T31. TIME TO TALK MENTAL HEALTH IN DUBAI: DESCRIBING A SAMPLE OF ADOLESCENT HELP-SEEKERS ACCESSING MENTAL HEALTH SERVICES

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Background: The onset of psychosis-spectrum symptoms may be challenging to young people who are developing their identity. Internalized mental health stigma—the internalization of negative mental illness stereotypes (e.g., believing stereotypes to be true and applying them to yourself)—can lead to secrecy, shame, and withdrawal. Family factors can impact individuals who are experiencing early psychosis, but more work is needed to understand the relationship between family factors and stigma. One objective of this study was to examine if there were differences in internalized stigma across diagnostic groups. Another objective of this study was to better understand the predictors of internalized stigma among youth, particularly understudied aspects of youth stigma such as family functioning and specific types of psychosis-spectrum symptoms (e.g., positive symptoms).

Methods: Participants aged 12–25 (N = 68; Mean age = 16.41, SD = 2.88) were recruited from community providers, clinics, hospitals, and schools in Maryland, USA. Participants were classified as meeting criteria for clinical high risk for psychosis (51%), early psychosis (24%), or help-seeking controls (25%). The sample was predominantly White (53%), followed by Black/African-American (19%), Biracial/Multiracial (18%), and Asian (10%). Psychosis-spectrum symptoms and depressive symptoms were measured via the clinician-administered Structured Interview for Psychosis-Risk Syndromes (SIPS) and family functioning (e.g., cohesion, support) was measured via the self-reported Family Assessment Device. Internalized stigma was measured using the self-reported Internalized Stigma of Mental Illness (ISMI) scale. ANOVA was used to test for differences in internalized stigma between high risk, early psychosis, and help-seeking controls. Multiple regression was used to evaluate predictors of internalized stigma.

Results: Initial analyses indicated that there were no significant differences between the three diagnostic groups (F = 1.50, p = .23), but that clinical high risk for psychosis participants had the highest endorsement of internalized stigma (F2 = .05). Regression analyses indicated that unusual thought content/delusional ideas (one type of psychosis-spectrum positive symptom experiences measured by the SIPS), depressive symptoms, and lower family functioning significantly predicted (p < .05) higher internalized stigma, controlling for other psychosis-spectrum positive symptom experiences. These variables explained 26% of the variance in ISMI in the model (F = 4.01, p = .001). Negative, disorganized, and general SIPS items (except depression), as well as age, gender, race/ethnicity, relationship status, family history of psychosis, and income level, were unrelated to ISMI.

Discussion: This is the first study to assess the relationship between family functioning, psychosis-spectrum symptoms, and internalized stigma among youth. Youth endorsement of unusual thought content/delusional ideas, depressed mood, and lower family functioning were associated with more self-reported internalized stigma from mental health concerns. Better understanding the predictors of internalized stigma among youth can lead to more tailored and effective treatment approaches. This study suggests that a particular focus on certain positive symptoms and family functioning may be warranted in the treatment of internalized stigma. Future research is needed to determine the temporal precedence and nature of the impact of these factors on ISMI, in addition to the potential differential impact of family factors by race/ethnicity and culture.

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Background: Most mental health disorders begin to develop in adolescence and early adulthood. These disorders account for a significant portion of hospitalization and other societal costs. The United Arab Emirates (UAE) has a rapidly growing population, one-third of which is below 25 years of age. The UAE government has pointed at mental health as one of the areas requiring attention and has approved a strategic plan supporting mental health research, education and promotion with a specific focus on youth (Dubai Mental Health Strategy 2021). The current study represents the first investigation aimed at characterizing youth who access mental health services in the UAE (specifically Dubai).

Methods: Data was collected retrospectively from child psychiatry case records of inpatients who accessed the Mental Health Clinic at Rashid Hospital between 2011–2016. Patients who received a diagnosis of schizophrenia spectrum disorders, bipolar and related disorders, depressive disorders or anxiety disorders were included. From patients’ records, information collected included demographics, life stressors (related to family, friends, health, academic performance, or religion), duration of untreated illness (DUI), family history of mental illness, parents’ age and education, main diagnosis, presence/absence of psychotic features. Demographic information and family history had been acquired from patients and family members at the time of intake.

Results: The final sample (N = 99; Age 12–19) included 47.5% local (UAE national) and 52.5% non-local patients. The frequency of life stressors did not differ across ethnic groups except for relationships with friends, which were less likely to be reported as a source of stress among UAE nationals (χ2 = 4.35; p = 0.04) compared to other nationalities. Suicidal thoughts were less common in patients with psychotic features compared to patients without psychotic features (χ2 = 4.64; p < 0.03). A diagnosis of Depression was more common in females than males (χ2 = 3.93; p = 0.05) and was associated with more frequent suicidal thoughts (χ2 = 23.81; p < 0.001) and self-harm behavior (χ2 = 16.20; p < 0.001). Separate ANOVAs were conducted to explore the effect of different variables on DUI. Results showed that presence of Psychotic features was associated with shorter DUI (F(1,55) = 4.37; p < 0.05) while Self-harm was associated with longer DUI (F(1,70) = 5.82; p < 0.05).

Discussion: To our knowledge, this is the first study attempting to describe youth who access mental health services in the urban multi-cultural context of Dubai. A number of interesting findings were highlighted. Relationships with friends were more likely to represent a source of stress for non-local than local patients, suggesting a possible role of adjustment and social stress in migrant/expatriate youth. Suicidal thoughts were more common in patients diagnosed with depressive disorders (somewhat expected) but less common in patients presenting psychotic features. Patients experiencing psychotic features were accessing mental health services sooner (shorter DUI) compared to patients who did not experience psychotic symptoms, in line with previous literature. Interestingly, patients reporting self-harm behaviors had longer DUI. Several interpretations can be proposed, for example, it is possible that self-harm represented a coping strategy to temporarily “handle” mental illness and delay help-seeking in our sample. Studies in support of this and alternative explanations will be discussed. Taken together, our study can be a useful start point to open prevention-focused mental health discussions in the UAE and lead to improved national policies to promote youth wellbeing in the region.

T32. NEONATAL CHEMICAL HYPOXIA EXPOSURE CAUSES NEURONAL AND BEHAVIORAL ALTERATIONS RELATED TO SCHIZOPHRENIA IN WISTAR RATS
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Background: Neonatal hypoxia is a neural injury that alters neuronal connectivity and can cause long-term behavioral alterations. This study aimed to investigate the effects of neonatal hypoxia on neuronal connectivity and behavioral alterations in adult rats.

Methods: Adult rats were exposed to hypoxia or normoxia during the first week of life. The effects of hypoxia exposure on neuronal connectivity and behavioral alterations were assessed using electrophysiological and behavioral tests.

Results: Hypoxia exposure caused a significant decrease in neuronal connectivity, as measured by evoked potentials. Behaviorally, hypoxia-exposed rats showed increased anxiety-like behavior in the elevated plus maze test.

Discussion: These results suggest that neonatal hypoxia can cause long-term alterations in neuronal connectivity and behavioral changes. These findings have important implications for understanding the mechanisms underlying schizophrenia and could inform future research on the development of targeted interventions.