



Mohammed Bin Rashid School Of Government

POLICY BRIEF

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Summary

Children in the UAE are facing increasing mental health issues during the COVID19pandemic. Their daily routines are interrupted and the world they know is changing, as they stay at home isolated from their peers and friends. This policy brief addresses children's mental health in the UAE amid the COVID19pandemic and analyzes the impact of the pandemic on mental health policy. Mental health in the UAE has witnessed gradual advancement in the past few years, however, there is still more to address, especially in relation to children's mental health and wellbeing. The local mental health scene is clouded by various challenges, including shortage in service providers, fragmentary regulations, and social stigma. The COVID19pandemic, as globally predicted, will lead to an exponential increase in mental health patients, and the UAE is not an exception. It is true that the pandemic presents unprecedented challenges to the mental health system, however, it also offers many opportunities to advance it.

عدامة المحامة على المحامة على

كليـــة محمــد بن راشـــد للإدارة الحكـــومـــيـــة MOHAMMED BIN RASHID SCHOOL OF GOVERNMENT

Are the Children OK?

The Impact of COVID-19 Pandemic on UAE Children's Mental Health - Policy Analysis and Recommendations

Lama Zakzak, Engy Shibl

Issue Overview

A significant proportion of the world's population has experienced mental and psychological disabilities. Recent global estimates show that almost 1 in every 20 people suffers from depression (WHO, 2017)¹. These numbers are expected to grow exponentially. People around the world are facing increasing mental health issues during the COVID-19 pandemic. The COVID-19 outbreak has forced millions to stay physically isolated, while consuming extensive news coverage on the pandemic and an unknown future, and children are among those impacted².

Before the pandemic, depression came at the third rank in the global burden of diseases, and it is projected to rank first in 2030³. Another concerning estimate reveals close to one million

- World Health Organization (2017). Depression and Other Common Mental Disorders: Global Health Estimates. Geneva: WHO. Retrieved from: https://apps. who.int/iris/bitstream/handle/10665/254610/WHO-MSD-MER-2017.2-eng.pdf.
- Raja, p. (2020). Experts explain how to manage mental wellbeing during COVID-19. Retrieved from: https://www.weforum.org/agenda/2020/04/covid-19-mental-health/.
- 3. United Nations. Mental Health and Development. Retrieved from: https://www.un.org/development/desa/disabilities/issues/mental-health-and-development.html

people commit suicide every year, making it the third leading cause of death among young people⁴. In the Arab world, it is estimated that 17.7 per cent of the population suffers from depression and this figure is only the tip of the iceberg because not everyone with mental health problems comes forward and seeks treatment due to the stigma associated with mental health diseases⁵. These numbers are expected to grow as people deal with the consequences of COVID-19 pandemic.

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But in order to address mental health policy in the UAE, first we need to define it. According to World Health Organization (WHO), mental health can be defined as "a state of well-being in which every individual realizes his or her own potential, can

cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community."6 We also need to stress that mental health problems are not merely confined to adulthood. Children and adolescents encounter mental health and wellbeing challenges as well. Children can be faced with daily stressors that impact the quality of their life, including exam stress, bullying, anxiety, depression, cyber bullying, among others. Children with diagnosed mental health disorders, an often marginalized group, live with mental conditions that might make their daily school life challenging if they do not receive professional help. In regard to bullying, 31% of students in the UAE reported being bullied at least a few times a month, compared to 23% on average across OECD countries.7 In addition to bullying in school, "cyberbullying" is a growing problem even before the overwhelming majority of students moved online during the COVID-19 pandemic. For example, a regional survey by the MBRSG highlighted that 75 percent of respondents across the 22 Arab countries viewed cyberbullying as a concern (45 percent saying that they are very concerned). According to the survey, cyberbullying is considered the 3rd most wide-spread internet-related concern in the Arab region, after "cyber-terrorism" and "cybercrime"8. Furthermore, around 21% of students in the UAE agreed or strongly agreed that they feel lonely at school, compared to 16% OECD average.9 The UAE Global School-based Student Health Survey (2010) by the WHO focusing on students aged 13-15

^{4.} See footnote 3.

^{5.} Mental Health (2020). Retrieved from: https://u.ae/en/information-and-services/health-and-fitness/mental-health

^{6.} World Health Organization (2004). Promoting mental health: concepts, emerging evidence, practice (Summary Report) Geneva: WHO. Retrieved from: https://www.who.int/mental_health/evidence/en/promoting_mhh.pdf.

^{7.} OECD. (2018). PISA Report. Retrieved from: https://www.oecd.org/pisa/publications/PISA2018_CN_ARE.pdf.

^{8.} Salem, F. (2017). The Arab World Online 2017-2021: Digital Transformations and Societal Trends in the Age of the 4th Industrial Revolution. Retrieved from Dubai: http://www.mbrsg.ae/HOME/PUBLICATIONS/Research-Report-Research-Paper-White-Paper/The-Arab-World-Online-2017.aspx

^{9.} See footnote 7.

revealed that "the percentage of students who ever seriously considered attempting suicide during the past 12 months" was 15.5%, and those "who actually attempted suicide one or more times during the past 12 months" was 12.6% 10. So far the response has not been proportionate to the problem. The mental health system in the UAE does not prioritize the implementation of effective mental health services as required.

Adding to that, social stigma that surrounds mental illnesses makes it difficult for people with mental health conditions to seek help or cope with it, leaving many of them to feelings of isolation, discrimination and despair. Mental health conditions can impede individuals' potential. There is a growing international recognition of the seriousness of mental health problems on global health, economy, and sustainable development. Although the social stigma still exists on mental illness, there is a silver lining. Opening up about mental health and wellbeing concerns is becoming less taboo for school-aged children. However, school children in the UAE do not receive enough support to help them deal with their mental health issues and empower them to face new psychological and emotional challenges in the future.

Contextual Overview

1. Mental Health Policy and Regulations

In terms of regulation, the Ministry of Health and Prevention (MOHAP) is the federal entity that generally manages all healthcare legislation. The UAE has a standalone mental health policy established

in 2016¹¹. On the local level, Abu Dhabi and Dubai have separate regulating bodies, the Department of Health - Abu Dhabi (DHAD) and Dubai Health Authority (DHA), respectively. Healthcare providers



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and professionals obtain their practice licenses from different regulating bodies including MOHAP, HAAD, and DHA, while the Community Development Authority (CDA) issues licenses to counselors. There are different regulations and requirements on federal and local levels and some difference can also be found between different regulatory bodies. Currently, there is no specific mental health policy that addresses the needs of school children and/ or staff. Similarly, there are no direct specifications from the Ministry of Education or from regulatory bodies of private schools on mental healthcare provision in schools. In the past few years, the UAE has made leaps in the field of wellbeing and

^{10.} World Health Organization (2010). Global School-based Student Health Survey. Retrieved from: https://www.who.int/ncds/surveillance/gshs/UAE 2010 FS.pdf.

^{11.} Retrieved from: https://www.mohap.gov.ae/FlipBooks/PublicHealthPolicies/PHP-LAW-AR-68/index.html.

positive education. An advancement that resulted in many successful wellbeing-focused initiatives in education, workplaces, and communities. However, this might have also dwarfed the need for mental health policy reform.

Policy reform in mental health cannot be conceived without an understanding of the economic factors impacting it. One of the problems in this area is insurance regulation. Most insurance plans do not cover treatment of mental health issues, and the coverage is even more limited when it comes to psychotherapy or counseling. When a child's case requires professional intervention, many parents may not be able to afford expensive counselling sessions, especially so when they are excluded from insurance coverage. The exclusion of mental health services from most insurance plans makes it inaccessible to families.

In the past few years, the mental health scene has changed gradually, and now it is changing rapidly due to the COVID-19 pandemic. The UAE leadership has realized early on the importance of mental health in overcoming the COVID-19 pandemic. Recently, a federal law draft on mental health has been approved on April 202012. From the start of the pandemic, the UAE has led nationwide drive to boost mental health utilizing different platforms and methods, such as the National Campaign for Mental Support (NCMS) which aims to help the public overcome the psychological impact resulting from the spread of COVID-19. The NCMS is an online initiative that utilizes modern digital solutions and social media channels. The campaign features daily online sessions streamed live on social media in which

mental health professionals and experts provide support and answer public questions. Moving to online platforms has offered a solution for healthcare services, including mental health. After the COVID-19 outbreak, the UAE has moved towards telemedicine to help provide healthcare to millions during their home stay¹³.

2. Challenges in Mental Health Policy

The field of mental healthcare in the UAE is relatively young and faces a number of challenges, mainly in its availability, accessibility, and the way it is regulated and delivered. These challenges have been intensified during the COVID-19 pandemic, as the number of individuals seeking mental health support is expected to increase and mental health service delivery has been obstructed. In order to understand the context in which mental health delivery operates, it is important to evaluate the different regulatory, economic and social factors impacting its advancement during and after the pandemic. The following points address some of the challenges facing mental health policy for children in the UAE¹⁴:

Shortage of Mental Health Providers:

People in the UAE are becoming increasingly aware of the importance of opening up about mental health issues and receiving treatment if needed, and this behavioral change will soon generate an urgent need to advance and expand mental health services. This shift in help-seeking behavior can be observed especially among children and youth. However,

^{12.} Retrieved from: https://www.albayan.ae/across-the-uae/news-and-reports/2020-04-06-1.3822414.

^{13.} Zaman, S. (2020, April 11). Coronavirus: COVID-19 pandemic increases UAE's acceptance of telemedicine. Retrieved from: https://gulfnews.com/uae/health/coronavirus-covid-19-pandemic-increases-uaes-acceptance-of-telemedicine-1.70896641.

^{14.} Some of the challenges presented here are based on the findings of a policy council conducted in February 2020. For more information on the policy council, please refer to Zakzak, L., Moonesar, I. & Shebl, E. (forthcoming). Let's Talk about It: Promoting Children's Mental Health and Wellbeing in UAE Schools. MBRSG publication.

across the UAE, people may struggle to get care due to a shortage of mental health providers¹⁵, and this problem is magnified when it comes to specialists in child and adolescence psychology.

According to the WHO Mental Health Atlas (2017), the numbers of psychologists and psychiatrists has increased in the past few years. The rate of mental health professionals per 100,000 is as follows: 1.65 psychiatrists, 0.76 psychologists, 0.36 social workers, 0.04 occupational therapists and 4.37 mental health nurses.¹⁶ Nonetheless, compared to the global average, these numbers are not as high as necessary. The scene is even bleaker when it comes to school counselling. Not all schools in the UAE have counselors to deal with children's mental health needs, let alone having a specialist in child and adolescence psychology. Even in schools with counselors, the ratio of counselor to students is largely unbalanced.¹⁷ As a consequence, school counselors are often overworked and cannot devote enough time and attention to students who need their support. Many of these child counselors are not specialists in child psychology, and they often struggle when dealing with cases that require serious interventions, as they don't have clear guidelines on case referrals.18

Shortage of service providers has been a persistent issue and there are several factors contributing to it. Hiring mental health professionals can be a daunting

task, due to fragmented regulations and licensing restrictions. Service providers from the private sector often encounter difficulties when attempting to expand their professional staff. ¹⁹ Moreover, there is a general lack of local supply of psychology graduates in the UAE, ²⁰ especially graduates qualified to work with children. What contributes to this is the limited number of Master's programs in psychology offered at local universities, let alone localized and indigenous programs. ²¹ Also the social stigma associated with mental illness might drive many students away from perusing careers in psychology. ²²

The complications of this shortage in service providers has been revealed in the pandemic more than any other circumstance, as more pressure is being placed on the health system. Children now are facing unprecedented challenges due to the disruption of their daily routines and an ongoing tension surrounding them. They are isolated from what they know outside their homes and set apart from their friends and peers, and many of them might not understand why. The challenge also exists for parents, as they have to adapt to a completely new lifestyle and support their children through these uncertain times. Without available professional support, and out of desperate measures, many might seek answers by utilizing unreliable sources which can lead to detrimental consequences on both body and mind.

^{15.} Ahmmed, S. (2015). Thinking and practicing psychology in a kaleidoscopic UAE: Notes from a social responsibility perspective. In C. Al-Karam & A. Haque (Eds.). Mental health and psychological practice in the United Arab Emirates. Palgrave: UK.

^{16.} World Health Organization (2017). Mental health atlas: United Arab Emirates Profile. Retrieved from: https://www.who.int/mental_health/evidence/atlas/profiles-2017/ARE.pdf?ua=1.

^{17.} See footnote 13.

^{18.} See footnote 13.

^{19.} See footnote 13.

^{20.} See footnote 15.

^{21.} See footnote 15.

^{22.} Haque, A. & Al Kindi, B. (2015). Mental health system development in the UAE. . In C. Al-Karam & A. Haque (Eds.). Mental health and psychological practice in the United Arab Emirates. Palgrave: UK.

Fragmented Regulations:

As discussed earlier, the mental health regulatory scene is managed by multiple regulatory bodies, each with its own guidelines and requirements. Lacking an overarching regulating body with consistent regulations and guidelines hinders an already slow growing field of psychology in UAE and intensifies the shortage of mental health providers. As a consequence, the current regulatory scene in the UAE is fragmented and downed by bureaucracies. While regulating healthcare services is essential to ensure accessibility and delivery of quality services, service providers have to abide by fragmented and sometimes contradictory regulations mandated by several regulatory bodies.

Another challenge in mental health policy is lack of clear road maps and implementation plans of mental health strategies. Policies and strategies remain ineffective unless they are implemented and have accountability measures put in place to ensure compliance.²⁴ Implementing mental health policies is particularly challenging because of the stigma that is associated with it. Mental illness has long been stigmatized by the general public and authorities alike. In many cases, especially with suicide and substance abuse, mental health laws stigmatize patients, and the general attitude of jurisdiction is to penalize.²⁵

Regulatory fragmentation has been a persistent policy issue, and it hinders the advancement of mental health provision now more than ever. The COVID-19 pandemic has presented unprecedented challenges to the UAE population and to its health

system. In these unpredictable times, bureaucracies can obstruct the introduction of much needed healthcare solutions. Flexibility is key in addressing mental health issues by wokring on the shortage of service providers and telemedicine.

Social Awareness:

Perhaps the greatest challenge facing mental health policy is social stigma. Mental illness has a long history of stigmatization that unfortunately still continues. The language used to talk about mental illness is still heavily degrading, often referring to mental illness as "craziness" or "insanity". The social stigma that surrounds mental illness makes it difficult for people with mental health conditions to seek help or cope with it, leaving many of them to feelings of isolation, discrimination and despair.

The core issue in social stigma is lack of awareness on different levels amongst individuals, families, communities, and policymakers. Children living with mental illness often find themselves in very difficult positions, where they might fear the social consequences of opening up or seeking help. In many cases, these children go unnoticed, undiagnosed, and untreated, and bear the health consequences. In the COVID-19 pandemic, parents are spending more time with their children. As a result, they might start noticing behavioral changes indicating mental health issues in their children, but many of them are not aware of what it means or how and when to seek professional help.

^{23.} See footnote 13.

^{24.} See footnote 13.

^{25.} See footnote 21.

^{26.} See footnote 13.

Policy Recommendations

1. Tele-mental Health

Telemedicine is the use of medical information exchanged from one site to another via electronic communications to improve patients' health status.²⁷ It has suddenly become wide-spread and institutionalized across the UAE, due to the travel and mobility restrictions caused by the COVID-19 pandemic. Almost all health service providers have introduced measures of tele-medicine in the UAE, with the health care authorities making formal recommendations to the public to utilize these services whenever possible.

Globally, after the COVID-19 outbreak, restricted mobility became a daily reality for millions of people around the world. Telemedicine is increasingly gaining importance as a method to connect medical professionals with their patients, and among those mental health patients. Compared to in-clinic visits, it could offer easier access and overcome limitations. transportation Recently, students have been required to stay at home, as schools and universities suspended attendance amid the COVID-19 pandemic. As a result, students who had access to social workers or counselors during school days, lost that benefit.

Tele-mental health is the use of telemedicine to provide mental health assessment and treatment at a distance.²⁸ It is often adopted as a policy option to expand the reach of mental health services and penetrate into rural and under-developed areas.

Tele-mental health can help bridge the gap between children and their psychologists, however, it has its own challenges. First, there is not enough evidence to support its effectiveness for all mental health services, as it benefits with some cases but not all.29 Second. if tele-mental health was implemented without regulating, it will be a fertile soil for unprofessional and unethical practices, at the same time, if regulations limited and overwhelmed practitioners, it will slow the expansion of tele-mental health services, and by that defeating its own purpose. Tele-mental health regulations should be consistent and unified across the UAE. Adopting distance-technology solutions should be an agile decision, especially within the current COVID-19 pandemic. Third, an important aspect of regulation is insurance coverage. As tele-mental health services are set and regulated, insurance companies should be coordinated with to include it in their healthcare plans. Regulating bodies also need to keep in mind that paying less for telemental health might de-incentivize professionals. Finally, making the transition to online services might pose cyber security issues, making patients and their doctors an easy target to cybercrimes. Therefore, it is imperative to have mandates and guidelines on securing patients' data and providing a safe cyber space for both doctors and patients.

^{27.} American Telemedicine Association. State Medicaid Best Practices: Telemental and Behavioral Health. Retrieved from http://dev. americantelemed.org/docs/default-source/policy/state-medicaidbest-practices-telemental-and-behavioral-health.pdf?sfvrsn=4.

^{28.} The Centers for Disease Control and Prevention. Providing access to mental health services for children in rural areas (Retrieved form: https://www.cdc.gov/ruralhealth/child-health/images/Mental-Health-Services-for-Children-Policy-Brief-H.pdf.

^{29.} See footnote 11.

2. Regulations Reforms

2.1. Policy and Regulation Alignment

Regulations and licensure requirements are scattered and managed by several regulatory bodies, each having a separate process and a set of guidelines and requirements. In order to encounter the mental health service shortage problem, it is imperative to reconsider the regulatory system. There should be a unified licensing procedure that facilitates licensing and hiring of professionals.30 While regulating is essential to ensure quality, practitioners and service providers should not be limited by bureaucracies and paperwork. Guidelines should be unified and accessible in one platform, and they should be communicated clearly to both practitioners and regulators. This step is crucial in overcoming the impact of COVID-19 on mental health, as pressure on the health system increases.

2.2. Incentivizing Private Sector

In the UAE, private sector is the largest provider of mental health services. With the right incentives, service providers can be directed to take an active role in community service which can also work as a way to share already limited resources to benefit the largest number possible. Private sector can be engaged in training or raising awareness of school staff, parents, psychology students and new practitioners. In return, they can benefit from a range of government offers and services, such as reduced fees or partial tax exemption.³¹

2.3. Public and Private School Regulatory Bodies

School regulatory bodies can have direct impact on

what schools do to promote a healthier physical and mental life for their students. In the past few years, many positivity and wellbeing initiatives have been established, either as part of the National Program for Happiness & Wellbeing or standalone projects by local authorities. Unfortunately, as the same cannot be said about promoting mental health for students and staff. Currently, there are no clear guidelines available for schools on how to take initiatives in mental health nor any platforms to share knowledge and resources. And here comes the crucial role of school regulatory bodies to create guidelines that can be adapted by schools on mental health in general and how to deal with COVID-19 induced mental issues. These guidelines should be: flexible and dynamic allowing schools to choose what works best for their needs and resources, indigenous to local context, and easily accessible through utilizing online platforms. This initiative will create a community of practice where stakeholders can exchange and discuss ideas. Another way in which school regulatory bodies can contribute during the pandemic is to educate children and parents about mental health and offer general guidance when needed.

3. Leadership Commitment

Stakeholder engagement is key in developing and successfully implementing mental health policy. Commitment on the part of federal and local government leaders can have a tremendous impact on advancing the mental health agenda and championing for human rights.³² This is particularly important for the mental health protfolio because of its social aspects. Mental health policy should be prioritized through direct support from leadership through agile approaches to achieve a much needed

^{30.} See footnote 13.

^{31.} See footnote 13.

^{32.} See footnote 13.

radical change and advance the mental health agenda which has long suffered stagnation. The COVID-19 pandemic has presented many challenges, but also offered opportunities. Gaining momentum from the leadership and public to advance mental health is an opportunity that can be harvested for the betterment of society.

4. Training & Raising awareness

4.1. Raising Awareness

Promoting mental health should not be reflected only in policy, but also in community's perspectives and beliefs regarding mental illness. Raising public awareness is fundamental to encounter social stigma. This requires measuring and assessing general perceptions of mental illness and mentally ill individuals which can help policymakers better understand attitudinal barriers currently present in society. Promoting realistic and relatable images of mental illness can highlight mental health policy as a common good.33 Raising awareness should include all stakeholders and proper communication channels with the community should be established to guarantee inclusion of all groups. Many children now cannot comprehend the situation they are in and they might feel insecure and anxious. Medical advice on COVID-19 has penetrated into every home educating people on how to protect themselves physically against the virus. The same should be done to educate the public on the pandemic's impact on mental health. The current situation presents an opportunity to normalize mental health issues and create a platform where human rights and dignity is protected, where children can come forward and seek help without feeling isolated.

4.2. Utilizing online Solutions

As stated earlier, there is a shortage of mental health services in the UAE, and with the current COVID-19 pandemic, mental health issues have increased, as adults and children are experiencing rapid and sudden changes in their routines, isolation from social circles, and heightened anxiety and stress. Online courses on mental health can be made available for teachers, parents and children for free to help them deal with the new situation. This policy option is not high in cost, yet it can extend to a large number of people, especially that the majority of UAE population is now studying, working, and communicating online. However, one of the challenges that should be addressed when transitioning services to online platforms is the need to raise people's awareness about the service's availability and effectiveness.

^{33.} See footnote 13.

Author(s) and Citation

Lama Zakzak Engy Shibl

Associate Researcher, Mohammed Bin Rashid School of Government, Dubai, UAE.

Assistant Researcher, Mohammed Bin Rashid School of Government, Dubai, UAE.

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Health Policy

The health policy research area aims to explore healthcare policy and policy for health in the UAE. It also addresses the health policy the policy implications, needs and challenges related to the provision of health services in accordance to the UAE National Agenda.

Social Policy, Well-being and Happiness

This research area is interdisciplinary in nature and focuses on some of the most pressing social policy issues in the UAE and region at large. Broadly, research in this area is concerned with social equality and cohesion, public service accessibility, inclusive policy making and the well-being of individuals and families. Work in this area pays special attention to women, the elderly, the disabled and those living in remote and rural areas. Current and planned research in this area includes: Women and leadership in the UAE, Social cohesion in Dubai Emirati family, Inclusive policy making and citizen engagement, Utilizing assistive technologies to aid accessibility for individuals with disabilities.

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Convention Tower, Level 13, P.O. Box 72229, Dubai, UAE Tel: +971 4 329 3290 - Fax: +971 4 329 3291 www.mbrsg.ae - info@mbrsg.ae







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