Box 1 Case study on mental health policy from Jordan

Jordan's Mental Health Programme was initiated in 2008 in the wake of the influx of refugees from Iraq. In 2009, a national steering committee was established representing a wide range of stakeholders. In addition, over a 2-year period, a wide range of stakeholders from governmental and semi-governmental bodies, universities and affiliated teaching hospitals, the military sector, users associations, nongovernmental organizations, community-based organizations, and media were consulted and involved in drafting the National 10-year Policy which was launched in 2011. The wide consultative process served to get the

The policy includes 12 areas of action encompassing: governance; service organization; human resources; finance; information system; prevention and promotion; human rights and legislation; rehabilitation; psychotropic medications; advocacy, research; monitoring, evaluation and quality improvement. A mental health unit was established within the Primary Health Care Directorate at the Ministry of Health to support the governance component of the policy and to facilitate the implementation of the policy and plan. A multidisciplinary National Technical Committee was formed to advise and support the mental health unit.

The main developmental challenges included difficulty in achieving consensus around the priority areas of action, adopting

the bio-psychosocial approach, and downsizing mental hospitals. Specific challenges during the implementation of the policy and plan revolved around shortages of human resources due to financial constraints, high turn-over of staff (relocation

endorsement of key decision-makers. A 2-year Action Plan on Mental Health was also developed in January 2011.

Particularly successful features of the activities implemented under the policy and plan include:
 integrating mental health into primary health care and channelling trained secondary care staff to provide supervision to primary health care staff;

to other centres, retirement, etc.), work load in primary health care, and resistance from professional groups.

- introducing mental health units to general hospitals; adoption of the multidisciplinary, bio-psychosocial approach at the secondary care level;
- . the establishment of Our Step Association to support mental health service users and families.

Additional information on mental health reform in Jordan can be seen via the following links: Part 1: http://www.youtube.com/watch?v=m7Xq96eGZCw; Part 2: http://www.youtube.com/watch?v=DaZrDTiZ6KA.