

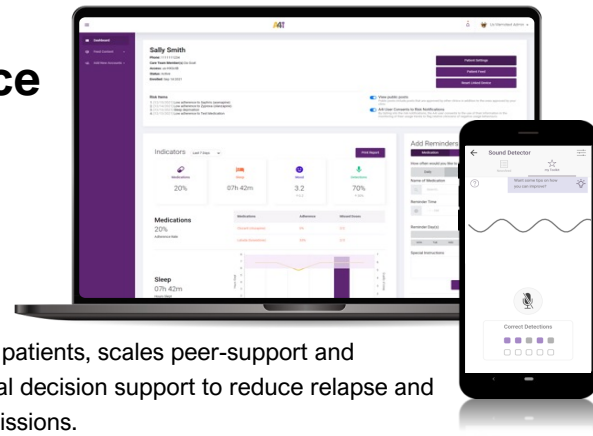


App4Independence

A4i.me

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A4i is a validated, co-designed digital platform that supports individuals with severe mental illnesses (SMI) and opioid use disorder (OUD).

The platform includes a mobile app for patients and a clinical web portal for care coordination by peer-support workers and clinicians.

A4i empowers patients, scales peer-support and provides clinical decision support to reduce relapse and hospital readmissions.

Addressing critical gaps in the recovery process, **A4i's patented tools address auditory hallucinations, data collection for clinical decision support and data-driven readmission/relapse risk-detection.**

Spun out of Canada's largest mental health provider [CAMH](#), A4i is clinically and commercially validated with implementations in California and throughout Canada.

Treating Severe Mental Illness

Problem: Limited in-person outpatient care resources, provider and treatment plan engagement, challenging high non-adherence rates, high rates of readmission, distress and costly crisis service utilization.

- 23% are readmitted within 30 days of discharge.
- +\$20B Total Addressable Market

Value of A4i

Co-designed with patients and clinicians using a transdiagnostic approach to multi-symptom remediation

- Extended engagement and communications with clinical decision support through highly adaptive patient-provider tools
- Proactive, scaled approach to care, improving risk detection and flagging those in need
- Patient tools such as the patented audio hallucination detection feature

About Us

A4i is a JV between Canada's largest mental health teaching hospital, The Centre for Addiction & Mental Health (CAMH) and MEMOTEXT the leader in co-creation of digital patient engagement and digital therapeutics.

- Led by cross-functional experienced clinical, digital health, data-science, digital therapeutics professionals
- Deep clinical and commercialization team
- Scientific American's 1 of 10 startups changing healthcare

Data

- Peer Reviewed with multiple concurrent clinical efficacy trials, adoption and usability validations read our [feasibility study in PLOS One](#)
- Improved peer support relationships, awareness, and response times by community personnel – [real world effects in QOL, peer impact and outcomes](#)
- Demonstrated early, indicative improvements in symptom domains related to psychoticism, phobic anxiety, obsessive-compulsive paranoid ideation,
- High retention rates (84%) over 6-12month timeframes

