

# Kuwait Health Initiative Newsletter

Promoting Equitable Health Sector Reform

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**Amna Ali Hassan Shaghoul** talks about her experience and vision as KHI Board Member and Treasurer: *"The dream for all of us as KHI members is to change the health care system in Kuwait through KHI"*

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## Community Eye Health Initiative

*"Vision 2020: The Right to Sight".*

Fawzia Sultan Rehabilitation Institute (FRSI) has partnered with Agility to organize a run which will help support Kuwait University's Community Eye Health Initiative.

RunQ8 will take place on November 6th, 2010 at 9AM. Registration will start at 8:30AM. For more information about this event please visit: <http://www.runq8.org/>... Read more on page 2



**KHI Chairman represents MENA CSO at World Bank meeting... more on Page 2**

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## **Chairman represents MENA CSO at World Bank meeting**

KHI Chairman Nadeem Al-Duaij was invited by the World Bank to represent the Middle East & North Africa civil society organizations (CSO) at a recent roundtable discussion in Nairobi, Kenya. As part of the Bank's plans to formalize the relationship between its Health, Nutrition, and Population (HNP) division and the broad CSO community, it convened a series of roundtable discussions with representative of Northern and Southern CSOs and established a roadmap to create a Bank-CSO Consultative Group to better assess regional and local needs.

On October 16, 2010, a meeting was held at the Nairobi Intercontinental Hotel where the Bank hosted representatives of 31 Southern CSOs. The meeting was attended, among others, by Christian Baeza, Director of HNP, and Tamar Manuelyan Atinc, World Bank Vice-President. Through this effort, the Bank is joining other major multilateral agencies in their efforts to partner with local organizations to strengthen ongoing and future programs, improve the monitoring and evaluation of these initiatives, and better understand the local environment and its needs.

"I am confident that influential agencies like the Bank will better achieve their goal of reducing poverty, improving health status, and promoting equity by strengthening their relationship with and supporting the work of the civil society" said Al-Duaij. "It is fundamental to understand the local sociocultural traits, needs, and politics and this can only be done through partnerships with groups like the KHI".

For more information on this, please visit the [Bank-CSO Consultative Group](#) site.



## **Community Eye Health Initiative**

In 2006, Kuwait University introduced community eye health initiative projects through the strategic review for eye care services in Kuwait. Through this initiative in Kuwait we hope to join international efforts in preventing avoidable blindness as a part of "*Vision 2020: The Right to Sight*". Vision 2020 is a joint initiative of the World Health Organization (WHO) and the International Agency for the Prevention of Blindness (IAPB) supported by other UN agencies, governments, eye care organizations, health professionals, institutions and individuals all working together in partnership to eliminate avoidable blindness.

The Community Eye Health Initiative aims, through its different projects, to offer community eye health programs, to raise public awareness about risk factors leading to vision impairment, to organize educational activities for eye health professionals, and to facilitate population based research about blindness and visual impairment in Kuwait.



Fawzia Sultan  
**REHABILITATION**  
INSTITUTE

## KHI Mission and Vision

*Every individual should have access to health services in an equitable and ethically sound manner irrespective of race, religion, gender, nationality, or socioeconomic status*



## October is Breast Cancer Awareness

Breast cancer is the most common cancer in women worldwide, comprising 16% of all female cancers. It is estimated that 519 000 women died in 2004 due to breast cancer, and although breast cancer is thought to be a disease of the developed world, a majority (69%) of all breast cancer deaths occurs in developing countries (WHO Global Burden of Disease, 2004).

Breast cancer starts in the breast tissue. Women and men both have breasts, although women have more breast tissue than men. A woman's breast is mainly

made up of milk-producing glands (called lobules) and tubes (called ducts), which are surrounded and protected by fatty and connective tissue.

Early detection and diagnosis is a means finding a cancer or precancerous condition at an early stage. In most cases, finding cancer early increases the chances of successful treatment. Screening for breast cancer is done by mammography and clinical breast examinations. Regular mammography is the method that finds cancerous lumps. While not every lump is cancerous, a woman's risk of getting breast cancer increases after the age of 50. A woman's breasts may feel different at different times of her menstrual cycle, sometimes becoming lumpy just before her period. Breast tissue also changes with age. Breast tissue in younger women is mostly made of glands and milk ducts, but older women's breasts are made up mostly of fatty tissue.

Women who are at higher than average risk for breast cancer, such as those with a strong family history of breast cancer, should talk to their doctor about a personal plan for testing. All women should be familiar with their breasts. Any changes a woman finds should be reported to a doctor.



*KHI Articles***Knowledge and Practice of Road Safety Among Kuwait University Students**

**Conducted by 5th Year Medical Students:** Abdol-Raouf Dashti, Hussain Al Sarraf, Rawan Al Fouzan, Reham Al Hassan, Sarah Al Ajlan

**Academic Supervisor:** Dr. Manal Bouhaimed, MD, PhD, FRCS, Department of Community Medicine and Behavioral Sciences, Department of Surgery, Faculty of Medicine-Kuwait University

**Introduction**

"The lack of safety on our roads has become an important obstacle to health and development," said Dr Margaret Chan, WHO Director-General. "Our children and young adults are among the most vulnerable. Road traffic crashes are not 'accidents'. We need to challenge the notion that they are unavoidable and make room for a pro-active, preventive approach" (WHO, 2007).

Road transport is complex and dangerous at times but it is undisputedly an essential method of transport worldwide. Recent published figures about road traffic accidents in the literature indicate that we are facing a serious public health problem at the global, regional and local levels requiring dire efforts for effective and sustainable prevention.

Mortality from road traffic accidents worldwide averages 26.3% per 100,000 people per year with estimated 1.2 million deaths and 50 million injuries (WHO, 2009). Global and regional records suggest there are 40 million people with disabilities who have limited access to rehabilitation and nearly non-existent social reintegration (Al-Kharusi, 2008).

Out of the 12 leading causes of mortality worldwide, road traffic injuries are ranked the 11<sup>th</sup> cause of death responsible for 2.1% of all global death. As for DALYS, road traffic injuries were ranked in the 9<sup>th</sup> place with a proportion of 2.6% of all causes.

Over the last ten years, Kuwait has witnessed 461,809 car accidents, which in turn led to the death of 3,817 people. These deaths are estimated to have cost Kuwait 1.8 % of its gross domestic product (Kuwait road safety association, 2009). There were 61,298 reported accidents in

2009 in Kuwait resulting in 407 deaths compared to 56,000 accidents resulting in 416 deaths in the year before. (AlWatan Daily News, 2009). The objectives of this study are:

- ◆ To evaluate the knowledge about road traffic signs and laws among Kuwait University students.
- ◆ To evaluate safe driving practices of Kuwait University students.

**Method**

A cross sectional study involving 1200 students between the ages of 18 – 25 from six different Kuwait University faculties. A self-administered questionnaire was used to collect data.

A scoring system was used to identify the level of knowledge and practice among the participants. The questionnaire contains fifteen questions to evaluate the knowledge level of participants. Each correct answer was given a mark of one and the incorrect answer was given zero. The same applied to the fifteen practice questions. The answers that reflect safe practice were given a mark of one and zero for unsafe practice.

Chi-square test was used to assess the associations between the independent variable with knowledge and practice score. Then, a multivariate logistic regression is carried out to adjust for potential confounders.

**Results**

The knowledge score was normally distributed with a mean of 7.9 out of 15, while the practice score was not normally distributed with a median of 5.63

out of 15. Forty percent of the participants had poor knowledge about road traffic signs and laws and sixty percent had safe driving practice. In the past year, sixty-seven percent of the 1200 students received tickets and sixty-three students were involved in road traffic accident. Poor knowledge of traffic signs and regulations was statistically ( $p < 0.001$ ) associated with risky driving behaviors  $OR = 1.654$  [95% CI 1.253–2.183]. Male students had higher unsafe driving practices than females (adjusted  $OR = 5.725$ , [95% CI 4.320-7.587];  $p = 0.001$ ). Three years or more of driving experience was also associated with risky driving behavior compared with less than three years of driving experience (adjusted  $OR = 2.053$  [95% CI 1.420 – 2.968];  $p < 0.001$ ). Art students had significantly ( $p = 0.002$ ) higher unsafe driving practices - $OR = 2.078$ , [95% CI 1.300-3.323] compared to other students in other faculties. Also, living in Al Jahra governorate was significantly ( $p = 0.032$ ) associated with unsafe driving practices -adjusted  $OR = 1.918$  [95% CI 1.058-3.477] compared to other governorates.

### Conclusion

There is high involvement in car accidents and traffic violations among Kuwait University students. Older age, male gender, faculty of study, residential governorate, driving experience, and poor level of traffic signs and laws were found to be statistically associated with risky driving behavior. Educational interventions, public awareness campaigns, reinforcement of existing laws like Seat belt and mobile phone use while driving, and introduction of new laws to regulate other neglected areas like the child car seat usage could greatly reduce the toll of this hazard in Kuwait.

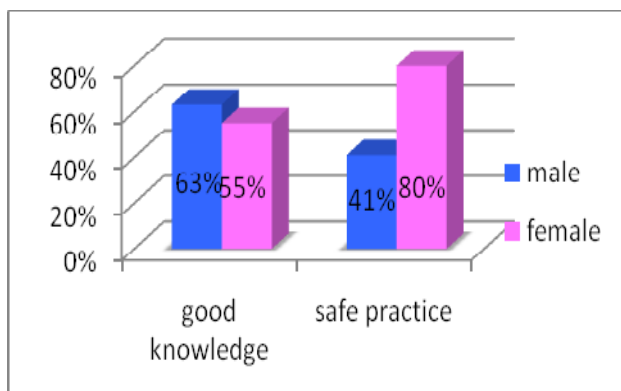


Figure 1: Knowledge and practice scores among Male and Female students

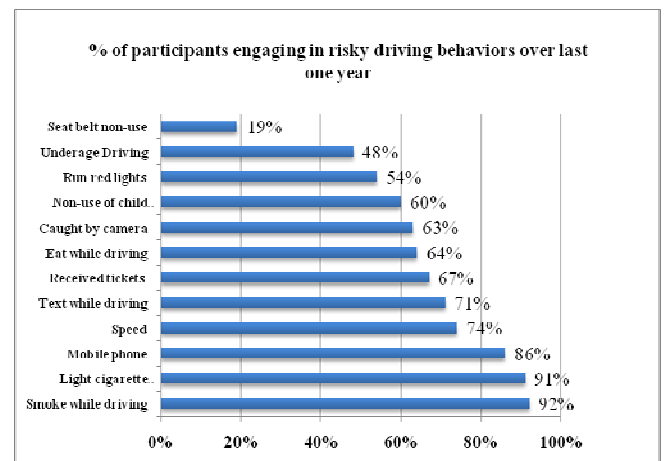


Figure 2: Risky Driving Behaviors among 1200 Students

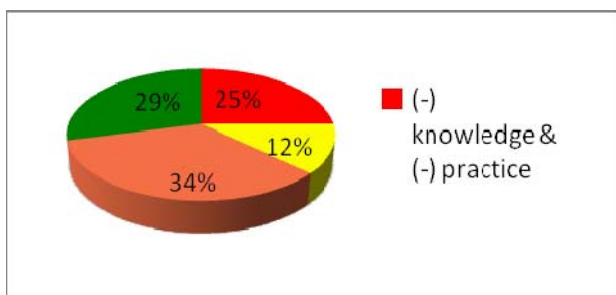


Figure 3: Combined Knowledge and Practice Scores Among Male Students

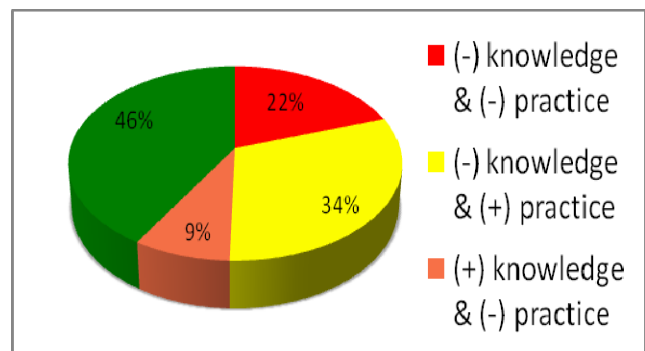


Figure 4: Combined Knowledge and Practice Scores Among Female Students



## *Interview with KHI member:* **Amna Ali Hassan Shaghoul**

KHI Newsletter (KHI NL) team had the chance to meet Dr. Amna Shaghoul - KHI board member and treasurer. In this interview, we uncover her background, her values, and her vision for the KHI.

We started by asking her to introduce herself to our readers, KHI NL team: "Please tell us about yourself, your profession, the type of work you do on a daily basis and your background"

Amna: "Amna Ali Hassan Shaghoul, 36 yrs. I am an endocrinologist and fellow of the Royal College of Physicians (Canada). I currently work at The Amiri Hospital, Diabetes Unit. I hold three clinics per week. One of the clinics is to deal with mostly type one diabetic patients with intensive control including patients on insulin pumps, the other one is dealing with type 2 diabetic patients. The third one is at Maternity Hospital where I look after pregnant ladies with diabetes. The rest of the week, I am involved in inpatient consultations for diabetes. Other activities I'm involved in include teaching nursing staff and other health care professionals on diabetes and its management"

KHI NL team: "What is your passion in health? What drives you on a daily basis?"

Amna: "Trying to help people in general and giving equal opportunity for all patients without discrimination. Working in a healthcare environment which is professionally ethical starting with myself, where this is really deficient here in Kuwait. Of course, I love working with diabetic patients".

KHI NL team: "What contributions have you made while working in Kuwait?"

Amna: "I have been involved in:

- ▶ Supervising a dose Adjustment for Normal Eating (DAFNE) course at the Amiri Hospital for type one diabetic patients
- ▶ Conducting diabetes management workshops for nursing staff at Amiri Hospital
- ▶ Researching diabetes among college students in Kuwait with the head of the diabetes unit at Amiri Hospital
- ▶ Lecturing and organizing the first Amiri Medical Day (AMDD), CMR program - a refreshment course for all medical staff at Dasman center in April 2010 called: How high your blood sugar should be in hospital?
- ▶ Organizing the Amiri public day in Avenues: increasing awareness of diabetes and its risk. Consulted patient results on this day."

KHI NL team: "Did you study in Kuwait or abroad? (If studied abroad what brought you back to Kuwait?)"

Amna: "I studied medicine at Leeds Medical School in the United Kingdom and worked there for 1 year as a house officer, after which, I came back to Kuwait and worked in Mubarak Al Kabeer Hospital for 4 years as a senior house officer. Following my work period in Kuwait, I completed my graduate medical education in Toronto in internal medicine and specialized in endocrinology. The reason I returned to Kuwait

*There should be polices regarding doctors rights. we are lacking behind regarding ethical issues"*



was because of a sense of belonging and to be close to my family. Additionally, I have an obligation to share my knowledge and skills to improve quality of care and the health status of the people of Kuwait. I always felt that I do belong to this land”.

**KHI NL team:** “What do you see yourself doing in the future for Kuwait's health care industry?”

Amna: “I hope that I will be one of the leaders in Kuwait helping to change the health care system that currently we are suffering from. I would love to be an able to change that through the KHI and I believe that is the hope and the dream for all of us as KHI members”.

**KHI team:** “Outside of your profession what other interests do you have?”

Amna: “I enjoy spending time with my 2 little ones especially that now I have a baby girl that is 5 months old, My family comes at first. Other interest includes: exercise, swimming, shopping”.

**KHI team:** “Where would you like to see / what would you want to do for Kuwait's future health care?”

Amna: “I see myself as an advising consultant in a health agency hopefully that is the KHI center, as a general physician and as a specialized endocrinologist”.

**KHI team:** “What do you feel has been your most successful accomplishment in your field of work today?”

Amna: “Being able to help diabetic patient in Kuwait a treatment according to the international (American or Canadian) standards and helping allied health care providers to understand their role and improving their skills to treat and deal with people with diabetes. In addition trying to increase public awareness by contributing in different campaigns”.

**KHI team:** “What are some key challenges you feel Kuwait's health care industry faces today?”

***“Kuwait’s health system needs immediate action”***

Amna: “Key challenges is that the whole system needs immediate action. I think young fresh passionate leadership will be useful in Kuwait. Young people are full of energy and can use their knowledge to enhance the healthcare system. These young people are full of energy and with their education on new academic systems. Their visions and perspectives will put plans and solutions for the coming years. Currently, in Kuwait we are lacking policies regarding ethical issues and about doctors and patient rights”.

**KHI team:** “Do you have an opinion / any thoughts about the Kuwait health reform?”

Amna: “Health reform: this is almost what I was trying to say on the previous point. I attended a conference held in Kuwait about health reform 2009 organized by Kuwait Medical Association (KMA). The conference did not deliver what it advocated for, first of all, it was not tackling the key points of changing the health care in Kuwait, they brought people from abroad and from Saudi Arabia to lecture about their achievements. The big problem comes from the decision makers in Kuwait, where none of them came to this conference, which means that they are not interested”.

**KHI team:** “How do you see yourself fitting in to Kuwait Health Initiative? What role do you see yourself playing as part of KHI?”

Amna: “I believe that we have to think outside the box: KHI is my dream to improve health care in Kuwait, where I see it as a consultant centre not only in Kuwait though covering the Gulf region trying to improve health care and provides health policies in all medical fields for the area from a research standards”.

## Upcoming Events

- EnviroCities 2010 International Conference “Green Cities” InterContinental Hotel - Dubai Festival City - UAE <http://www.ecat.ae/en/> November 28 - 29, 2010
- Kuwait Occupational Health & Safety Conference— Hilton Kuwait Resort. <http://kuwaitohs.com/> December 6 - 7, 2010
- 1st Middle East Conference on Biomedical Engineering. Sharja– UAE. <http://mecbme.org/> February 21 - 24, 2011
- Gulf Environment Forum 2011 - Hilton Jeddah— KSA <http://www.gulfenvironmentforum.com/welcome/> March 6 - 8, 2011

### **KHI Polls... Your Voice Matters**

**Do you have enough knowledge of your health when you visit government facilities?**

**Yes, No, Some,**

**Please participate by sending your feedback to [enas.alfarra@q8health.org](mailto:enas.alfarra@q8health.org) OR [nafeesa.ladha@q8health.org](mailto:nafeesa.ladha@q8health.org)**



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