordination, learning, and referral strengthening.

Emerging Global Leadership

Following the 2025 reporting period, Founder and Executive Director Martin Opiyo was elected Africa Representative and Advisory Board Member of the Global Mental Health Action Network (GMHAN), and participated in a global mental health advocacy engagement in the Philippines in February 2026 -- extending SCU's international engagement and creating a platform to represent Northern Ugandan communities in global mental health conversations.



Partners and Stakeholders Together

SCU team and partners at a collaborative engagement, 2025-2026

SECTION 14

Governance, Team & Accountability

Building an organization worthy of community trust

Governance

Stress Clinic Uganda was overseen by a Board of 11 members during 2025, providing strategic oversight of organizational strategy, programme direction, financial stewardship, risk, institutional development, and partnership development.

Our Team

A lean core team of 5 staff members coordinated programme implementation, administration, partnership coordination, communications, monitoring, and resource mobilization -- creating operational pressure but also keeping SCU closely connected to the communities it serves. A network of 54 volunteers supported community mobilization, mental health awareness, youth engagement, outreach, and peer support: community members are part of the infrastructure through which change happens, not simply recipients of services.

Organizational Accountability

In 2025, SCU filed its annual returns with the Uganda Registration Services Bureau (URSB), filed annual tax returns, renewed its Gulu City Authority operating permit, and entered a formal MOU with Lamwo Local Government -- important steps in building an organization able to responsibly manage increased programme scale and donor investment.

Governance at a Glance

Board members	**11**	Core staff	**5**
Volunteers	**54**	Districts reached	**2**
Annual URSB returns	**Filed**	Annual tax returns	**Filed**
Gulu City operating permit	**Renewed**	Local government MOU	**Lamwo**



Our Team in the Field

Programme staff presenting to teachers and community members, 2025

SECTION 15

Financial Summary

Stewarding every resource for community impact

SCU mobilized an estimated US$36,110 in financial and in-kind resources during 2025. This financial summary is prepared from internal records and does not constitute independently audited financial statements.

US$36,110

total resources mobilized in 2025

Resource Breakdown

Partnership sub-grant (The Recreational Project)	**US$31,000**
One-time donations	**US$1,210**
In-kind asset contributions	**US$3,900**

How Resources Were Allocated

70%	15%	5%	5%	5%
Programme Implementation	**Administration**	**Monitoring & Evaluation**	**Communications**	**Staff & Consultancy**
Direct activities supporting SCU's programme objectives and community engagement.	Organizational coordination, compliance, communications, and operations.	Tracking performance, documenting results, generating learning.	Programme visibility, stakeholder engagement, public awareness.	Technical expertise required for implementation.

SECTION 16

Looking Ahead to 2026

From building the foundation to scaling what works

If 2025 was a year of growth, partnership-building, and institutional strengthening, 2026 is the year Stress Clinic Uganda takes the next step: deepening what works, expanding reach, and building systems capable of sustaining long-term impact.

1 Expanding ADILE

From pilot toward a regional model, reaching significantly more children and schools.

2 A Regional Diagnostic Centre

Establishing a Regional Neurodevelopmental Diagnostic & Support Centre in Gulu.

3 Scaling Community Mental Health

Expanding MindPower, RESET, Women's Mental Health, and M-POWER.

4 Strengthening Suicide Prevention

From awareness through identification, support, referral, and follow-up.

5 Expanding Into More Communities

Building on the Lamwo expansion while consolidating work in Gulu.

6 Reactivating Livelihoods

Connecting economic resilience, mental wellbeing, and community recovery.

7 Deepening Government Engagement

Building on the Lamwo MOU, Gulu City Authority, and Parliament of Uganda.

8 Global & Regional Collaboration

Leveraging SCU's role within the Global Mental Health Action Network.

9 Investing in Evidence & Capacity

Stronger MEL systems, data management, and safeguarding.

10 Expanding Resource Mobilization

Institutional grants, core funding, and diversified partnerships.

A Northern Uganda where the silence of the guns is matched by the beginning of peace within people's minds.

SECTION 17

Acknowledgements

With gratitude

Stress Clinic Uganda's 2025 journey was made possible by people and institutions who believed that Northern Uganda deserves the opportunity to heal, rebuild, and thrive.

We are grateful to the communities who welcomed our teams, shared their experiences, and trusted us to walk alongside them. Every conversation, counselling session, school engagement, community dialogue, and youth activity was made meaningful by that trust. We thank the young people, women, men, children, parents, teachers, and community members who participated in our programmes -- your courage to speak, learn, seek support, and support others remains at the heart of our work.

We extend our appreciation to our 54 volunteers, whose time, energy, and commitment enabled SCU to reach communities beyond what our small core team could achieve alone, and to our 11 Board members for providing governance, oversight, and strategic guidance as the organization continued to grow.

We are grateful to our programme and institutional partners, including The Recreational Project, Lacor, Elephant Commons, Ibara Learn, Lamwo Local Government, and Gulu City Authority. We particularly appreciate The Recreational Project for its financial support toward MindPower, and Elephant Commons for providing office and activity space that strengthened our operational capacity. To every donor, individual supporter, and person who contributed financially or in kind: thank you for believing in the work.

This organization exists because your experiences matter.
Your struggles matter. Your recovery matters. And your potential matters.
Thank you for believing that healing is possible.



Walking Alongside Our Communities

A field conversation with caregivers, Northern Uganda

SECTION 18

Reporting Note & Data Statement

About this report

Reporting Period

1 January - 31 December 2025. Where developments occurred after December 2025 but are important to understanding SCU's trajectory, these are clearly identified as 2026 developments and are not presented as 2025 achievements.

Our Approach to Data

SCU draws programme information from activity records, participant registers, screening data, case documentation, programme reports, beneficiary feedback, and internal monitoring. Organizational reach (2,310 people) represents SCU's reported unduplicated beneficiary figure for 2025. Individual programme figures represent people engaged through specific interventions; a person may participate in more than one programme and may appear in more than one programme-level figure. For this reason, programme figures should not be added together to calculate total organizational reach.

Financial Information

The financial section presents SCU's 2025 resources mobilized and reported resource allocation based on internal organizational records. The financial summary is intended for transparency and programme reporting purposes and does not constitute independently audited financial statements.

Privacy, Safeguarding & Dignity

SCU recognizes that mental health, suicide prevention, family circumstances, and children's developmental needs involve highly sensitive personal information. Beneficiary stories are presented with consideration for privacy, dignity, and informed consent; identifying information has been withheld or anonymized where appropriate. Our beneficiaries are people with agency and potential -- not simply statistics in a report.

We measure because we want to learn.
We learn because we want to improve.
And we improve because communities deserve better.

SECTION 19

Glossary & Contact

Key terms used in this report, and how to reach us

ADILE
Access to Diagnosis and Inclusive Learning Enhancement — SCU's flagship inclusive education programme.

CBT
Cognitive Behavioural Therapy — a structured, evidence-based form of psychotherapy.

GMHAN
Global Mental Health Action Network — an international mental health advocacy network.

MEL
Monitoring, Evaluation and Learning — SCU's system for tracking and improving programme performance.

M-POWER
SCU's men's mental health and wellbeing programme.

MindPower
SCU's youth-focused mental health and psychosocial support programme.

MOU
Memorandum of Understanding — a formal, non-binding partnership agreement.

RESET
SCU's community-based mental health awareness programme.

SCU
Stress Clinic Uganda.

URSB
Uganda Registration Services Bureau — Uganda's business and NGO registration authority.

VSLA
Village Savings and Loan Association — a community-based savings and credit group.

Get in Touch

We welcome partnerships with organizations, funders, government agencies, researchers, and individuals who share our commitment.

Stress Clinic Uganda (SCU) | Elephant Commons — Partners' Block
Plot 75-79 Jomo Kenyatta Road, Laroo Division, Gulu City | P.O. Box 361048, Gulu, Uganda
+256 782 882 867 | info@stressclinic.africa | www.stressclinic.africa