Problem Management Plus (PM+)

Purpose

Equip individuals, including professional actors, volunteers or community members, with knowledge and skills to enhance problem management and coping skills amongst individuals living under adverse conditions.

Briefly about

Problem Management Plus (PM+) is an evidence-based psychological intervention developed by the World Health Organization (WHO) to assist adults experiencing distress in communities affected by adversity.

PM+ is designed to be delivered by trained non-specialists and consists of five individual sessions. The intervention focuses on enhancing individuals' coping skills incl. problem management and aims to improve common mental health issues such as depression, anxiety, and (post-traumatic) stress.

Research has demonstrated that PM+ effectively improves functioning and reduces psychological distress among participants. PM+ combines problem management strategies with behavioural techniques to help beneficiaries identify and manage their problems. This approach is particularly relevant in settings with limited access to mental health professionals.

Target Groups

PM+ is intended to benefit adults who are experiencing emotional distress due to various adversities, including conflict, prevalent violence, poverty, or natural disasters. The intervention is suitable for individuals who experience increased levels of anxiety, depression, and stress or grief. PM+ is not suited for individuals with severe mental health conditions cognitive impairments, or high risk of suicide.

The PM+ training educates a cohort of PM+ Helpers to deliver the intervention to beneficiaries. PM+ Helpers are lay persons with a genuine interest in helping others. They do not necessarily have a mental health background but ideally have relevant education and/or experience in health, education or other social work.

Outcomes

Beneficiaries of PM+ can expect the following outcomes:

- Improved ability to cope with stress and anxiety
- Reduction in distress, improved functioning and emotional well-being
- Enhanced problem-solving skills incl. strengthened social support networks

<u>PM+ Helpers</u> will experience growth in their competencies, including enhanced skills in delivering psychological support and better understanding of mental health issues.

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Monitoring and evaluation

PM+ includes a standardized Monitoring & Evaluation assessment tool with detailed instructions in the manual. The assessment follows a pre-, during-, and post-test structure, covering the following components:

- PSYCHLOPS (identifies the client's key problem(s) and the extent of their impact)
- Emotional distress
- Functioning
- Thoughts of suicide
- Observed impairments (based on PM+ helper's observations)

For emotional distress and functioning, the choice of assessment scale is flexible, allowing adaptation.

Key considerations

Implementing PM+ requires careful adaptation to local contexts, including cultural sensitivities and language needs.

PM+ can be delivered as an individual or a group intervention. Choosing the modality depend on context and cultural preferences.

It is crucial that PM+ Helpers possess a genuine interest in assisting others and receive adequate training and regular supervision to deliver the intervention effectively. A robust referral system should also be established to connect beneficiaries with additional support when necessary.

Local mental health professionals should be included in implementation as PM+ supervisor(s) and/or in ToT for feasibility and sustainability of implementation.

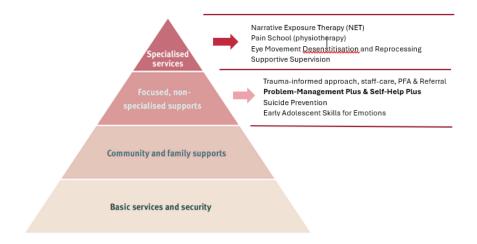
Check questions

In my organisation, we need a structured and scalable approach to assist people in
distress.
Managers in my organisation are willing and able to allocate sufficient time and
resources for staff to participate in PM+ training, allow staff to rehearse and implement
the intervention, including establishing supportive supervision structures.
Staff in my organisation are willing and able to follow the PM+ guidelines, use the tools,
collect pre- and post-data from beneficiaries and participate in supportive supervision.

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Type of intervention

PM+ is a focused, non-specialised intervention



Implementation overview: PM+ Host 10-day in-person training workshop for Recruit 14 interested trainers amongst PM+ Helpers (or 5-days Partner experienced PM+ Helpers and/or mental health for experienced MH Develop full implementation Ensure that PM+ Helpers professionals professionals) actions implement the intervention and scale-up plan, including Organise training logistics Ensure that trained set up monitoring and to identified beneficiaries. Host 5-day ToT training Helpers delivers PM+ to One intervention consists of evaluation system and tools From ToT cohort and/or MH professionals, 2 clients with detailed 5 sessions + 2 pre/post Identify and recruit 1020 identify 10 participants for supervisor training feedback potential PM+ Helpers for assessment-lasting appx. 7 Host 2-day training in supportive supervision Host 2-3 days training weeks. training Establish sustainable supervision structure Organise training logistics for supervisors Monitor treatment outcomes based on local health system Preparation (1-3 months) Training (2 months) Scale-up capacity (12-18 months) Adapt materials if Deliver 2-hour online Deliver supervision to PM+ Deliver 5-day ToT training implemented for the first Helpers pre-training webinar Deliver 2-day supportive supervision training **DIGNITY** time in context (optional) Support monitoring of Support establishment of sustainable treatment outcomes and Identify NGO or institution Deliver 5-day insupervision structure actions documenting effects taking responsibility for person training implementation and workshop, incl. supportive supervision pre/post evaluation

Phase I: first cohort of 20 PM+ Helpers trained => capacity to reach 400 beneficiaries per year

Phase II: ToT cohort trained and supervision structure established => capacity to reach 4000 beneficiaries per year