



Jordan

DRUG SITUATION AND POLICY

by Matthieu de La Rochefoucauld

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Co-operation Group to Combat Drug Abuse and Illicit trafficking in Drugs

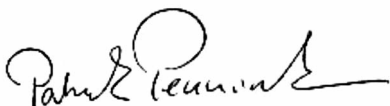


Preface

The Pompidou Group is publishing a new series of “Country profiles” to describe the current drug situation and policy of its Member States and States co-operating in its networks (the Mediterranean network MedNET and the South East Europe and Eastern European Networks). Its long term aim is to provide a first basis to contribute to the establishment of a National Observatory in the country described.

This “country profile” examines the state of affairs and drugs policy in Jordan and provides a descriptive analysis to help professionals to study the treatment, prevention and law enforcement methods used in Jordan. This profile also provides an analysis of the impact of drugs and its effects on the health of citizens. A review of the national alcohol strategy is also included in the profile. In addition, it provides an overview of the various international commitments and relations with neighbouring countries to fight drug trafficking. The document contributes to the implementation of the national policy and shows the successes and lessons learnt in the fight against drug abuse and drug trafficking.

I would like to express my gratitude and appreciation to the Department for Anti-drug Policies of the Presidency of the Council of Ministers of Italy for their financial support in the realisation of this booklet. Further acknowledgement goes to Matthieu de La Rochefoucauld for the development of this profile.



Mr Patrick PENNINCKX

Executive Secretary of the Pompidou Group

Project partner

Presidency of the Council of Ministers
Department for Anti-drug Policies of Italy



PRESIDENZA DEL CONSIGLIO DEI MINISTRI
Dipartimento Politiche Antidroga

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Drug-related information and data

Introduction

General overview on drugs

Jordan is a Middle Eastern country bordering Iraq and Saudi Arabia to the east, Syria to the north and Israel and the West Bank to the West.

Jordan is considered as a transit country for opiates, cannabis, and synthetic drugs. The main destinations for those drugs are the markets of Gulf States and Israel. According to the Jordan Anti-Narcotics Department (AND), the importance of the country's domestic market for illegal drugs is minor. AND estimates that 85% of drugs entering in the country are bound for further international markets. At its borders, Jordan serves as a drug road. For example, heroin of Afghan origin enters Jordan from Syria on its way to markets in Israel. Cannabis originating from either Afghanistan or Lebanon enters the country from Lebanon, Syria and Iraq. Fenethylamine enters from Syria for transshipment to Gulf States.¹

According to AND's 2012 study, the number of drug addicts in Jordan is less than 1 % of the population.² Prescription sedatives and stimulants are believed to be the most commonly abused drug, followed by opium and heroin. Cocaine, marijuana and ecstasy are comparatively less common.³

In Jordan, the community still considers drug abuse and alcohol intake to be unacceptable behaviour from both social and religious stand points.

¹ U.S. Bureau of International Narcotics and Law Enforcement Affairs, "2013 International Narcotics Control Strategy Report (INCSR)" Report, March 5, 2013.

² *The Jordan Times*, "Prevention key to combating drug abuse", by Rana Hussein, August 22, 2012.

³ Mark A. R. Kleiman, James E. Hawdon "Encyclopedia of Drug Policy, Volume 1".

However, nearly 81% of addicts began abusing drugs because of influence from friends and 61% of them indicated that they first tried drugs out of curiosity.

Moreover, the repatriation of 300,000 Jordanian nationals after the Gulf War contributed to social stresses, as has the widespread unrest in the Middle East in the 21st century.⁴

The prevalence of smoking in Jordan remains high with smoking and use of tobacco prevalence ranging from 15% to 30% among students aged 13-15 years and a current smoking prevalence near 50% among men.⁵

Rates of tobacco use among Jordanian youth aged from 13 to 15 years were examined in 2003, with an estimated 33% of the target population identified as using cigarettes or water-pipe. Tobacco use was found to be higher among boys (37%) than girls (28%).⁶ Reports indicate too, that drug use among young Jordanians is rising, with growing use of hashish among the 16 to 25 year old age group.⁷

In 2007, a Global School-based Student Health Survey⁸ was conducted in Jordan, primarily among students between 13-15 years of age. Current smoking prevalence ranged from 16%. The prevalence of current smokers was substantially greater among boys than girls, with approximately 22% of boys reporting that they currently smoke compared to 9% of girls.

Use of other forms of tobacco was also high among both boys and girls. Nearly 33% of boys reported current use of other forms of tobacco during 2007 and roughly 17% of girls reporting current use of other forms.

According to national estimates, smokers in Jordan spend an estimated € 256 million annually on tobacco products.⁹

⁴ Mark A. R. Kleiman, James E. Hawdon "Encyclopedia of Drug Policy, Volume 1".

⁵ Adel Belbeisi, Mohannad Al Nsour, Anwar Batieha, David W Brown and Henry T Walke "A surveillance summary of smoking and review of tobacco control in Jordan", *Globalization and Health* 2009.

⁶ MANARA Network for child rights, "Country Profile of Jordan, A review of the Implementation of the UN Convention on the Rights of the Child", August 2011.

⁷ ITN Source, "Jordan: Authorities Face Uphill Battle Combating Growing Drug Use", 28 July 2010. Available at: <http://www.itnsource.com/shotlist/RTV/2010/07/28/RTV1922110/?v=0&a=1>.

⁸ *Globalization and Health*, Adel Belbeisi, Mohannad Al Nsour, Anwar Batieha, David W Brown and Henry T Walke "A surveillance summary of smoking and review of tobacco control in Jordan", December 2009.

⁹ *Globalization and Health*, Adel Belbeisi, Mohannad Al Nsour, Anwar Batieha, David W Brown and Henry T Walke "A surveillance summary of smoking and review of tobacco control in Jordan", December 2009.

A behavioural risk factor survey¹⁰ was conducted by the Jordan MOH in 2007. Nearly 40% of all adults aged 25 years or older reported having smoked at least 100 cigarettes during their lifetime. The prevalence of current smoking for men was 48.2% and for women was 5.1%.

The traditional alcoholic beverage in Jordan is arak, an aniseed-flavoured spirit.¹¹ Beyond 1995, the unrecorded alcohol consumption in Jordan is estimated to be 0.3 litres pure alcohol per capita for population older than 15 years (estimated by a group of key alcohol experts).¹²

In a study looking at data collected from all adult patients presented with acute poisoning to the emergency room at Jordan University Hospital between August 2000 and July 2001 (74 cases in total), alcohol alone was involved in 6.8% of patients whereas alcohol involvement (congestion of drugs and alcohol) was detected in 5.4% of poisoned patients. Ethanol overdose was only found among men and no case was found in women. 16% of poisoning cases presented with toxic levels involved alcohol.¹³

A study on the “current trends in drug abuse associated fatalities” was conducted with the aim to give a close picture to the demography, toxicological data, manner, cause of death and other associated findings in such cases.¹⁴ Post-mortem forensic pathology reports for all autopsies examined in the National Institute of Forensic Medicine (NIFM) were reviewed over a 5-year period and drug abuse associated deaths were selected.

A total of 5 789 autopsies were conducted in the NIFM over the 5-year study period (2000–2004). In autopsied cases, the cause of death attributed to toxicology causes constituted 3.19% (n = 184/5789) of them. Drug abuse related or associated death represented 23.91% (44/184) of the toxicology causes and 0.76% of the total cases in general.

Among the drug abuse associated deaths, 86.4% (38/44) were males and 13.6% were females (6/44), 4 of them (4/6) were non-Jordanian.

¹⁰ *Globalization and Health*, Adel Belbeisi, Mohannad Al Nsour, Anwar Batieha, David W Brown and Henry T Walke “A surveillance summary of smoking and review of tobacco control in Jordan”, December 2009.

¹¹ *World Health Organization*, “Global Status Report on Alcohol 2004”.

¹² *Alcohol per capita consumption, patterns of drinking and abstention worldwide after 1995*, “*European Addiction Research*”, 2001, 7(3):155–157.

¹³ Hadidi K, Hijazi R. “Patterns of adults poisoning in emergency room at Jordan University Hospital”, *Jordan Medical Journal*, 2002.

¹⁴ Mu'men S. Hadidi, Mudhaffar I. Ibrahim, Imad M. Abdallat, Kamal A. Hadidi, “Current trends in drug abuse associated fatalities – Jordan, 2000–2004”, *Forensic Science International*, n° 186 (2009) 44–47.

This study is the first study that addresses drug abuse associated fatalities in Jordan. The study revealed that 44 cases (0.76%) out of the 5789 total autopsies were attributed to drug abuse associated deaths. The age range was from 20 to 60 years (mean S.D. = 32.7 7.2). More than 80% of cases were Jordanian males. The reported abuse substances as single drug or in combination were alcohol in 56.8%, morphine 36.4%, heroin 15.9%, benzodiazepines in 11.4% and cocaine in one body packer case. Surprisingly, neither a case with amphetamine or amphetamine analogue, nor with marijuana or methadone was recorded. In 75% of cases the death was accidental and only one case was reported to be suicidal, while in 18.2% and 4.5% death was due to sudden death and road traffic accidents, respectively. Regarding the cause of death, it was related to drug overdose in 50% of cases and in 34.1%, 11.4% and 4.5% of cases it was attributed to drug related medical complications, non-drug related complications, and trauma, respectively. Alcohol was mainly associated with accidental death; morphine and heroin were associated with drug overdose and abused through intravenous route. Injection marks were reported in 56.8% of cases and in 52.3% death occurred at home. This study confirmed the variation in the incidence and type of abused substances in Jordan compared with different countries.

General population statistics of the country

		Year	Jordan
Population		2013	6 482 081
Age structure	0-14	2013	34.6%
	15-24		19.9%
	25-54		36.2%
	55-64		4.3%
	65-and over		5.1%
Population growth rate		2013	0.14%
Median age		2013	22.6 years
GDP per capita		2012	€4,400
Unemployment rate		2012	12.5%
Unemployment, youth ages 15-24		2011	29.9%
Population who live below poverty line		2002	14.2%
Illiteracy rate		2012	4.1%
Government type			Constitutional Monarchy

According to the United Nations Relief and Works Agency for Palestine Refugees (UNRWA), there are 2,034,641 registered refugees living in Jordan. All Palestine refugees in Jordan have full Jordanian citizenship with the exception of almost 140,000 refugees originally from the Gaza Strip, which up to 1967 was administered by Egypt. They are eligible for temporary Jordanian passports, which do not entitle them to full citizenship rights such as the right to vote and employment with the government.

There are ten official and three unofficial camps, with other refugees living near the camps. They all live under similar socio-economic conditions.

Moreover, according to UNHCR there are 600,000 Syrian refugees mainly in the north of the country, who represent one tenth of the Jordanian population. The majority of them are located in cities, the rest constituting almost 30%, are forced to settle in camps Zaatari in Mafraq in the north near the Syrian-Iraqi border, Mreijeb fhoud of Al Zarqa north of Amman and in the new camp Arzaq located 100 km from the capital Amman.

National anti-drug institutions

Among the institutions that work against drugs, there is the Jordan Anti-Narcotics Department (AND), which falls under the authority of the Public Security Directorate. AND is in charge to maintain the minor internal drug distribution.¹⁵ AND also co-ordinates the Jordanian fight against drug trafficking.

The Anti-Narcotics Department, which was established in 1973, places a heavy focus on spreading awareness about drug trafficking and abuse. The centre includes a museum in which school students are given tours, educating them about the risks of drug abuse.¹⁶

In 2009, Jordan adopted a National Strategy on drugs. It encompasses law enforcement, prevention, harm-reduction and rehabilitation components, as well as public awareness-raising activities undertaken by the Anti-Narcotics Department of the Public Security Department in cooperation with government bodies, universities, schools, youth clubs, the media and Civil Society Organisations.¹⁷

¹⁵ U.S. Bureau of International Narcotics and Law Enforcement Affairs, "2013 International Narcotics Control Strategy Report (INCSR)" Report, March 5, 2013.

¹⁶ ITN Source, "Jordan: Officials in Jordan say the amount of drugs smuggled into the country is increasing", April 8, 2013.

¹⁷ European Commission, "Implementation of the European Neighbourhood Policy in 2009: Progress Report Jordan", 2010. Available at: http://ec.europa.eu/world/enp/pdf/progress2010/sec10_525_en.pdf

The Hashemite Kingdom of Jordan starts a new National Strategy to fight Drugs in 2009.

The strategy relies on the following three principles:

- Integrated governmental policies.
- Partnership and co-operation between government institutions and civil society's organisations.
- Combatting drugs supply and demand, and minimizing their harmful effects.

Their sub strategies stem from this main strategy. Their content focuses on the restriction of illegal substance supply and demand, and minimizing their prevalence. It also focuses on:

- Their strategy for drug supply restriction aims to combat drug production and smuggling, promotion and smuggling, and to control drug abuse and the excessive use of prescription medicine.
- Their strategy to limit the demand for illegal drugs, which aims to restrict drug use, circulation and drug trade.

There is also the Jordan Food & Drug Administration the "Narcotic, Psychotropic Substances and precursors Control Department" (NPPCD). This department is the responsible authority on the licit trade control of narcotic, psychotropic substances and controlled chemical precursors in Jordan to ensure the availability of these substances for medical & scientific purposes and prevention of its diversion from licit International Trade into illicit channels.

The control of these substances based on the provisions of the international conventions and Jordan laws acts and regulations. The control system is classified into the International control system which includes an import/export system, reporting system (annual, quarterly statistical reports), the assessment of annual medical and scientific requirements, the national control system as a licensing system for physicians, pharmacists and scientific institutions, distribution control system, reporting system, recording system and the inspection system to ensure licit use, and to monitor the application of control measures required by the laws and regulations.

Law enforcement and legislation

Criminal penalties listed in the Drug Abuse and Psychoactive substances Act number 11, 1988. The government prohibits import, export, transport, usage, production, and possession of banned drugs unless it is for medical and research

use and carried by authority. According to the Jordanian Drug Abuse and Psychoactive substances Act, the death penalty is applied if the crime is internationally linked.

Prison sentence of up to two years if caught taking drugs.

According to the Lieutenant Maqableh, "generally in Jordan, there is no strict protocol for the use of medication, this is seen in society and by doctors or pharmacists, who often prescribe drugs that may lead to addiction and may even escalate to illegal addiction".¹⁸

Recently, the newly elected Parliament passed an amendment to the Narcotics law that grants drug users the chance to receive treatment and not to be penalized when detained for drug-related offences for the first time. The law was approved by the senate on March 25, 2013, but is awaiting the King's confirmation.¹⁹

Jordan's initial anti-smoking regulation was a part of a public health law issued in 1971. This initial legislation established that jail sentences not exceed four months or fines, but was challenged by the absence of enforcement mechanisms and application of penalties for those who smoked in public places and on public transport or promoted tobacco use through advertisements.²⁰

In 2001, legislation, included as part of Juvenile Monitoring Legislation, was put in place to restrict tobacco sales to minors with penalties for minor, and for the vendor.

In 2003, Jordan adopted the Framework Convention on tobacco control with a tobacco control strategy that included a general ban on tobacco advertising, raise of public awareness on the hazards of tobacco use, enforcement of legislation, and encouragement of smoking cessation, among others. For example, a picture warning that covers 50% of the package size is now required on all cigarette packages in Jordan.

Jordan's public health law was amended to prohibit smoking in public and private institutions and all public facilities including hospitals, healthcare centres, schools, cinemas, libraries, museums, public and nongovernmental building, public transport, airports.

¹⁸ *ITN Source*, "Jordan: Officials in Jordan say the amount of drugs smuggled into the country is increasing", April 8, 2013.

¹⁹ *ITN Source*, "Jordan: Officials in Jordan say the amount of drugs smuggled into the country is increasing", April 8, 2013.

²⁰ *Globalization and Health*, Adel Belbeisi, Mohannad Al Nsour, Anwar Batieha, David W Brown and Henry T Walke "A surveillance summary of smoking and review of tobacco control in Jordan", December 2009.

In 2006 Jordan amended Articles 8 and 9 of Law No. 11 of 1988 on Narcotic Drugs and Psychotropic Substances, reducing the punishment for certain categories of drug crimes from the death penalty to life imprisonment.²¹

The Article 15 of the Law gives authority to the state to penalise one involved in narcotic drugs and psychotropic substances as well as the plants that have the capacity to produce narcotic materials including seeds, machinery and the containers that serve the purpose of transportation. Such an activity or involvement in the crime can bring the person under penalty.²²

Also, the article gives the court the decision-making right to find the sources that have helped to create the amount of money. If the sources are relevant to the law and the funds have been generated with the consent of the law then it is thought to be lawful. The court stands as the authority for making decisions and analysing the matters.²³

Condemnation

According to AND, the number of people involved in drug cases fell by almost four percent between 2011 and 2012. In 2012, 4,713 people were arrested for drug possession and 732 were arrested for drug dealing. The majority of those arrested for drug-related crimes are foreign nationals.²⁴

In 2009, AND apprehended 944 people for drug trafficking and 3,687 others for possessing and taking drugs that included opium, hashish, heroin, marijuana and amphetamines.²⁵

Drug seizures

In 2001, there were 42 seizures compared with 218 in 2007.

In the past four years, the government has installed X-ray machines in all its border posts and now uses police sniffer dogs to detect drugs.²⁶

²¹ *International Harm Reduction Association, "The Death Penalty for Drug Offences Global Overview 2010".*

²² *Ahmed Adnan Al-Nuemat "Money Laundering and Banking Secrecy in the Jordanian Legislation", Liverpool Law Rev (2013) 34:91–104.*

²³ *Ibid.*

²⁴ *U.S. Bureau of International Narcotics and Law Enforcement Affairs, "2013 International Narcotics Control Strategy Report (INCSR)" Report, March 5, 2013.*

²⁵ *The National newspaper, "Drug abuse on the rise in Jordan", Suha Maayeh, February 9, 2009.*

²⁶ *The National newspaper, "Drug abuse on the rise in Jordan", Suha Maayeh, February 9, 2009.*

The majority of Jordan's drug seizures take place along the country's northern border with Syria. The amount of opium and methamphetamine seized by AND increased in 2012 from 2011. However, seizures decreased for hashish, marijuana, fenethylline, heroin, and cocaine. Airport seizures were rare in 2012; improved screening capabilities at Jordan's airports also appear to have deterred traffickers from attempting to smuggle drugs by air.²⁷

Jordanian officials from the country's Anti-Narcotics Department say drug smuggling in the kingdom is on the rise. According to Colonel Anwar Tarawneh, Deputy Head of the Anti-Narcotics Department, the amount of drugs seized so far this year outnumbers the amount from 2012. "Last year, we captured 16 million capsules of the drug Captagon. So far this year, we have captured 9 million capsules, so despite the difference in the time period, there is an increase in the amount of smuggled drugs. Another example is the drug Heroin, last year we caught 45 kg, and this year 84 kg so far," said Tarawneh.²⁸

In January 2014, the AND agents have seized 1,600,000 pills identified as Tramal, which were on a truck entering the Kingdom.²⁹

Drugs seizures:³⁰

Drug	Quantity (2009)	Quantity (2010)
Amphetamine (tablet)	29 061 628	5429 790
Methamphetamine (kilogram)	-	2
Hashish (kilogram)	2 050	755
Cocaine (kilogram)	33,06	4,2

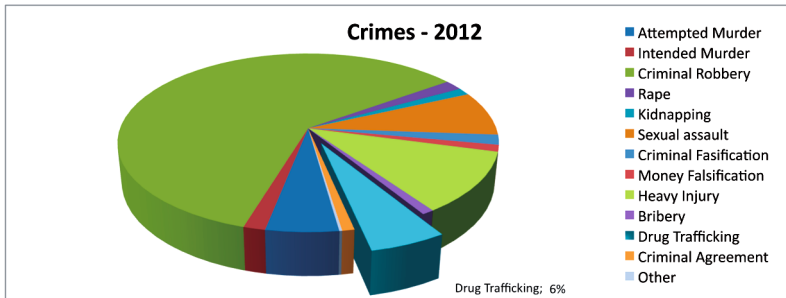
²⁷ U.S. Bureau of International Narcotics and Law Enforcement Affairs, "2013 International Narcotics Control Strategy Report (INCSR)" Report, March 5, 2013.

²⁸ ITN Source, "Jordan: Officials in Jordan say the amount of drugs smuggled into the country is increasing", April 8, 2013.

²⁹ The Jordan Times, "Anti-Narcotics Department seizes 1.6 million smuggled pills", January 30, 2014.

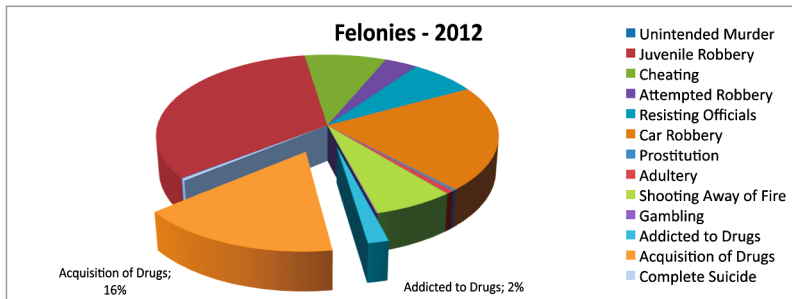
³⁰ International Narcotics Control Strategy Report (INCSR) and Meeting Of Heads Of National Drug Law Enforcement Agencies (HONLEA).

Prisons



31

In 2012, 524 crimes were for drug trafficking in Jordan.



32

373 addicted to drugs and 3,811 acquisitions of drugs.

According to the National Strategy, awareness programmes for inmates are implemented at correctional centers. They aim to increase inmates' awareness of drugs and the dangers and harms that they cause.

Implementation mechanism:

- Training courses about drugs to centres staff,
- Lectures and workshop to inmates,
- Benefits from inmates experience in the awarding process.

The screening executed as part of the biological and behavioural study on drug use and Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV) and

³¹ Department of Statistics, "Jordan Statistical Yearbook 2012".

³² Department of Statistics, "Jordan Statistical Yearbook 2012".

Hepatitis C Virus (HCV) prevalence in all 13 Correction and Rehabilitation centres (CRCs) in 2011, indicated that among the 2666 inmates screened for HIV, HBV and HCV, 40 tested positive for HBV, 95 tested positive for HCV and none tested positive for HIV.³³ Among those tested positive (HBV and HCV), 8% indicated previous experience in injecting drug use; an observed association was found between injecting drug use and HBV and HCV infections collectively (although not indicating a causal relationship between the two variables).³⁴

Correction and Rehabilitation Centres' Inmates:

A number of small scale "Knowledge, Attitudes and Practices" studies were conducted among CRC inmates in the past two years.

The first was a cross sectional biological and behavioural study on drug use and HIV, HBV and HCV prevalence carried out in all 13 CRCs in Jordan in 2010. A total of 2,666 inmates participated in all stages of the study.³⁵

The second was an evaluation study carried out in 2011 by NAP and PSD with support from UNODC in two main CRCs in Jordan, namely Om Al Lulu and Al Mowaqqar CRCs. The study evaluated two HIV prevention interventions implemented: a training of trainers and peer education programme executed among CRC inmates in the same year. The study included 167 inmates and 109 CRC staff members.³⁶

Prevention

According to the AND Director Col. Muhannad Attar, "raising awareness of the dangers of drug abuse is among the most important components of the work the Anti-Narcotics Department does to combat drug use in Jordan".³⁷

Attar said that the "department had a broad mandate for dealing with drug problems and focused on prevention and deterrence rather than punishment".³⁸

³³ *The Hashemite Kingdom of Jordan Ministry of Health, Public Security Department, UNODC, 2010.*

³⁴ *Hashemite Kingdom of Jordan, "Global AIDS Response Progress Reporting, Country Progress Report", January 2010 - December 2011.*

³⁵ *The Hashemite Kingdom of Jordan Ministry of Health, Public Security Department, UNODC, 2010.*

³⁶ *The Hashemite Kingdom of Jordan Ministry of Health, Public Security Department, UNODC, 2010.*

³⁷ *The Jordan Times, "Prevention key to combating drug abuse", by Rana Hussein, August 22, 2012.*

³⁸ *The Jordan Times, "Prevention key to combating drug abuse", by Rana Hussein, August 22, 2012.*

The AND's awareness programmes include lecturing at various institutes and correctional centre, approaching mosque preachers, and most importantly "reaching out to students at universities and high schools".³⁹

The National Centre for the Rehabilitation of Drug Addicts, part of the Ministry of Health since 2000, also provides treatment services for habitual substance abusers, as well as implementing awareness-raising lectures and media campaigns regarding the dangers of drugs which specifically target youth.⁴⁰

The National Strategy has planned some policies, programmes and objective procedures that aim at limiting the demand on drugs through enhancing societal awareness and education in regard to the drug epidemic, that are either directed towards society as a whole, a specific geographical area or a certain populace, age bracket or specific education.

The National Strategy aims to encourage individual or society self-immunisation through:

- Enhancing Arab and Islamic values and deals that call for society protection and prevention from harmful practices,
- Activating the role of every family, place of worship and educational media, and civic organisations and commissions to raise the level of social awareness in regard to drug dangers,
- Empowering young people, particularly with regard to their personal and social skills, for their protection from exposure to drug dangers and brain stimulus,
- Activating the awareness role in official and private organisations in order to enhance the awareness of workers in medical, scientific and academic organisations.

There is also a Jordanian Family Awareness programme. It is a programme directed at families with the purpose of educating parents, and family members about the dangers that may happen as a result of using drugs, how to discover drug use within their family and how to deal with such cases, furthermore, how to co-operate with relevant authorities in order to protect their children from drugs, and to work towards strengthening family foundations.

Mechanism of programme action:

- Prepare advertisement segments for TV, each segment to be a half minute with focus on a specific message.

³⁹ *The Jordan Times*, "Prevention key to combating drug abuse", by Rana Husseini, August 22, 2012.

⁴⁰ MANARA Network for child rights, "Country Profile of Jordan, A review of the Implementation of the UN Convention on the Rights of the Child", August 2011.

- Prepare a five minute radio programme for several radio stations. Each segment discusses a certain topic relevant to family affairs and in particular, its relation with drugs, while providing solutions to drug problems.
- Distribution of instructional leaflets, hand outs and posters in public and private places including governmental departments.
- Organisation of community lectures and speeches to enhance family values by which families will be able to protect its members from drugs.

The “Out of Jordan University Students Program” takes care of the education and awareness of Jordan university students. It aims at keeping them aware of the problems that result from drugs.

Implementation Mechanism:

- Co-ordination with the Ministry of Education to meet with students who study outside Jordan in certain timings and place.
- Co-ordination to lecture those students about drugs, risks and harms and the ways of preventing their use.
- Direct special messages via the internet in accessions, to alert students to drug dangers.

There are also some NGOs that work on prevention, like the “Arab Society for Public Awareness from Dangerous Drugs and Narcotics”.⁴¹ Their goal is to: raise social and cultural awareness by all available means; raise public awareness of the dangers arising from dealing with dangerous drugs; contribute to the development plans to ensure and protect the community from the dangerous drug; collaborate with public and private institutions; work to develop legislations and obtain assistance; offer education on the consequences of drug abuse and the dangers of drugs on health, as well as on social and economic development; conduct appropriate programmes for the rehabilitation of drug abusers and addicts to be rehabilitated in the community and to make suggestions and recommendations that would ensure raising the level of performance of services directed at the preventive and curative levels, offering in-kind and financial assistance to the families of addicts, and establishing centres and prevention and treatment.

The NGO “Aljusour Association for Social Security and Fighting Drugs” aims to establish counseling centres; raise awareness, and treat addicts and refer them to addiction hospitals; publish brochures, magazines, educational plays and works of art;

⁴¹ Phenix Centre for Economic & Informatics Studies, “Comprehensive Guide to Civil Society Organisations in Jordan 2010”.

raise awareness and provide education to civil society institutions; offer help to poor families and provide assistance to all segments of society (the elderly, the poor, students and children).⁴²

Drug related treatment

In Jordan, many addicts do not seek help because of the stigma and the fear of law enforcement.

Treatment/Death in 2008:

Treatment	Management of fight against drug centre	247
	National centre for addicts rehabilitation	372
Death		9

However, the National Strategy plans the construction and development of necessary programmes for addicts' rehabilitation and post-care, in order to re-integrate them into society. Furthermore, it also plans the construction and the development of necessary care programs to support addicts' family and those whom are subjected to harm, to guide and protect them.

According to the National Strategy's programme, addicts must receive treatment in clinics and specialised centres, this program includes follow-up on addict during treatment and after treatment. In addition, addict inclusion into society through social activities, personal skills and the attempt to find a proper work to keep him/her busy.

Implementation Mechanisms:

- Direct placement of a drug abuser (addict) into one of addiction treatment centers that belong to public security directorate or Ministry of Health,
- Follow-up on the addict's treatment and treatment approaches which consist of medical, psychological and social aspects. Provide him with a life skills programme,
- Follow-up on the addict after his discharge, secure a training course with the co-operation and co-ordination of the Ministry of Health, vocational training corporation and volunteer organisations, in order to include him into society, and establish the desire to reject drugs in him,
- Organise a follow-up record to ensure the rejecting of drugs,

⁴² Phenix Centre for Economic & Informatics Studies, "Comprehensive Guide to Civil Society Organisations in Jordan 2010".

- In case he returns to drugs, a study must be conducted to reveal the reasons for this, and re-admission into an addiction treatment centre,
- Establish a national record for addicts that includes a general database.

Residential treatment programmes for drug users

The Jordanian Anti-Narcotics law states that a person “shall be exempted of punishment whoever applies willingly for treatment”, to encourage addicts to apply for treatment. It is the Government which runs the rehabilitation centres.

The National Centre for the Rehabilitation of Addicts costs more than €2 million and provides free medical services and counselling for Jordanians fighting addiction.⁴³ Since its inception in 2001, the centre has treated more than 1,700 addicts (from 2001-2009). Forty-seven women have also sought the centre's services since 2005, with 25 receiving treatment as resident patients. There are also two other centres that provide rehabilitation, one run by the public security department and the other by the private sector.⁴⁴

Since 2001, the National Centre for Rehabilitation of Addicts has dealt with almost 3,000 cases. Officials say many more Jordanians seek treatment abroad in order to avoid negative reactions from their community. The National Centre for Rehabilitation of addicts was the one of the first to open in the country almost 20 years ago and, according to the director of the centre, Lieutenant Mazen Maqableh, it remains the only facility in the world that operates under the umbrella of the Anti-Narcotics Department. According to Maqableh, they “treat all drug addictions, whether it is addiction to illegal drugs, such as Marijuana, Heroin or Cocaine. We also treat alcohol and medicinal drug addiction, which fall under the legal addiction or abuse of medicine”.⁴⁵

The rehab centre offers several forms of treatment, in addition to medical and psychological observation; a lot of focus is placed on team sports and arts such as pottery making.⁴⁶

⁴³ *The National newspaper*, “Drug abuse on the rise in Jordan”, Suha Maayeh, February 9, 2009.

⁴⁴ *The National newspaper*, “Drug abuse on the rise in Jordan”, Suha Maayeh, February 9, 2009.

⁴⁵ *ITN Source*, “Jordan: Officials in Jordan say the amount of drugs smuggled into the country is increasing”, April 8, 2013.

⁴⁶ *ITN Source*, “Jordan: Officials in Jordan say the amount of drugs smuggled into the country is increasing”, April 8, 2013.

According to the former Director of the Centre, Major Mazen Qublan, 50% of the addicts who receive treatment return to their addiction after they leave the centre and 65% of that group return to drugs because of the influence of their circle of friends.⁴⁷

Harm reduction

Health correlations and consequences

According to the Hashemite Kingdom,⁴⁸ Jordan is still characterised by a low prevalence of the HIV epidemic, both among the general population and among key populations at higher risk of HIV exposure.

The total number of HIV positive cases registered within the period (1986-2011) was 847 (29% Jordanians and 71% foreigners).

The total number of HIV positive cases registered in 2010 and 2011 was 36 (78% males and 22% females).

Until the end of December 2011, a total of 99 Jordanian PLHIV had died of AIDS.

		<25 years	>25 years
Number of years of injecting (number of respondents: 187)	Less than or equal to two years	72.2%	27.8%
	Three to five years	27.8%	41.8%
	Six to ten years	0%	23.8%
	Greater than ten years	0%	6.6 %

⁴⁷ Ammon News, "Addiction in Jordan: drugs easy to find, laws lax on dealers", 08/05/2010. <http://en.ammonnews.net/article.aspx?articleNO=9276#.UwlgHYUR7Dy>.

⁴⁸ Hashemite Kingdom of Jordan, "Global AIDS Response Progress Reporting, Country Progress Report", January 2010 - December 2011.

Number of different injecting partners in the past month (number of respondents: 154)	none	24.0%
	one	5.8%
	two to three	38.3%
	six to nine	18.2%
	equal or greater than ten	13.6%

		<25 years	>25 years
Frequency of injecting last month by age (number of respondents: 176)	More than twice a day	25.7%	24.1%
	About once a day	5.7%	14.2%
	Weekly but not every day	28.6%	31.2%
	Monthly but not every week	40.0%	30.5%

According to the data from the Integrated Biological and Behavioural Surveillance in 2011:

Proportion of respondents who shared a needle last time they injected (number of respondents: 203): 61.1% of them reported using a needle or syringe that had previously been used by someone else.

Frequency of sharing needles in the past month (number of respondents: 198): 15.2% always, 22.7% most times, 4.0% about half the time, 27.3% occasionally and 30.8% responded never.

Frequency of injecting with a needle that no one else had ever used in the past month (number of respondents: 192): 24.0% every time, 14.1% almost every time, 43.2% sometimes and 18.7% never.

Frequency of cleaning needles and syringes (number of respondents: 193): 33.7% every time, 23.8% almost every time, 22.8% sometimes and 19.7% never.

Frequency of giving, lending, selling or renting a needle or syringe to someone else after already using it (number of respondents: 201): 7.5% every time, 16.4% almost every time, 46.8% sometimes and 29.4% never.

Frequency of drawing drug solution from a common container shared by others in the past month (number of respondents: 200): 23.5% every time, 23.5% almost every time, 30.5% sometimes and 22.5% never.

Percentage of people who inject drugs that have received an HIV test in 2011 and know their results (data from the Integrated Biological and Behavioural Surveillance):

Proportion of respondents who have ever had an HIV test: 26.9% of a total of 182 respondents.

Voluntary Counselling and Testing data indicate that only one HIV positive case was diagnosed for an IDU in 2011.

Responses to health correlates and consequences

Jordan is dealing with the issue of HIV on a national level, through a number of policies. The Ministry of Health established the National AIDS programme at the time the first HIV case was discovered in 1986. Jordan has endorsed the concept of the three ones and in 2005 launched the National AIDS Strategy for Jordan 2005 – 2009 outlining the key goals, objectives and initiatives for the response. A range of activities are being implemented under the umbrella of the NAP and in accordance with the National AIDS Strategy, include peer education and life skills programmes for young people, voluntary counselling and testing services (VCT), hotline, preliminary behavioural studies among vulnerable groups, and provision of free antiretroviral drugs to people living with HIV.

Technical support has recently been provided by UNAIDS to the Ministry of Health in 2011 to update this document and develop a new national strategic plan, employing a participatory process that involves all key national stakeholders. The new National Strategic Plan on HIV and AIDS (2012-2016) aims to continue and further guide Jordan's national AIDS response. Based on the thorough analysis of the existent epidemiological situation, key drivers and risk behaviours related to HIV transmission and the gaps and priorities of the national response to date, the NSP identified 5 key strategic areas for the period 2012-2016:⁴⁹

- Strengthening the availability and reliability of strategic information for an evidence informed response;
- Strengthening HIV prevention with a clear focus on key populations at higher risk;
- Improving HIV case detection and scaling up coverage, utilisation and quality of treatment, care and support for people living with HIV;
- Creating a supportive legal and policy environment for an effective HIV response;
- Building organisational, institutional and technical capacity for an effective national response.

⁴⁹ *The Hashemite Kingdom of Jordan Ministry of Health, UNIADS, 2011.*

In the Jordan National Strategy for Viral Hepatitis, the Ministry of Health provides programmes for special groups such as Injection drug users (IDU) or alcohol users. Therapy is recommended for recovered drug users, including those on methadone maintenance. Abstinence should be recommended before and during antiviral treatment in alcoholic persons and treatment of alcohol abuse should be linked with efforts to treat hepatitis C in alcoholic patients.⁵⁰

A total of 207 IDUs from four main cities in Jordan, namely Amman, Zarqa, Irbid and Aqaba, participated in the study.

Data is available on the following indicators:

- Ability to obtain new syringe if needed (202 respondents): 86%;
- Percent who mentioned this location as a place they knew of to obtain new, unused needles and syringes (number of respondents: 207): 49.8% pharmacist/chemist, 17.9% drugstore, 10.6% health worker, 1.9% hospital, 1.9% drug workers, 8.2% other drug user and 6.3% from drug dealer.

Training programmes available

The training programmes for anti-narcotics personnel on both local and international levels are continuous in order to reach the highest possible skills in terms of combat, sensitisation and treatment.

There also exists a “Friends” programme. It is a comprehensive programme which aims to train people and prepare them to fight drugs, where bad habits are replaced by good ones.

Implementation mechanism:

- Conduct training courses on fighting drugs;
- Document participant's names to ask their help in future awareness programs;
- Follow-up on those peoples achievements;
- Assessment of programme performance through the national council.

⁵⁰ The Hashemite Kingdom of Jordan Ministry of Health, “Jordan National Strategy for Viral Hepatitis”, 2010.

Fight against corruption and money laundering

A new regulation was passed in July 2009, to include real estate agents, gold and silversmith wholesale, and retail outlets under the terms of the 2007 Law. Jordan underwent its first mutual evaluation under MENAFATF in May 2009 providing recommendations on how best to improve its reporting regime beyond the banking and insurance industry. Work commenced on the establishment of a joint reporting data base with customs. The Anti-Money Laundering Unit located within the Central Bank referred 115 cases of suspicious transactions to the Public Prosecutor's Office by the end of 2009.⁵¹

Jordan is party to the UN Convention against Corruption (UNCAC) and has signed, but not ratified, the UN Convention against Transnational Organised Crime.

Jordan signed the UNCAC in 2003 and ratified it in 2005. The implementing legislation — Law No. 28 of 2004 — was adopted by the Parliament on 8 June 2004 and published in the Official Gazette on 1 August 2004. The Law stipulates that the Convention is considered valid and effective for all its intended aims, and that the Prime Minister and Ministers shall be responsible for the implementation of its provisions.⁵²

Internationally, Jordan has a well-developed legal network to address corruption. Beyond being one of the first Arab countries to sign the UNCAC, Jordan hosted the first session of the Conference of the States Parties to the UNCAC and joined the voluntary UNCAC pilot review programme. Jordan plays a key role in the Good Governance for Development (GfD) in Arab Countries Initiative and its Network on Supporting UNCAC Implementation in Arab Countries. Jordan also participates in the Council of Arab Ministers of Justice and Council of Arab Ministers of the Interior, as well as the Programme of Governance in the Arab Region (POGAR). Moreover, the reviewing experts identified as one of the good practices and lessons learnt from the review process that the Jordanian Anti-Corruption National Strategy has a distinct component on international co-operation.

In general, the crime rates in Jordan are clearly low in comparison to the similar international crime rates (reached around 7.5 per thousand in 2012 for all the general crimes). However, Jordan is primarily affected by the regional narcotic drugs and psychotropic substances trading activities.⁵³

⁵¹ European Commission, "Implementation of the European Neighbourhood Policy in 2009: Progress Report Jordan", 2010. Available at: http://ec.europa.eu/world/enp/pdf/progress2010/sec10_525_en.pdf.

⁵² UNCAC, "Implementation Review Group, Executive summary: Jordan", CAC/COSP/IRG/2011/CRP.12.

⁵³ Ahmed Adnan Al-Nuemat "Money Laundering and Banking Secrecy in the Jordanian Legislation", *Liverpool Law Rev* (2013) 34:91–104.

Jordanian Anti-money Laundering Law No. 46 for Year 2007 labelled money laundering to be an offense.

The Law clarifies that all the funds that are generated seem to have been collected by unlawful means and criminal activities. If anyone is found to be guilty of money laundering or facilitating the act to the smallest extent, he will then be made answerable to the law and ultimately be punished in this regard. The Law also refers to the international laws and presents the image that Jordan supports the international laws against money laundering and therefore, the one found guilty must be punished as mentioned in the international as well as Jordanian law.⁵⁴

The Law introduces a committee for its implications with the Governor of Central Bank being the head. The committee is termed as (National Committee for Combating Money Laundering).

Considering the money laundering issue from terrorist activities, Jordanian Penal Code makes it must for the banks to check their operations. On the other hand, the one that is involved in depositing such money and the one that appears to request the transfer of money are both proposed to be given a penalty. In this way the ones involved are made answerable to the law and are subjected to imprisonment of 3-15 years as their sentence.

International and Regional Co-operation

International co-operation

Jordan is party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances and the 1961 UN Single Convention, as amended by the 1972 Protocol.

Jordan remained engaged in international co-operation against drug trafficking through its membership to the Unified Arab Law, Interpol, the League of Arab States and the Organisation for Social Defence against Crime.

Regional co-operation

Jordan is one of the only countries in its region to have excellent working relations with all of its neighbours on counternarcotic, including Israel, as well as the United States.

⁵⁴ *Ibid.*

In 2012, Jordan and Israel conducted a large joint exercise targeting drug smuggling, and Jordan also partnered with Lebanon to conduct a controlled delivery exercise. JAND and the Public Security Directorate work closely with U.S. Immigration and Customs Enforcement, the Regional Security Office in U.S. Embassy Amman, and the U.S. Drug Enforcement Administration. In 2012, JAND officials took part in a Regional Targeting Conference to co-ordinate common action against top drug trafficking threats in the region and a seminar, organised by U.S. authorities, on the use of technical equipment to enhance and expand drug investigations.⁵⁵

Bilateral co-operation

Jordan continues to remain committed to existing bilateral agreements providing for counternarcotic co-operation with Syria, Lebanon, Iraq, Saudi Arabia, Turkey, Egypt, Pakistan, Israel, Iran and Hungary. Jordan and the United States signed a Customs Mutual Assistance Agreement in 2004.

Data availability

In July 2004, a national poison information centre was launched in Jordan to meet a significant need, recognised by the Jordanian healthcare professionals and regulators, for a comprehensive and centralised resource of information of poisoning and clinical toxicology. The centre started the dissemination of poison information and poison prevention education with the ultimate goal of preventing accidental poisonings and decreasing morbidity and mortality associated with toxic exposures. Since 2006 the Jordan National Drug and Poison Information Centre (JNDPIC) has been in operation with official staff available at all times. In addition the centre provides a comprehensive collection of the finest, up-to-date, toxicology resources in the country; both national and international books and databases are available and can be used, for free, by anyone via the centre.

All data and statistics pertaining to Drug situation including drugs cases, seized quantities, involved persons, are exclusively available at the Anti-Narcotics Department.

⁵⁵ U.S. Bureau of International Narcotics and Law Enforcement Affairs, "2013 International Narcotics Control Strategy Report (INCSR)" Report, March 5, 2013.

Specific theme

“Jordan Country Study of Disadvantaged Children”

A study conducted by the National Council for Family Affairs with the support of the World Bank in May 2004.

The number of juveniles arrested for drug abuse for illegal drugs in Jordan is comparatively negligible, but the prevalence of drug abuse cannot be inferred by arrest data alone. In addition, half of the children interviewed by the Ministry of Social Development/Social Defence indicated a history of abuse of cheap, volatile substances, like glue and paint thinner. Abuse of volatile substances is not illegal, but it is a phenomenon that has serious consequences for the health of children.

Hence, while the use of illegal drugs by juveniles may still be at low levels, the picture for abuse of volatile substances may be quite different. For example, it is a reasonable estimate that more than 3,000 children currently in the juvenile system likely have experience with sniffing glue and paint thinner, eating shoe polish and with other dangerous substances. This estimate of magnitude and prevalence does not even include the population of children who are not involved in the juvenile system. Therefore, the situation requires action to delineate the extent of the problem, to identify those children most at risk, and to design programmes to prevent such abuse.

In an innovative program for drug treatment, the Anti-Narcotics Directorate of the Department of Public Security encourages voluntary action by substance abusers to get help. This position of openness and decriminalisation of substance abuse will make it possible for treatment to be extended to a wide variety of individuals who may have problems with addiction or pre-addiction.

Drug-related offenses made up only 1.1% of all juvenile crimes, a figure which does not include volatile substance abusers.

Regarding the illegal use of “hard” drugs, data collected within the Anti-Narcotics Division of Public Security for conviction and arrest of juveniles/youth under 20 was as follows:

Year	1997	1998	1999	2000	2001	Total
Number of Convictions/Arrests	28	21	26	29	51	155

These data suggest that use of illegal drugs by juveniles is still at low levels. However, arrest rates will not reflect user rates in the population. Participatory research with young people will be increasingly important to determine prevalence of use in Jordan before any definitive case can be put forward.

When volatile substance abuse (glue and paint thinner etc.) is considered, the picture may look very different. In 2001, an internal study by the Anti-Narcotics Division of Public Security was undertaken in 3 centres of the Social Defence Division (SDD). 122 children were interviewed and 63 (52%) had a history of abusing volatile substances. If this figure is generalizable to all the entire population of children in SDD centres (approximately 6000 children) then more than 3000 children in the juvenile system have experience with sniffing glue, paint-thinner, eating shoe polish, etc. Although these practices are not illegal, they are very dangerous. If 52% is generalizable to the population of children from backgrounds of poverty, low education, etc. then it takes on a different meaning.

The National Strategy set up in 2009 by the Hashemite Kingdom of Jordan fixed a priority plan for youth.

The priority of the strategic plan aims at focusing on the youth segment, the largest segment in society and the most vulnerable to this epidemic. Statistics show that the rate of youth using drugs is the highest among all age brackets, statistics also show, that using cannabis (hashish) is the most popular among young people.

The data indicates the persistence of the following strategic problems:

- First strategic problem: the wide spread of cannabis (hashish) among young people in the age bracket of 17-39 years old;
- Second strategic problem: addition on brain stimulant drugs, sedatives which are prescribed medications such as: valium, chemadrine, brazing revitalize and so forth;
- Third strategic problem: weak treatment programmes and inefficiency of addict rehabilitation;
- Fourth strategic problem: increase in the cases of drug trafficking and trade and in the substantial volume of the seized drugs.

The strategic objectives are to:

- Put a halt to drug prevalence and the dealing with it whether trafficking, trade and use.

- Implement a continuous awareness programme for all segments of the Jordanian society, while highlighting drug dangerous consequences and the negative effect on mental power, and subsequent illness;
- Provide treatment and rehabilitation in addict's programmes, to aid their reintegration into society.

Perspectives for 2014

According to the Jordan Authority, the perspective for the anti-narcotics department is to expand their combating efforts by opening new divisions and branches to cover the whole country and in addition to develop the combating means, by using modern instruments and techniques.

Regarding to treatment they are working on developing the occupational therapy unit in treatment centres, in order to teach addicts on new professions to help them in developing a new life after recovering from addiction.

Furthermore, they are working on implementing a comprehensive awareness programmes that include all segments of society, in order to make them aware of the dangers of narcotics.

Conclusion

Despite the fact that Jordan has a minor domestic market for illegal drugs and a low prevalence of drug addicts, the country remains a transit country for opiates, cannabis and synthetic drugs. However, a considerable effort has been made to control their extended land borders with neighboring countries, especially in the desert at their Northern border with Syria and their South Eastern border with Saudi Arabia.

The National Strategy aims to utilise modern means to combat drug abuse and drug trafficking, with the goal to prevent exploitation of Jordanian's borders, as well as protect the Jordanian's society from potential drug dangers.

The National anti-drug institution AND tries to integrate governmental policies, and co-operate with other institutes and partners in the drug field. Jordan has taken measure to increase public awareness on the dangers of drugs, for example, in collaboration with some NGO's, they visit students in schools and Universities to lecture and discuss drugs.

The 1988 law against drugs can be considered as quite strict. The death penalty is still applied for international crimes linked to drug trafficking. In regard to legislation, many drug addicts do not seek help for treatment due to stigma from the social and religious communities, plus fear of the law enforcement pushes them to stay in their condition.

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