\$ SUPER

Contents lists available at ScienceDirect

# Asian Journal of Psychiatry

journal homepage: www.elsevier.com/locate/ajp





# Policy and legislation for the treatment of mental health and substance use disorders in Qatar

Ovais Wadoo a,b,\*, Shiekha Haya Abdulla Q.F. Althani , Javed Latoo , Majid Alabdulla

ARTICLE INFO

Keywords: Mental health Mental Health Legislation Public health policy Oatar

# ABSTRACT

There is a marked paucity of publications on the policy and legislation of mental health, and substance use disorders in the public domain in Qatar. Qatar National Vision provides a framework for national strategies and the State of Qatar has developed policies and legislation dedicated to mental health and substance use. In doing so, Qatar has adopted international guidance to shape its mental health services and relevant policy and legislation. This article is a narrative description of the evolution of the mental health and substance use policy and legislation in Qatar.

# 1. Introduction

Mental, neurological, and substance use disorders are universal, affecting all social groups and ages. These are inextricably linked to the quality of life, productivity, and social capital. Mental health has a low political and public health profile, nevertheless, there is growing recognition of the importance of positive mental health to society. World Health Assembly resolutions have called on the Member States to enhancement of political commitment and development of policy and legislative infrastructure. Many countries lack mental health and substance misuse policies and legislation that can safeguard the rights of people. For the ones that have policies and legislation, implementation at the ground level remains a huge challenge. There is a marked paucity of publications on the policy and legislation in the public domain in the region. This article is a narrative description of the evolution of the mental health and substance use policy and legislation in Qatar. The State of Qatar is a small peninsular kingdom located in the Arabian Gulf. It is a rapidly developing high-income country with a total population of 2.7 million (Monthly Figures on Total Population, n.d.). Qatar's official language is Arabic, and its official religion is Islam. Qatar is one of the world's wealthiest nations in terms of per capita GDP. Foreign nationals in Qatar make up more than 80 % of the population of which 50 % are estimated to be lower-skilled migrants (Labour Migration - International Labour Organization, 2021; Latoo et al., 2021).

# 2. Mental health and substance use services

Qatar's healthcare system is predominantly state-funded. Primary Health Care Corporation (PHCC) came into existence as an independent body in 2012 and is responsible for delivering primary healthcare to the population of Qatar through country-wide health centers. The origin of primary healthcare in Qatar dates to 1954, and a comprehensive primary healthcare system was approved in 1978 (Ditta and Ahmed, 2019). Hamad Medical Corporation (HMC) was established in 1982 and is the main public provider of secondary and tertiary healthcare in the country. PHCC has a joint working relationship with HMC and the two provide an integrated network of mental health services (Saeed and Wadoo, 2020). Community care initiatives have been prioritized in order to provide psychiatric support outside of hospitals. A specialized forensic mental health service has been developed by HMC and is evolving to provide secure inpatient services, community forensic services and is collaborating with the criminal justice system to allow for structured and formalized input into prison and court systems (Alabdulla et al., 2021a). Additionally, other healthcare provider such as Sidra Medicine offers mental health services for women and children. Naufar Centre, a rehabilitation center provides specialist substance use disorder treatments. More recently HMC has started rehabilitation center for alcohol and substance use disorders.

a Mental Health Services, Hamad Medical Corporation, Doha, Oatar

<sup>&</sup>lt;sup>b</sup> Qatar University, College of Medicine, Doha, Qatar

<sup>\*</sup> Correspondence to: Mental Health Services, Hamad Medical Corporation, PO Box 30350, Qatar. E-mail addresses: owadoo@gmail.com, owadoo@hamad.qa (O. Wadoo).

#### 3. Public health burden of mental and substance use disorders

The public health burden of mental disorders in Qatar is comparable with international data. In Eastern Mediterranean region, Qatar is second in terms of years of life lost due to mental health disorders. Anxiety and depression are the most common psychiatric presentations and onefifth of adults attending primary care have a diagnosable mental disorder (Ghuloum et al., 2014). Depression is the leading cause of disability. The annual economic cost of mental disorders is estimated to be US\$ 467 million (Ministry of Public Health, Qatar, 2021a). There is a marked paucity of published evidence on the extent and nature of substance use disorders. Substance use disorders have risen from the third to leading cause of disability in the decade between 2007 and 2017. It is estimated that up to 2 % of Qatar's population has alcohol or drug related disorders. The limited data that has been recently published reports alcohol being the primary substance of misuse among non- Qataris. Qataris on the other hand had the highest proportion of complicated substance misuse with substances other than alcohol. Alcohol and substance misuse are mainly prevalent in males and the prevalence among females being only 2.1 %. Overall, 2.26 % of all presentations to the emergency departments in Oatar were related to alcohol and substance abuse and this amounted to 3 ED visits per 10,000 of population per year. Less than 1 % were referred to psychiatric services and no other meaningful rehabilitative interventions were offered to others (Alabdulla et al.,

# 4. Mental health stigma

Many people with mental disorders don't get help as they avoid or delay seeking treatment due to concerns about being treated differently or fears of losing their jobs and livelihood. That's because stigma, prejudice, and discrimination against people with mental illness are still very much a problem. The existence of stigma towards mental illness has been firmly established globally and is a major barrier to seeking treatment. Research on stigma is relatively scant in the Middle East region. A large diversity in the stigmatizing beliefs, actions and attitudes toward treatment of mental illness within the Arab population have been reported in a systematic review (Zolezzi et al., 2018). The research examining stigma towards mental disorders in patients, families, and healthcare professionals in Qatar reports significant stigma. People with mental health disorders report social stigma and efforts to avoid disclosing mental health diagnoses to others due to fear of negative social consequences (Stirling et al., 2019). People with mental health disorders also reported significant levels of internalized stigma as well (Kehyayan et al., 2021). Stigmatizing attitudes toward people with mental illness by healthcare workers are present in Qatar and these are higher among nurses as compared to physicians (Ghuloum et al., 2022). Epidemiological survey of knowledge, attitudes, and health literacy concerning mental illness in a national community sample identified very poor knowledge of mental illness among the Arabic-speaking population of Qatar and the study revealed that men had better knowledge, beliefs and attitudes towards mental illness than women (Bener and Ghuloum, 2011b). Ethnic differences revealed Qataris faring worse than non-Qatari Arabs (Bener and Ghuloum, 2011a). There are common issues that shape and influence Mental Health Literacy (MHL) across the Arab world and there is a great need for interventions and public campaigns to promote MHL among the public (Elyamani et al., 2021). The Qatar Mental Health Attitudes and Awareness Index (QMHAAI) was developed with the purpose of identifying a more accurate understanding of the attitudes and awareness to mental health in Qatar (Ministry of Public Health, 2015). This includes the key practices and attitudes preventing people from seeking help and knowing where and how to access services.

#### 5. Policy and legislation

Qatar National Vision 2030 (QNV 2030) defines the long-term goals for the country and provides a framework for national strategies (General Secretariat for Development Planning, 2008). Human development according to the QNV 2030 entails a holistic and modern health care infrastructure that caters to all residents and citizens. Qatar adopted the WHO Mental Health Action Plan 2013-2020 and the National Mental Health Strategy for Qatar was launched in 2013. The Qatar National Mental Health Strategy is the most significant mental health policy document that the state of Qatar has ever developed as it covers most of the components recommended by the World Health Organization (Ministry of Public Health, 2021a). This policy initiative focused on providing mental health care in primary and community settings close to the populations served. This was further supported by the National Health Strategy 2018-2022, which specifically identified mental health as a priority area of development (Ministry of Public Health, 2021b). National Health Strategy is an all-encompassing vision for Qatar's health sector, which sits above all other health strategies to guide the development of the healthcare system.

Qatar passed its first dedicated Mental Health Legislation (MHL) by a royal decree in 2016 guided by the World Health Organization Assessment Instrument for Mental Health Systems (Osman, 2016; Sharkey, 2017) It is influenced by the mental health legislation of UK and Australia and the Arab charter for human rights. The MHL itself is a relatively short document consisting of 7 chapters divided into 35 articles and is accompanied by a more comprehensive Code of Practice (CoP). There are no provisions for forensic patients, and they are subject to judicial orders. Although passed in 2016, the MHL is still not fully implemented. Training of the staff within mental health services has been completed, a detailed CoP has been published, and legal forms and administrative systems have been finalized in partnership with internationally established providers of mental health training (Alabdulla et al., 2021c).

Qatar's policy approach to manage substance abuse disorders has shifted from stringent law enforcement approaches managed by the criminal justice system to the recognition of drug use as a major public health issue (Ministry of Development Planning and Statistics, 2015; Alabdulla et al., 2022). There has seen a shift from applying a punitive only paradigm in managing drug problems to include the provision of drug treatment and rehabilitation. Oatar is a signatory to the United Nations Single Convention on Narcotic drugs 1961 as amended in 1972, the Convention on Psychotropic Substances of 1971 and the Convention Against Illicit Trafficking Narcotic Drugs and Psychotropic Substances 1988. These international instruments prompted the enactment of law No 9 of 1987 on Control and Regulation of Narcotic Drugs and Dangerous Psychotropic Substances in Qatar. The law No 9 of 1987 on Control and Regulation of Narcotic Drugs and Dangerous Psychotropic Substances make provision for a person who use drugs to be admitted to a treatment center as an alternative to criminal sanctions (Control and Regulation of Narcotic Drugs and Dangerous Psychotropic Substances, n.d.). In 2006, Social Rehabilitation Centre was established by Law No 21 of 2006. In 2015, the Emiri Decision No (17) of 2015 defines addiction as a disease and places the ownership of treatment for substance use disorders within Naufar Center, Qatar's only specialist substance use disorder treatment provider at the time (Emir of the State of Oatar, 2015). In 2019, cabinet approved the decision to establish a Permanent Committee for addiction treatment headed by the Minister of Public Health (Establishment of the Permanent Committee for Addiction Treatment, n.d.). Healthcare services are now leading the development of a comprehensive substance misuse service based on international best practice. *Permanent Committee for Addiction Treatment* is putting systems and structures in place to upscale demand reduction programmes in the country.

#### 6. Conclusion

Qatar has developed a policies and legislation dedicated to mental health and substance use (Qatar General Secretariat for Development Planning, 2011), however full implementation of the legislation has not been achieved. The legislation once fully implemented will be tried and tested in practice and may need amendment to make it suitable and culturally appropriate.

# Ethics approval and consent to participate

Not applicable.

#### Financial disclosure

The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

# Conflict of interest

The authors have no competing interests to declare relevant to this publication.

# Acknowledgments

Open Access funding provided by the Qatar National Library.

#### Contributors

OW wrote the initial draft of the manuscript. All the authors read and approved the final manuscript.

#### References

- Alabdulla, M., Reagu, S.M., Tulley, I., 2021a. Establishing comprehensive forensic mental health services in Qatar. Asian J. Psychiatry 57, 102590.
- Alabdulla, M., Reagu, S., Elhassan, N.M., Shinith, D., Shiekh, S.T., Abbas, M.O., Chandrappa, N.S., 2021b. Emergency department presentations of alcohol and other substance misuse: first cross-sectional national study in Qatar. BMJ Open 11 (10), e055181.
- Alabdulla, M., Reagu, S., Elhusein, B., 2021c. Impact of the CoViD-19 pandemic on mental health law in the state of Qatar. Int. J. Law Psychiatry 79, 101748.
- Alabdulla, M., Samarasinghe, N., Tulley, I., Reagu, S., 2022. Evolution of policy for the treatment of substance use disorders in Qatar. Subst. Abus. Treat. Prev. Policy 17 (1), 3. https://doi.org/10.1186/s13011-021-00428-0.
- Bener, A., Ghuloum, S., 2011a. Gender differences in the knowledge, attitude and practice towards mental health illness in a rapidly developing Arab society. Int. J. Soc. Psychiatry 57 (5), 480–486.
- Bener, A., Ghuloum, S., 2011b. Ethnic differences in the knowledge, attitude and beliefs towards mental illness in a traditional fast developing country. Psychiatr. Danub 23 (2), 157–164.

- Control and Regulation of Narcotic Drugs and Dangerous Psychotropic Substances [WWW Document], n.d. URL \(\(\text{https://www.almeezan.qa/LawPage.aspx?id=3989&language=en\)\) (Accessed 20 March 2021).
- Ditta, M.A., Ahmed, B., 2019. The development of a primary health care system in the state of Qatar. World Fam. Med. 17 (9), 12–15.
- Elyamani, R., Naja, S., Al-Dahshan, A., Hamoud, H., Bougmiza, M.I., Alkubaisi, N., 2021. Mental health literacy in Arab states of the Gulf Cooperation Council: a systematic review. PLoS One 16 (1), e0245156.
- Emir of the State of Qatar, 2015. Emiri decision no 17 of 2015 on the establishment of Naufar Center, Doha, Qatar.
- Establishment of the Permanent Committee for Addiction Treatment. [WWW Document], n.d. URL (https://www.gulf-times.com/story/649493/Cabinet-approves-draft-budget) (Accessed 20 March 2021).
- General Secretariat for Development Planning, 2008. Qatar National Vision 2030. [WWW Document], n.d. URL (http://www.gsdp.gov.qa/portal/page/portal/gsdp.en/qatar\_national\_vision/qnv\_2030\_document) (Accessed 7 December 2021).
- Ghuloum, S., Bener, A., Dafeeah, E., Al-Yazidi, T., Mustapha, A., Zakareia, A., 2014. Lifetime prevalence of common mental disorders in Qatar using WHO Composite International Diagnostic Interview (WHO-CIDI). Int. J. Clin. Psychiatry Ment. Health 2 (10.12970), 2310–8231.
- Ghuloum, S., Mahfoud, Z.R., Al-Amin, H., Marji, T., Kehyayan, V., 2022. Healthcare professionals' attitudes toward patients with mental illness: a cross-sectional study in Qatar. Front. Psychiatry 13.
- Kehyayan, V., Mahfoud, Z., Ghuloum, S., Marji, T., Al-Amin, H., 2021. Internalized stigma in persons with mental illness in Qatar: a cross-sectional study. Front. Public Health 9
- Labour Migration International Labour Organization [WWW Document], n.d. URL <a href="https://www.ilo.org/beirut/areasofwork/labour-migration/lang-en/index.htm">https://www.ilo.org/beirut/areasofwork/labour-migration/lang-en/index.htm</a> (Accessed 20 March 2021).
- Latoo, J., Wadoo, O., Iqbal, Y., Chandrappa, N.S.K., Tulley, I., Alabdulla, M., 2021. Development of mental health services for lower-skilled migrant workers in Qatar. Asian J. Psychiatr. 62, 102709 https://doi.org/10.1016/j.ajp.2021.102709.
- Ministry of Development Planning and Statistics, 2015. Qatar's Fourth National Human Development Report: Realizing Qatar National Vision 2030 the Right to Development. Ministry of Development Planning and Statistics, Qatar.
- Ministry of Public Health, Qatar[WWW Document], 2021b. URL (https://www.moph.gov.qa/english/strategies/National-Health-Strategy-2018–2022/Pages/default.aspx) (Accessed on 23 March 2021).
- Ministry of Public Health, Qatar [WWW Document], 2021a. URL <a href="https://www.moph.gov.qa/english/strategies/Supporting-Strategies-and-Frameworks/SummaryNationalMentalHealthFramework2019–2022/Pages/default.aspx">https://www.moph.gov.qa/english/strategies/Supporting-Strategies-and-Frameworks/SummaryNationalMentalHealthFramework2019–2022/Pages/default.aspx</a>) (Accessed on 23 March 2021).
- Ministry of Public Health, Qatar. Qatar Mental Health Attitudes and Awareness Baseline Measure 2015. Supreme Council of Health.
- Monthly Figures on Total Population [WWW Document], n.d. URL (https://www.psa.gov.qa/en/statistics1/StatisticsSite/pages/population.aspx) (Accessed 7 December 2021).
- Osman M. Law on Rights of Patients with Mental Illness. The Peninsula Qatar (2016) [WWW Document], n.d. URL \(\sqrt{www.thepeninsulaqatar.com/article/24/11/201}\) 6/Law-on-rights-of-patients-with-mental-illness\(\rangle\) (Accessed 7 December 2021).
- Qatar General Secretariat for Development Planning, 2011. Qatar National Development Strategy 2011–2016. Doha: Gulf Publishing and Printing Company.
- Saeed, E., Wadoo, O., 2020. Chapter sixteen community mental health services. Ment. Health Qatar: Chall. Prospects 364.
- Sharkey, T., 2017. Mental health strategy and impact evaluation in Qatar. BJPsych Int. 14 (1), 18–21.
- Stirling, B., Hickey, J., Omar, H., Kehyayan, V., 2019. Stigma towards mental disorders in Qatar: a qualitative study. QScience Connect 2019 (1), 2.
- Zolezzi, M., Alamri, M., Shaar, S., Rainkie, D., 2018. Stigma associated with mental illness and its treatment in the Arab culture: a systematic review. Int. J. Soc. Psychiatry 64 (6), 597–609. https://doi.org/10.1177/0020764018789200.