

UAE: Obesity Health System



Economic classification



High Income¹

Health system summary

Healthcare in UAE is regulated at both the Emirate and the Federal level. All seven emirates provide government-funded healthcare for its Emirati nationals, mostly through government funded insurance schemes. How this is delivered and who it is delivered by differs between the emirates. For example, in Dubai it is delivered by the Dubai Health Authority, in Abu Dhabi by the Health Authority Abu Dhabi and in other emirates by the Ministry of Health. Two government health insurance programmes 'Thiqa' and 'Saada' (in Abu Dhabi and Dubai respectively) provide healthcare coverage to Emirati Nationals not eligible for other government programmes.

Expatriates (who make up approximately 80-90% of the population) tend to use private health insurance for health care needs, and in some emirates such as Dubai expats are required to have private insurance by law. Often this insurance is provided by employers, as in some emirates employers are legally obliged to provide health insurance for their employees.

The Emirati health system has undergone significant reforms over recent years. Criticism of the health system includes high levels of fragmentation, but still public satisfaction ratings remain high.

Where is UAE's government in the journey towards defining 'Obesity as a disease'?



Where is UAE's healthcare provider in the journey towards defining 'Obesity as a disease'?



In practice, how is obesity treatment largely funded?



(●: Government, ●: Insurance, ●: Out of pocket expense, ●: Unknown)

Have any taxes or subsidies been put in place to protect/assist/inform the population around obesity?



Is there specialist training available dedicated to the training of health professionals to prevent, diagnose, treat and manage obesity?



Are there any obesity-specific treatment recommendations or guidelines published for adults?



Are there adequate numbers of trained health professionals in specialties relevant to obesity in urban areas?



Are there any obesity-specific treatment recommendations or guidelines published for children?



Are there adequate numbers of trained health professionals in specialties relevant to obesity in rural areas?



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Obesity prevalence

30.6%	25.1%
Women	Men
17.3%	6.4%
Girls	Boys

Overweight prevalence

34.3%	45.7%
Women	Men
21.0%	36.7%
Girls	Boys

Key prevention policies

- ⇒ Tax on carbonated and energy drinks
- ⇒ Voluntary “Weqaya” label on products that adhere nutrient specifications
- ⇒ Mandatory nutrient lists on packaged

Summary of stakeholder feedback*

Stakeholders detailed several efforts that have been made by the government to address obesity, including a lunchbox ban that prohibit certain unhealthy foods in all government schools and a tax on sugary drinks. There is reportedly an issue with fragmentation however, which many initiatives delivered at an Emirate level. An example of this is the *Weqaya* screening programme in Abu Dhabi. Stakeholders call for more work to be done at a national level to prevent obesity.

Under the national schemes, obesity treatment is covered for those with a BMI ≥ 30 kg/m². There are waiting lists for obesity treatment, but it has been suggested that these are not unreasonably long. It appears that treatment may be available under the government-funded national insurance schemes, but still much treatment is received at out of pocket expense.

Overall, there was felt to be a fair number of professionals to treat obesity (at least in urban areas) but there was concern about the lack of multidisciplinary teams and the lack of professionals working in prevention and health promotion. There is said to be too much emphasis on pharmacological and surgical treatment for adults, and not enough emphasis of lifestyle and behavioural changes.

‘Health Authority Abu Dhabi’ have clear guidelines on obesity treatment (last updated in 2018) but the extent to which these are followed in Abu Dhabi and the other emirates is unclear.

**Based on interviews/survey returns from 8 stakeholders*

Perceived barriers to treatment

- \$ High cost of out-of-pocket payments
- 🌐 Cultural norms and traditions
- ✂ Food cost and availability
- ⚠ Failure to recognise all treatment options
- 🏠 Obesogenic environment
- 🏃 Poor health literacy & behavior
- ↔ Lack of opportunity for physical activity
- 🏔 Unrealistic expectations of treatment
- 🏠 Lack of financial investment and funding for coverage
- 🎓 Lack of training for healthcare professionals
- 🏢 Lack of treatment facilities
- 👥 Lack of multi-disciplinary teams

References

1. <https://blogs.worldbank.org/opendata/new-country-classifications-income-level-2019-2020> (last accessed 29.08.2019)

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