



Mohammed Bin Rashid School Of Government

POLICY BRIEF

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Summary

This policy brief examines the role of fathers in early diagnostic practices and care for young children of determination (YCOD) in the United Arab Emirates (UAE). Drawing on insights from policy dialogues with fathers, professionals, and stakeholders, it identifies key challenges and opportunities to enhance paternal involvement. The brief proposes policy recommendations aimed at creating a more supportive and inclusive environment for fathers of YCOD, with the ultimate goal of improving outcomes for these children and their families.

Empowering Fathers: Enhancing Paternal Involvement in Early Diagnosis and Care for Young Children of Determination in the UAE

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Introduction

The This policy brief examines the current landscape of fathers' engagement in early diagnosis and care for YCOD in the UAE. Drawing on policy dialogues conducted with fathers, healthcare professionals, educators, and other key stakeholders, it identifies critical barriers and enablers to paternal involvement. The policy brief proposes evidence-informed policy recommendations to enhance fathers' roles and create a more supportive environment for their engagement in supporting YCOD.

Enhancing fathers' involvement can improve outcomes for YCOD, strengthen family dynamics, and promote more inclusive approaches to early childhood development and disability support in the UAE. By addressing key challenges and leveraging opportunities, policymakers can help unleash the positive impact of engaged fatherhood for some of the UAE's most vulnerable young children.

Early diagnosis and intervention are crucial for supporting the development and well-being of young children with disabilities or developmental delays. While mothers are often seen as the primary caregivers, research increasingly highlights the critical role fathers can play in supporting their

children's growth and progress. However, paternal involvement in early diagnostic practices and care for young children of determination (YCOD) remains limited in many contexts, including the United Arab Emirates (UAE).

Policy Context

The UAE has made significant strides in recent years to support people of determination and promote inclusive education and development. Key policies and initiatives include:

- Federal Law No. 29 of 2006 on the Rights of People of Determination guarantees the rights of people with disabilities to education, healthcare, rehabilitation and employment.
- The National Policy for Empowering People of Determination, launched in 2017, which aims to create an inclusive society that ensures empowerment and promotes quality of life.
- The Abu Dhabi Early Childhood Authority focuses on early childhood development, including for children of determination.
- Initiatives by the Ministry of Community Development to support families of people of determination.

However, challenges remain in terms of early diagnosis, access to specialized services, and family support - particularly when it comes to engaging fathers. Cultural norms, workplace policies, and gaps in the healthcare system can limit paternal involvement in supporting YCOD.

There is growing recognition of the need to actively promote father engagement, as highlighted in the UAE's National Family Policy. However, targeted policies and programs to support fathers of YCOD are still limited. This creates an opportunity to develop evidence-informed approaches to enhance paternal involvement in early diagnostic practices and ongoing care.

Stakeholder Mapping

Key stakeholders involved in supporting YCOD and their families in the UAE include:

Government Agencies:

- Ministry of Health and Prevention
- Ministry of Community Development
- Ministry of Education
- Abu Dhabi Early Childhood Authority
- Zayed Higher Organization for People of Determination

Healthcare Providers:

- Hospitals and medical centers
- Pediatricians and developmental specialists
- Therapists (speech, occupational, physical, etc.)
- Early intervention specialists

Educational Institutions:

- Schools and nurseries
- Special education centers
- Teacher training institutions

Civil Society Organizations:

- UAE Down Syndrome Association
- Dubai Autism Center
- Sharjah City for Humanitarian Services
- Other disability advocacy groups

Private Sector:

- Employers
- Insurance companies
- Private therapy and support service providers

Families:

- Fathers of YCOD
- Mothers of YCOD
- Extended family members

Community:

- Religious and cultural leaders
- Media organizations

International Organizations:

- UNICEF
- World Health Organization

Each of these stakeholder groups plays a unique role in the ecosystem of support for YCOD. Effective policy solutions will require coordinated efforts across multiple sectors and stakeholders.

Theory of Change

To enhance fathers' roles in early diagnosis and care for YCOD, a multi-pronged approach is needed that addresses individual, family, workplace, healthcare system, and societal factors (*Figure 1*).



FIGURE 1. Sphere of critical sectors for father's role in the early diagnosis of YCOD

The theory of change outlined below illustrates how targeted interventions can lead to increased paternal engagement and ultimately improved outcomes for YCOD:

Inputs:

- Policy changes to support paternal leave and workplace flexibility
- Training programs for healthcare providers on engaging fathers
- Awareness campaigns to shift cultural norms around fatherhood
- Support groups and resources for fathers of YCOD
- Improved coordination among service providers

Activities:

- Implement father-friendly policies in workplaces and healthcare settings
- Conduct training for professionals on effectively involving fathers
- Launch public awareness initiatives on the importance of father engagement
- Establish peer support networks for fathers of YCOD
- Create centralized information hubs on services and resources

Outputs:

- Increased availability of flexible work arrangements for fathers
- Higher competency among professionals in engaging fathers
- Greater public awareness of fathers' roles in supporting YCOD
- More fathers participating in support groups and accessing resources
- Improved service coordination and information sharing

Outcomes:

- Increased father attendance at medical appointments and therapy sessions
- Higher father involvement in home-based care and developmental activities
- Improved father-child bonding and relationships
- Reduced stress and improved well-being for both parents
- Better-coordinated and family-centered care for YCOD

Impact:

- Enhanced developmental outcomes for YCOD
- Stronger and more resilient families
- More inclusive society for people of determination
- Shift in cultural norms around fatherhood and caregiving

This theory of change recognizes that enhancing fathers’ roles requires interventions at multiple levels - from individual knowledge and skills to broader policy and societal changes. By implementing a comprehensive approach, policymakers can create an enabling environment for increased father engagement in supporting YCOD.

Theory of Change diagram:

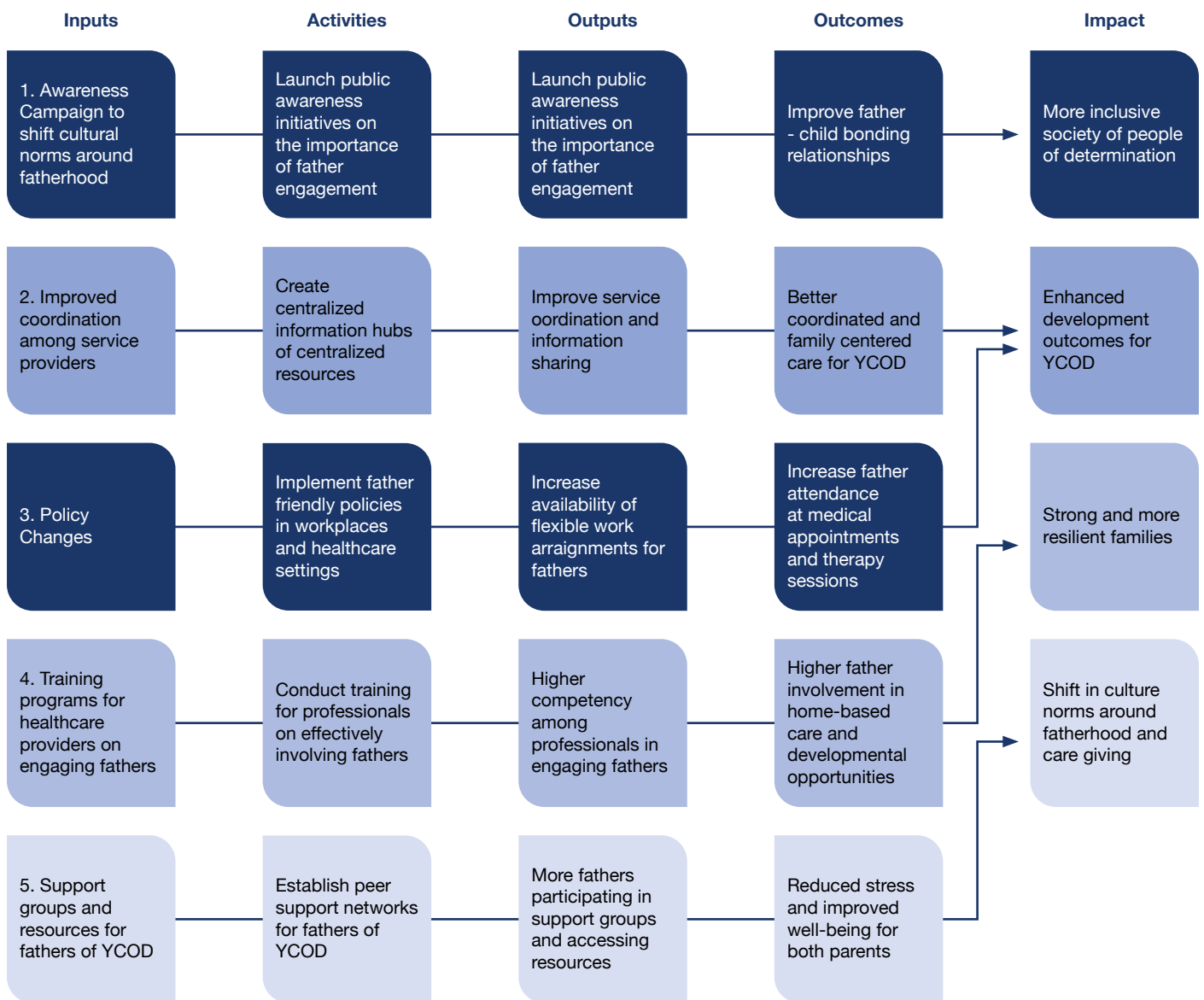


FIGURE 2. *The Young Children of Determination Logical Model*

Policy Recommendations

Based on insights from the policy dialogues and stakeholder consultations, the following recommendations are proposed to enhance fathers' roles in early diagnosis and care for YCOD in the UAE:

The policy recommendations are:

1. Develop National Guidelines on Father Engagement in YCOD Care
2. Enhance Parental Leave and Workplace Flexibility Policies
3. Establish Specialized Training Programs for Professionals
4. Create a Centralized Information and Resource Hub
5. Launch Public Awareness and Advocacy Campaigns
6. Establish Father Support Programs and Networks
7. Improve Service Coordination and Case Management
8. Enhance Early Screening and Intervention Programs
9. Conduct Ongoing Research and Evaluation

1. Develop National Guidelines on Father Engagement in YCOD Care

Recommendation: Create comprehensive guidelines highlighting the importance of paternal involvement in early diagnostic procedures and ongoing care for YCOD. These should be integrated into healthcare, education, and social service systems.

Rationale: Clear national guidelines can help standardize practices across different sectors and promote a culture of active father engagement. They can provide a framework for professionals to effectively involve fathers throughout supporting YCOD.

Implementation:

- Establish a multi-stakeholder working group to develop the guidelines
- Consult with fathers, professionals, and experts in the field
- Pilot the guidelines in select healthcare and education settings before the national rollout
- Integrate the guidelines into professional training programs and institutional policies

2. Enhance Parental Leave and Workplace Flexibility Policies

Recommendation: Implement policies that provide fathers equitable parental leave and workplace support, enabling them to be involved in early diagnosis and care without facing career or financial barriers.

Rationale: Workplace inflexibility and inadequate leave policies are major barriers to father engagement. Enhanced policies can facilitate fathers' involvement in critical early stages and ongoing care.

Implementation:

- Review and update labor laws to ensure adequate paternal leave provisions
- Provide incentives for employers to adopt family-friendly policies
- Launch awareness campaigns to promote the uptake of paternal leave
- Monitor and evaluate the impact of policy changes on father engagement

3. Establish Specialized Training Programs for Professionals

Recommendation: Develop mandatory training programs for healthcare, education, and social service professionals to engage fathers in YCOD care effectively.

Rationale: Many professionals lack the skills and awareness to involve fathers actively. Targeted training can enhance their ability to engage fathers as equal partners in the care process.

Implementation:

- Develop a standardized curriculum on father engagement for different professional groups
- Integrate the training into existing professional development programs
- Offer both in-person and online training options to maximize reach
- Include modules on cultural sensitivity and overcoming barriers to engagement

4. Create a Centralized Information and Resource Hub

Recommendation: Establish a comprehensive online platform providing information, resources, and support services for fathers of YCOD.

Rationale: Fathers often lack access to centralized, reliable information on available services and support. A dedicated hub can empower them with knowledge and connect them to needed resources.

Implementation:

- Develop a user-friendly website and mobile app
- Curate and regularly update content on early diagnosis, interventions, and support services
- Include features like service provider directories and appointment booking
- Offer peer support forums and expert Q&A sections

5. Launch Public Awareness and Advocacy Campaigns

Recommendation: Initiate large-scale public awareness campaigns to promote positive representations of engaged fatherhood and combat stigma around disability.

Rationale: Cultural norms and societal attitudes can discourage father involvement. Targeted campaigns can help shift perceptions and create a more supportive environment.

Implementation:

- Partner with media outlets, influencers, and community leaders
- Develop culturally sensitive messaging tailored to different demographic groups
- Utilize diverse channels, including social media, traditional media, and community events
- Highlight success stories and role models of engaged fathers of YCOD

6. Establish Father Support Programs and Networks

Recommendation: Create and fund dedicated support programs for fathers of YCOD, including peer support groups, workshops, and counseling services.

Rationale: Fathers often lack emotional support and opportunities to connect with others in similar situations. Targeted programs can provide much-needed support and build resilience.

Implementation:

- Partner with community organizations to establish local support groups
- Develop both in-person and online support options
- Train facilitators to run father support programs effectively
- Integrate psychosocial support and stress management components

7. Improve Service Coordination and Case Management

Recommendation: Implement integrated case management systems to better coordinate services for YCOD and actively involve fathers in the care process.

Rationale: Fragmented services and poor coordination can discourage father involvement. Improved systems can facilitate more seamless engagement between parents.

Implementation:

- Develop shared electronic health records accessible to families and service providers
- Assign dedicated case managers to support families in navigating services
- Establish clear communication protocols among different service providers
- Ensure fathers are included in all case conferences and decision-making processes

8. Enhance Early Screening and Intervention Programs

Recommendation: Strengthen and expand early screening and intervention programs for developmental delays, focusing on engaging fathers from the outset.

Rationale: Early identification and intervention are crucial for improving outcomes. Actively involving fathers from the beginning can set the stage for ongoing engagement.

Implementation:

- Expand routine developmental screening in healthcare and childcare settings
- Develop father-friendly screening tools and processes
- Ensure follow-up and referral systems actively engage both parents
- Provide training for fathers on supporting early intervention at home

9. Conduct Ongoing Research and Evaluation

Recommendation: Invest in research to better understand fathers' experiences, needs, and the impact of interventions to promote their engagement in YCOD care.

Rationale: There is limited UAE-specific data on father engagement in YCOD care. Ongoing research can inform evidence-based policymaking and program development.

Implementation:

- Fund longitudinal studies on father involvement and child outcomes
- Evaluate the impact of policy changes and new initiatives
- Conduct regular surveys and focus groups with fathers of YCOD
- Establish a national database on YCOD to track trends and outcomes

Conclusion

Enhancing fathers' roles in early diagnosis and care for young children of determination represents a significant opportunity to improve outcomes for some of the UAE's most vulnerable children. The UAE can strengthen families, promote child development, and create a more inclusive society by implementing comprehensive policies and programs to support father engagement.

The recommendations outlined in this policy brief provide a roadmap for action, addressing key barriers and leveraging opportunities to promote paternal involvement. Successful implementation will require coordinated efforts across multiple sectors and stakeholders and a long-term commitment to shifting cultural norms and practices.

By investing in father engagement, the UAE can build on its existing efforts to support people of determination and position itself as a leader in inclusive early childhood development. Ultimately, empowering fathers to be active partners in their children's care can help ensure that all young children of determination have the opportunity to reach their full potential.

Next Steps

It was agreed that further steps must be taken to build on the discussion and its findings, and the participants offered support in disseminating the dialogue summary and policy brief within their teams. In addition, both documents will be communicated with relevant departments, institutions, and professionals to advocate for action. All relevant stakeholders, subject matter experts, and institutions in public and private sectors shall be engaged in agenda-setting, priority-setting, and implementation in the policy brief report. Additional work is needed to set the implementation plan and evaluation process to ensure evidence is collected throughout the implementation and not only at the end stage. Generated evidence can aid in planning the next steps.

References

- 1) Allport, BS., Johnson, S., Agil, A., LaBrie, AB., Nelson, T, Kc A, Caracas Y, Marcell AV .(2018). Promoting father involvement for child and family health. *Acad Pediatric Assoc* 18(7), 746–753. <https://doi.org/10.1016/j.acap.2018.03.011>
- 2) Amato, P. R., Patterson, S., & Beattie, B. (2015). Single-parent households and children’s educational achievement: A state-level analysis. *Social science research*, 53, 191–202. <https://doi.org/10.1016/j.ssresearch.2015.05.012>
- 3) Bamm, E.L. & Rosenbaum, P. (2008). Family-centered theory: Origins, early childhood special education. *Archives of Physical Medicine and Rehabilitation* 89(8), 1618–1624. DOI: <https://doi.org/10.1016/j.apmr.2007.12.034>
- 4) Belrefih, F. (2012). Improving Special Educational Needs Access in Dubai’s Private Schools (Policy Brief No. 32). Mohammed Bin Rashid School of Government. Retrieved from: <https://mbrsgcdn.azureedge.net/cmsstorage/mbrsg/files/b7/b7695859-b1f7-4596-b14c-691749b23052.pdf>
- 5) Betts, J and Divya, L. (2009). Inclusion of Children with Disabilities: The Early Childhood Imperative (Policy brief No. 46). UNESCO policy brief on early childhood. Retrieved from: unesdoc.unesco.org/in/rest/annotationSVC/DownloadWatermarkedAttachment/attach_import_4cef097a-bcd4-468f-869b-b8bf3c723749?_=183156eng.pdf&to=2&from=1
- 6) Braun, A. M. B. (2020). Referral and identification of special educational needs (Background paper). The 2020 Global Education Monitoring Report: Inclusion and Education. Paris: United Nations. Retrieved from: <https://unesdoc.unesco.org/ark:/48223/pf0000373657>
- 7) Bronfenbrenner U. (1979). *The ecology of human development: experiments by nature and design*. Harvard University Press.
- 8) Bronfenbrenner, U. (1986). Ecology of the family as a context for human development: Research perspectives. *Developmental Psychology*, 22(6), 723–742. <https://doi.org/10.1037/0012-1649.22.6.723>
- 9) Bronfenbrenner, U. (1994). Ecological models of human development. *Readings on the Development of Children*, 2(1), 37–43.
- 10) Coleman, J. S. (1988). Social capital in the creation of human capital. *American Journal of Sociology*, 94, 95–120.
- 11) Creswell, J. W. (2008). *Educational Research: Planning, Conducting, and Evaluating Quantitative and Qualitative Research*. Upper Saddle River: Prentice Hall.
- 12) Dodd, J., Sherry Sagggers,S., & Wildy, H. (2009). Constructing the ‘ideal’ family for family-centred practice: Challenges for delivery. *Disability & Society* 24(2), 173–186. Accessed November 14, 2021. DOI: <https://doi.org/10.1080/09687590802652447>
- 13) Dunst, C.J. & Espe-Sherwindt, M. (2016). Family-Centered Practices in Early Intervention. In Reinchow, B., Boyd, B.A., Barton. E.A., & Odom, S.L (Eds.). *Handbook of Early Childhood Special Education*, (pp. 37–55). Switzerland: Springer International Publishing. DOI: https://doi.org/10.1007/978-3-319-28492-7_3
- 14) Egilson, Snaefridur T. (2011). Parent perspectives of therapy services for their children with physical disabilities. *Scandinavian Journal of Caring Sciences*, 25(2), 277–284. Accessed November 14, 2021. DOI: <https://doi.org/10.1111/j.1471-6712.2010.00823.x>
- 15) El Asad, S., Ridge, N., Jeon, S. (2017). The Nature and Impact of Arab Father Involvement in the United Arab Emirates (Working paper 13). Sheikh Saud bin Saqr Al Qasimi Foundation for Policy Research. Retrieved from: <https://publications.alqasimifoundation.com/en/the-nature-and-impact-of-arab-father-involvement-in-the-united-arab-emirates>
- 16) Entwisle, D. R., & Astone, N. M. (1994). Some practical guidelines for measure youth’s race ethnicity and socioeconomic status. *Child Development*, 65, 1521–1540
- 17) Furstenberg, F. R., & Hughes, M. E. (1995). Social capital and successful development among at-risk youth. *Journal of Marriage and the Family*, 57, 580–192.
- 18) Snæfríður Þ.E, and Stefánsdóttir,S. (2014). Welfare services and disabled children: Perspectives from parents in the municipality of Akureyri. *Stjórnmal og stjórnsýsla* 10(2), 587–610. DOI: <https://doi.org/10.13177/irpa.a.2014.10.2.19>
- 19) Engeström, Y. (2016). *Studies in Expansive Learning: Learning What Is Not Yet There*. Cambridge: Cambridge University Press. DOI: <https://doi.org/10.1017/CBO9781316225363>

- 20) Edwards, A. (2017). Working Relationally in and Across Practices: A Cultural-Historical Approach to Collaboration. Cambridge: Cambridge University Press. DOI: <https://doi.org/10.1017/9781316275184>
- 21) Edwards, A. (2020). Agency, common knowledge and motive orientation: Working with insights from Hedegaard in research on provision for vulnerable children and young people. *Learning, Culture and Social Interaction* 26(2020), 100224. DOI: <https://doi.org/10.1016/j.lcsi.2018.04.004>
- 22) Hopwood, N. (2017). Expertise, Learning and Agency in Partnership Practices in Services for Families with Young Children. In Edwards, A. (Ed.). *Working Relationally in and across Practices: A Cultural-Historical Approach to Collaboration*. Cambridge: Cambridge University Press, pp.25–42. DOI: <https://doi.org/10.1017/9781316275184.002>
- 23) Ingólfssdóttir, J.G., Traustadóttir, R. & Egilson, S.P. (2021). Rethinking Practices by Rethinking Expertise: A Relational Approach to Family-Centred Inclusive Services. *Scandinavian Journal of Disability Research*, 23(1), pp.1–13. DOI: <http://doi.org/10.16993/sjdr.734>
- 24) Kokorelias, K.M., Gignac, M.A.M., Naglie, G. et al.. (2019). Towards a universal model of family centered care: a scoping review. *BMC Health Serv Res* 19, 564. DOI: <https://doi.org/10.1186/s12913-019-4394-5>
- 25) Krueger, R.A. & Casey, M.A. (2009). *Focus Groups: A Practical Guide for Applied Research*. Thousand Oaks: SAGE.
- 26) Lonnie Zwaigenbaum, L., Brian, J.A., Angie, Ip. (2019). Early detection for autism spectrum disorder in young children. *Paediatrics & Child Health*, 24 (7), 424–432. DOI: <https://doi.org/10.1093/pch/pxz119>
- 27) Main, M., & Weston, D. R. (1981). The quality of the toddler's relationship to mother and to father: Related to conflict behavior and the readiness to establish new relationships. *Child Development*, 52, 932-940. <https://doi.org/10.2307/1129097>
- 28) Ministry of Community Development. (2016). People of Determination (People with disabilities) [Data file]. Retrieved from: People of Determination (People with disabilities) - Datasets - UAE Open Data Portal (bayanat.ae)
- 29) Moonesar, I.A, Gaafar, R., Kambal, D., Hee Chung, N. (2021). Mental Health Policy Support, Needs & Resources in The United Arab Emirates (Policy brief Issue no. 8). (Eds.) Moonesar, I.A., Stephens, M. & Warner, R., in *International Public Policy Insights*, Academy of International Business Middle East North Africa Chapter & Mohammed Bin Rashid School of Government, Dubai, United Arab Emirates. Retrieved from: <https://mena.aib.world/wp-content/uploads/sites/5/2021/12/Public-Policy-Insights-Template-Dec-2021-MH.pdf>
- 30) Bales, R.F., & Parsons, T. (1956). *Family: Socialization and Interaction Process* (1st ed.). Routledge. <https://doi.org/10.4324/9781315824307>
- 31) Sheikh Saud bin Saqr Al Qasimi Foundation for Policy Research (2021). *Public Health in the United Arab Emirates and Ras Al Khaimah (Fact Sheet)*. Sheikh Saud bin Saqr Al Qasimi Foundation for Policy Research. Retrieved from: <https://publications.alqasimifoundation.com/en/public-health-in-the-united-arab-emirates-and-ras-al-khaimah-2021>
- 32) Sheikh, S. (n.d.). Special Educational Needs provision in mainstream schools in Dubai – is it working? A review of the evidence and recommendations for further research. Mohammed Bin Rashid School of Government. Retrieved from: <https://mbrsgcdn.azureedge.net/cmsstorage/mbrsg/files/7e/7e37a024-a8f8-404e-a930-027dfe4f02e7.pdf>
- 33) Warner R. & Moonesar I.A. (2021). Advancing the Inclusive Agenda for People of Determination in the UAE Through Sustainable Innovations. In: Park S.H., Gonzalez-Perez M.A., Floriani D.E. (Eds). *The Palgrave Handbook of Corporate Sustainability in the Digital Era*. Palgrave Macmillan, Cham. DOI: https://doi.org/10.1007/978-3-030-42412-1_39
- 34) World Health Organization & United Nations Children's Fund (UNICEF). (2012). *Early childhood development and disability: a discussion paper (Discussion paper)*. World Health Organization. Retrieved from: <https://apps.who.int/iris/handle/10665/75355>
- 3) Zakzak, L., Moonesar, I.A. & Shibl, E. (2020). Promoting Mental Health And Wellbeing For UAE School Children (Policy Council Proceedings, Session No.16). Mohammed Bin Rashid School of Government. Retrieved from: <https://mbrsgcdn.azureedge.net/cmsstorage/mbrsg/files/61/61ebf0c7-452e-4530-b5ea-bedf66f58f0b.pdf>
- 36) Zakzak, L., Pineda, V.S & Willis, S. (2019). *Inclusive Urban Development: Strategic Policy Directions Dubai and the race to become the world's most accessible and inclusive city (Policy Council Paper, Session No.14)*. Mohammed Bin Rashid School of Government. Retrieved from: <https://mbrsgcdn.azureedge.net/cmsstorage/mbrsg/files/0a/0ae2eb8d-b91e-4510-b6da-b783aaf45b5c.pdf>

- 37) Zwaigenbaum, L., Brian, J.A., Angie Ip et al. (2019). Early detection for autism spectrum disorder in young children. *Paediatrics & Child Health*, 24(7), 424–432. DOI: <https://doi.org/10.1093/pch/pxz119>
- 38) Moonesar, IA, Ahmad, F., Alzaabi, S., Drissi, M., AlJassim, F. & Al Alawy, K.(2024). Policy Council Dialogue Proceedings Report: Fathers’ Perspective and Stakeholder Mapping: Policy Intervention for Enhancing Fathers’ Role in Early Diagnostic Practices and Care for Young Children of Determination (YCOD) in Abu Dhabi and the UAE. Mohammed Bin Rashid School of Government, Dubai, United Arab Emirates. 22 June 2024. Retrieved from: www.mbrsg.ae

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