Mental health challenges among women in Dubai, what commitments are needed?

Kadhim Alabady
Dubai Health Authority, UAE

Introduction & Aim: Mental health problems affect women and men equally, but some are more common among women. To provide a baseline of the current picture of major mental health challenges among women in Dubai, which can then be used to measure the impact of interventions or service development.

Method: We have used mixed methods evaluation approaches. This was used to increase validity of findings by using a variety of data collection techniques. We have integrated qualitative and quantitative methods in this piece of work. Conducting the two approaches is to explore issues that might not be highlighted enough through one method.

Results: The prevalence of people who suffer from different types of mental disorders remains largely unknown, many women are unwilling to seek professional help because of lack of awareness or the stigma attached to it. It is estimated that, there were around 2,928-4,392 mothers in Dubai (2014) suffering from postnatal depression of which 858-1,287 early intervention can be effective. The system for managing health care for women with mental illness is fragmented and contains gaps and duplications. It is estimated that 1,029 girls aged 13-19 years affected with anorexia nervosa.

Conclusion & Recommendation: Work is required with primary health care in order to identify women with undiagnosed mental illnesses. Further work is undertaken within primary health care to assess disease registries with the aim of helping GP practices to improve their disease registers. Also, it is important to conduct local psychiatric morbidity surveys in Dubai to obtain data and assess the prevalence of essential mental health symptoms and conditions that are not routinely collected to get a clear sense of what is needed and to assist decision and policy making in getting a complete picture on what services are required. There is a need for a crisis response team to respond to emergencies in the community. Continuum of care should be given as there is a significant gap in the services for women once they diagnosed with mental disorder.

Biography
Kadhim Alabady is a Fellow of the Royal College of Physicians and Surgeons of Glasgow. He has completed his Doctorate degree in Public Health and Epidemiology, Master’s degree in Clinical Epidemiology (MSc), Master’s degree in Public Health (MPH), all from The Netherlands universities with broad experience driving Research and Development (R&D) strategies and operations. He has been registered as an Epidemiologist Grade A with The Netherlands Epidemiological Society. He has numerous publications in the UK in mental illnesses, cancer, cardiovascular diseases, diabetes, dementia, autism, COPD, population health, road casualties and others.

KAAlabady@dha.gov.ae

Notes: