How are young Arab women and men doing in the context of turbulence that has characterized the region, particularly over the past few years? This is the question that brought together 28 international and regional researchers from 10 countries who convened in College Hall at the American University of Beirut to participate in a workshop entitled “Health and Wellbeing of Arab Youth.”

Organized by the Center for Research on Population and Health (CRPH) on the 13th-14th of October, the workshop aimed to focus on the health of Arab youth, with special attention to risks and protective factors, and in light of the challenges and lessons learnt from public health interventions among young people in various contexts and their applicability to the Arab world.

Faculty of Health Sciences (FHS) Dean Dr. Iman Nuwayhid opened the workshop by highlighting the importance of challenges faced by youth, who constitute around 50% of the population of the Arab world, and the urgency to identify opportunities to improve youth wellbeing, through regional collaborative activities.

In a first keynote session, Professor Ali Mokdad from the University of Washington’s Institute for Health Metrics and Evaluation presented the top causes of death and disability among Arab youth and highlighted differences in the burden of disease between low, middle, and high-income Arab countries--interestingly the analysis of large datasets from around the region indicated that road traffic injuries ranked as the highest cause of death across all income-levels. Prof Mokdad stressed that data gaps remain, and that investment in data systems will be critical to move forward towards designing interventions to address these health risks.
A second keynote by Professor Youssef Courbage from the Institut National d'Etudes Démographiques, Paris, focused on the so-called “youth bulge”—the increase in the number of young people as a result of demographic changes—and on the implications of this phenomenon for health and wellbeing. His presentation examined the potential impacts of the demographic transition on political processes, and how the differential pace of reductions in fertility and increasing education in different countries affects the social and political order. His presentation considered how the youth bulge is associated with youth literacy, workforce participation, unemployment, gender and generational differences, and the implications of these forces for social unrest and war. The presentation highlighted the dynamic nature of demographic changes and the hope that some of the current upheavals reflect transient phenomena, after which investments in education particularly, will begin to deliver on improved labor productivity and improved wellbeing.

The social and gender determinants of Arab youth health were the focus of a presentation by FHS Professor and CRPH Director Carla Makhlouf. She discussed the higher risks among Arab youth as compared to their global counterparts for transport-related injuries, cardiovascular diseases, cancer and diabetes, as well as gender differentials in the health risks of obesity, physical inactivity, tobacco use, and mental health. Makhlouf also highlighted the social context which underlies these higher risks, including a mismatch between education and employment, changing life trajectories, improvements and disparities in gender indicators, and the context of war, violence, and migration to which youth are exposed.

The health status of Arab youth was further explored through presentations from 3 different countries, the Kingdom of Saudi Arabia (KSA), the United Arab Emirates (UAE) and Lebanon. Dr Fadia Al-Buhaieran, Assistant Professor at King Abdullah International Medical Research
Center, described the status of adolescent health in KSA through a historical analysis of milestones in adolescent medicine as well as in a presentation of results of a school-based study entitled “Jeeluna” which she directed. This showed a high prevalence of poor lifestyle behaviors including dietary, physical activity and sleep behaviors with implications across the life-course.

Dr Michal Grivna, Associate Professor at the Institute of Public Health at UAE University, described studies of injuries conducted in the UAE. He emphasized that injuries are not “accidents”, and that their risks are avoidable. He showed the high burden of disability and death due to road-traffic accidents, drowning and falls in the UAE, which remain high due to cultural, environmental, and structural factors, highlighting the need for coordinated multi-sectoral injury prevention, and enforcement of new legislations to prevent injuries.

Dr Lilian Ghandour, Assistant Professor at FHS, discussed the paucity of alcohol-related research in the Arab world, and the rising prevalence of youth alcohol drinking, using the example of Lebanon, one of the few countries on which data are available. The lack of national alcohol harm reduction policies, coupled with high levels of marketing and advertising and cheap alcohol prices, define a situation where young people can easily obtain alcohol, as shown in a recent GIS analysis of neighborhoods of Beirut showing a high density of alcohol sale points in areas easily accessed by youth.

The second session explored the context-relevant measurement tools and interventions being utilized by researchers working with Arab youth. Dr. Nahla Abdel- Tawab, Country Director of the Population Council in Egypt, discussed experiences of reproductive health interventions in youth showing poor uptake of services. She highlighted some successful efforts to address reproductive health (SRH) needs among youth in the MENA region amidst the high illiteracy and school drop outs, low labor force participation, gender inequalities, delayed marriage, unsafe
sexual practices, and drug use. She also pointed that culture and society play major barriers for such programs since it is difficult to openly speak about sexual health; thus, it is important to follow scientific guidelines and increase SRH education in schools and health care services in order to reach the youth, especially girls. Dr. Rima Afifi, Professor at FHS, furthered this discussion by highlighting the importance of engaging the youth in setting the research agenda and defining interventions and policies. Dr. Afifi emphasized the crucial role of youth in society and how they are “powerful catalysts” that should be “at promise” rather than “at risk”. She also presented an example of academic-community collaborative partnerships among Palestinian adolescents in Burj al Barajneh which was a successful model to assess and intervene on complex health problems in disadvantaged communities and to engage members in all phases of the research. Ms. Layaly Hamayel of the Institute of Community and Public Health in Birzeit University provided an example of how the mental health of youth could be measured in the context of war and emergency. A large study of adolescents from Gaza Strip and West bank was conducted using local scales that measured wellbeing, distress, and human insecurity. She reflected on results showing that adolescents face high human insecurity but low distress, suggesting they might represent an indication of resilience to political violence; and on the difficulty of documenting the links between violence and mental health which is attributable to the complexity of the associations and to intervening variables and underscored the need for more research in that area.

The presentations spiked a lot of interest by the audience and most participants agreed that the workshop was an opportunity to bring different experiences together and discuss the coming steps to ensure youth wellbeing. Suggestions included conducting comparative youth health surveys, having a comprehensive approach for youth health rather than focusing on specific areas
alone, sharing existing databases and tools, updating existing data, piloting small-scale interventions and implementing a participatory approach that involves young people in the definition of research, its implementation, and its application to real life.