

# WHO SPECIAL INITIATIVE FOR MENTAL HEALTH



## JORDAN

- National Mental Health and Substance Use Action plan (2022-2026) endorsed by Ministry of Health (MOH)
- While 6.1% of Jordan's annual GDP is allocated to healthcare, there is limited information about funds expended on mental health each year; although it is well established most financial support for mental health is directed towards long-stay psychiatric hospital facilities
- Jordan has under 1 psychiatrist and 13 psychiatric nurses per 100,000 people
- Approximately 42 psychiatrists work in the public system (22 in MOH, 13 in Royal Medical Service, 7 in universities), while 49 psychiatrists work in the private sector
- Jordan has 5 psychiatric hospitals, 3 psychiatric inpatient units, and 103 primary healthcare facilities integrating mental health services through mhGAP
- To date, nearly 200 primary health care providers have been trained in WHO mhGAP to identify and manage the care needed for people living with mental health conditions

## STRENGTHS

- Strong psychiatry training program
- Government awareness about challenges and next steps needed to improve mental health services in Jordan
- Increasing civil society activism
- De-institutionalisation is part of Jordan's National Mental Health and Substance Use Action Plan (2022-2026)
- Interest from the international community to support mental health reform in Jordan
- Mental health care is free or at very low cost for Jordanian nationals and refugees in urban settings

## CHALLENGES

- Mental health governance needs restructuring and budgetary allocations re-organised to promote mental health care outside of long-stay institutional care and to increase allocations for community based mental health services
- Medication for common mental health conditions is lacking and there are restricted prescription rights for some psychotropic medicines
- Insufficient national-level mental health data
- Lack of human resources to support de-centralisation plans and for mental health professionals to work outside of the psychiatric hospital system
- Limited inter-sectorial coordination

## JORDAN'S DESIGN PROCESS

1

Create a National Technical Committee to review, evaluate and report on achievements of the National Mental Health and Substance Use Action Plan (2018-2021)

2

Conduct workshops with National Technical Committee to develop the next National Mental Health and Substance Use Action Plan (2022-2026)

3

Consult with National Technical Committee to identify areas for WHO's Special Initiative for Mental Health to support and/or complement the revised National Mental Health and Substance Use Action Plan (2022-2026)

4

Develop a detailed plan for the implementation of WHO's Special Initiative for Mental Health in Jordan, comprising a logical framework that includes outcomes, outputs, activities, indicators and a timeline

5

Finalise plans and obtain MOH approval to begin implementation of both Jordan's National Mental Health and Substance Use Action Plan (2022-2026) and work of the Jordan-WHO Special Initiative for Mental Health

# MENTAL HEALTH CARE IN JORDAN

**While Jordan's Special Initiative for Mental Health design process was underway, individual programs were also being implemented since 2019; with progress including:**

- 1.** Scaled-up implementation of mhGAP program.
- 2.** Scaled-up implementation of WHO regional School Mental Health program.
- 3.** Capacity building for health service providers including on the rational prescription of psychotropic medicines; evidence- based substance use interventions; surveillance training using Jordan Integrated Electronic Reporting System (JIERS); and Caregiver Skills Training for Community-Based Organisations to support families and their children with developmental delays and disabilities.
- 4.** Continued support to inpatient units in general hospitals and Community Mental Health Centers (CMHCs), including the establishment of an additional CMHC.
- 5.** Completion of a multi- stakeholder evaluation of the National Mental Health & Substance Use Action Plan (2018-2021), with learnings contributing to development of a new Jordan National Mental Health and Substance Use Action Plan (2022-2026).

# SUMMARY OF JORDAN'S NATIONAL MENTAL HEALTH AND SUBSTANCE USE ACTION PLAN (2022-2026)

## Domain 1: Governance

- 1.1:** Updating national mental health policy in line with international standards and human rights instruments, and improving the implementation of existing legislation for mental health
- 1.2:** Strengthening the mandate and governance capacity of Ministry of Health (MOH) Directorate for Disabilities and Mental Health
- 1.3:** Enhancing management of mental health and psychosocial human resources (surveillance, recruitment, retention, redistribution) within Directorate and across MOH governance structures through the National Technical Committee
- 1.4:** Strengthening inter-sectoral cooperation for mental health governance, with strengthening the role of MOH Directorate for Disabilities and Mental Health as an overarching coordination and governance body
- 1.5:** Integration of Mental Health and Psychosocial Support (MHPSS) in national emergency preparedness and response plans
- 1.6:** Supporting the implementation of the Health Response component of the National Strategy to Combat Narcotics and Psychotropic Substances

## Domain 2: Health care

- 2.1:** Enhancing retention and efficient redistribution of gender-balanced mental health workforce
- 2.2:** PRIMARY CARE: Strengthening the integration of Mental Health & Substance Use (MH&SU) within Primary Health Care [Tools/ packages: mhGAP-IG including SU and Child and Adolescent modules]
- 2.3:** SECONDARY CARE level: [Development of existing outpatient clinics in community based mental health centers; Development of MH inpatient services]
- 2.4:** TERTIARY CARE: Redistributing resources/ Reorganizing long-stay mental hospitals (National Center for Mental Health, Al Karama)
- 2.5:** Enhance availability and regulation of essential psychotropic medicines (identified within mhGAP – IG version 2.0) at each level of care, including Substance Use care (detoxification and opioid substitution treatment)
- 2.6:** Strengthening the capacity of MH&SU services for providing community- based support and care for refugees and Internally Displaced Persons

## Domain 3: Promotion & prevention

- 3.1:** Increasing MH&SU literacy, reducing stigma and discrimination
- 3.2:** Implementing evidence-based promotion and prevention packages targeting the identified priorities

## Domain 4: Surveillance, monitoring & research

- 4.1:** Establishing a quality system for the services provided and their regular monitoring
- 4.2:** Regular monitoring of the MH&SU system using the national Integrated Electronic Reporting System (JIERS) and available tools

# JORDAN'S LOGICAL FRAMEWORK FOR PLANNED WORK UNDER WHOS SPECIAL INITIATIVE FOR MENTAL HEALTH

Goal: Strengthen Jordan's mental health system to improve access to mental health services and safeguard the rights of persons living with mental health conditions

## OUTCOMES AND OUTPUTS

1

### Increased availability of mental health services at primary care

- Establish a multidisciplinary cohort of trainers and supervisors for mhGAP and brief psychological interventions (Thinking Health Programme)
- Expand training on mhGAP-IG to primary care providers at 20 comprehensive health centers
- mhGAP supervision systems established, implemented and sustained
- Supply comprehensive health centers for mhGAP-IG implementation
- Pilot mhGAP-recommended brief psychological intervention – Thinking Healthy Programme in 10 comprehensive health centers
- Integrate mhGAP-IG in pre-service training for Family Physicians & nurses

2

### Increased availability of mental health services at secondary care

- Advocate with MOH to facilitate staffing for 2 secondary care units (Community Mental Health Centres (CMHCs), inpatient units)
- Support MOH in re-activating an existing inpatient unit in Ma'an general hospital
- Establish one additional Community Mental Health Center in Amman (MOH prioritised east Amman)
- Establish one additional inpatient unit in Princess Basma General Hospital (Irbid)
- Train established multidisciplinary teams for CMHC and inpatient units
- Develop training and supervision systems for Emergency Department staff on supporting individuals presenting with mental health conditions

3

### Position the National Centre for Mental Health (NCMH) as Jordan's specialised quality provider for mental health services and training

- Assess current status of long-term stay patients in NCMH and Al-Karama hospitals to facilitate deinstitutionalisation and provision of care via community-based services
- Identify patients at NCMH and Al-Karama hospital for discharge and community reintegration.
- Involve psychosocial professionals to create and facilitate NCMH discharge care and treatment plans, with involvement of service users (e.g., through Our Step).
- Capacity building for multidisciplinary teams at NCMH in rights-based recovery-oriented interventions.
- Advocate with NCMH to support the role of their multidisciplinary teams.

## OUTCOME-LEVEL INDICATORS

- % of all MOH primary care centers trained on mhGAP (total & by type; primary/ comprehensive)
- Level of satisfaction of mhGAP service users and/or their families with care received
- % of mothers receiving THP experiencing reduced disabling distress based on assessments of depression [PHQ-9]

- Increased access of mental health services at outpatient secondary care facilities, i.e. CMHCs (relative to Special Initiative for Mental Health baseline report)
- Increased access of mental health services at inpatient secondary care facilities, i.e. psychiatric units in general hospitals (relative to Special Initiative for Mental Health baseline report)
- Level of satisfaction of secondary care service users and/or their families with care received

- # of patients discharged in the past 6 months, disaggregated by length of inpatient stay (>3 months or <3months)
- # of new admissions in the past 6 months

## OUTCOMES AND OUTPUTS

4

### **Strengthen referral and back-referral systems across all levels of care**

- Comprehensive mapping of clinical pathways for mental health and substance use services at all levels of care, including social services and community resources
- Targeting healthcare providers, develop and disseminate a guide (with templated forms) that outlines existing services and referral pathways (within and between ministries and other applicable sectors) for different target populations, including prevention, treatment, rehabilitation services.
- Develop procedures to ensure availability and sustainability of referral guidelines and referral forms at all levels of care

5

### **Implement WHO QualityRights to increase rights-based and person-centered quality care**

- Establish QualityRights team led by the National Center for Human Rights, including providers and service users, for monitoring of the quality of services provided.

6

### **Strengthen mental health governance through legislation and economic evidence for investment**

- Complete a Jordan economic investment case for mental health
- Review existing legislation relevant to mental health with suggested amendments
- With MoH, support the development of revised mental health legislation in line with the provisions of international covenants and best practices.
- Lobby for the adoption of new mental health legislation by responsible governmental entities

7

### **Strengthen services for children with developmental delays & disabilities using the Jordanian-adapted Caregiver Skills Training (CST) Program**

Follow-up on CST pilot implementation and support local organisations for sustained implementation

## OUTCOME-LEVEL INDICATORS

- # of MOH facilities using developed referral system (pathway, guide, guidelines) by level of care

- # Individuals engaged in WHO QualityRights activities

- Updated national mental health policy
- Developed mental health legislation

- The CST intervention is available as a service in at least 2 local facilities / Community-Based Organisations (CBOs)