MENTAL WELLBEING IN KUWAIT, A SERVICE HERO SURVEY SUMMARY REPORT

Strategic Partner

Strategic Partner

Dedication

This survey was conducted to provide a glimmer of hope to those suffering in darkness and solitude - even when surrounded by family and friends.

You are not alone. We see you and feel for you. You are heroes

Thank You

It is humbling for us to see the overwhelming response we received from the community on this project.

In particular, private individuals who shared their most intimate thoughts. The thanks is also extended to our partners, without you, we could not have collected such a rigorous sample in such a short time.

Thank you all for your trust in Service Hero.

Powered by	Strategic Partner	Gold Sponsor		Sponsors

Methodology

The main instrument of for the Mental Health Survey, is the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) with moderate adaptations to make the subject matter more applicable to local culture whilst also measuring unique local stressors.

The survey was bilingual and was conducted online.

Sample size and demographics

The sample of 4372 responses represent 6 demographic groups.

Its composition is equally split by gender,

69% are Kuwaiti,

39% private sector,

20% government staff,

51% university graduates and
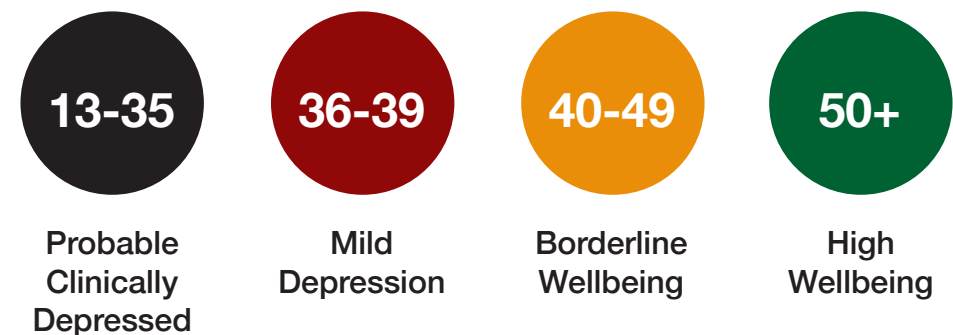
24% aged 18-29,

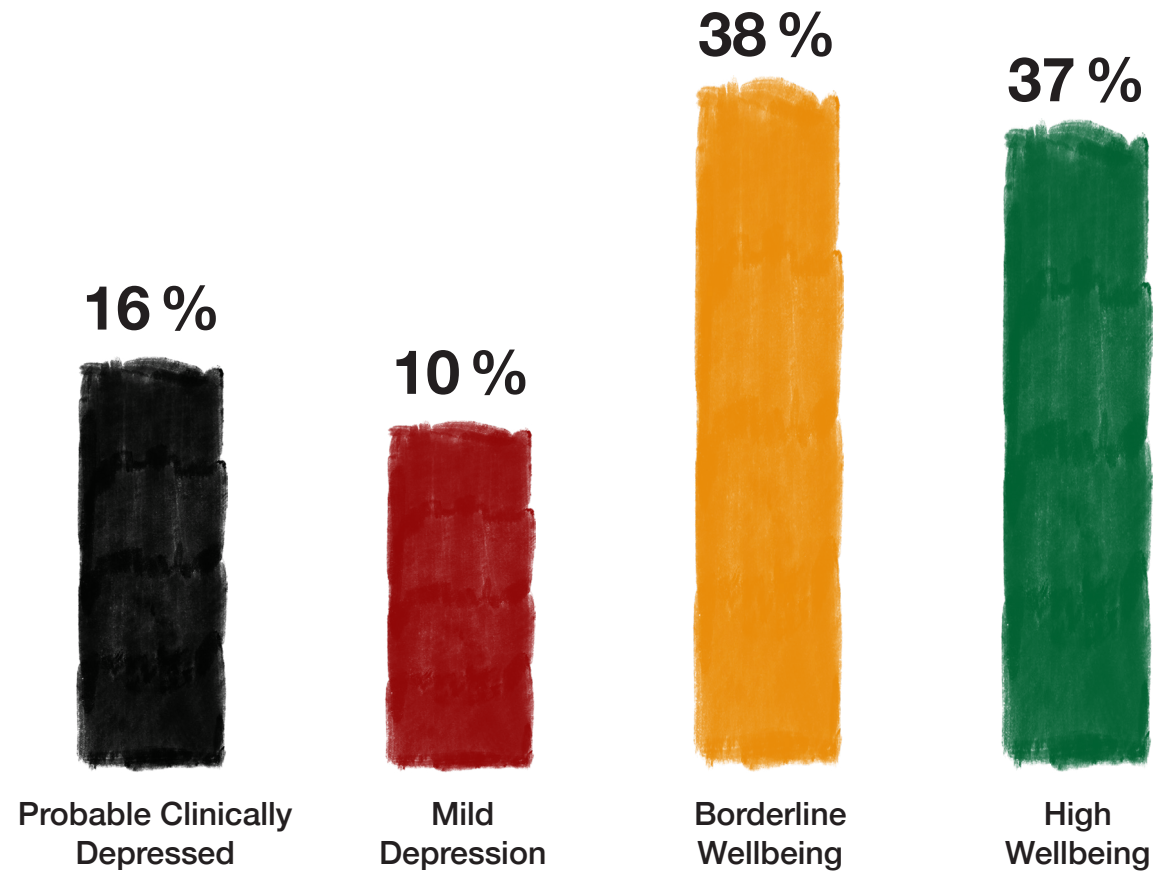32% aged 30-39, and

23% 40-49.

How the scores are interpreted

The WEMWBS is scored by summing the responses to each of all questions on a 1 to 5 Likert scale (1= None of the time to 5 + All of the time). All questions are equally weighted. Scores can range from a minimum of 13 to a maximum of 65 points.

Below is the interpretation legend used to categorize the WEMWBS section of the survey:

13-35	36-39	40-49	50+
Probable Clinically Depressed	Mild Depression	Borderline Wellbeing	High Wellbeing

Population Distribution by Wellbeing Group

16 %

10 %

38 %

37 %

Probable Clinically
Depressed

Mild
Depression

Borderline
Wellbeing

High
Wellbeing

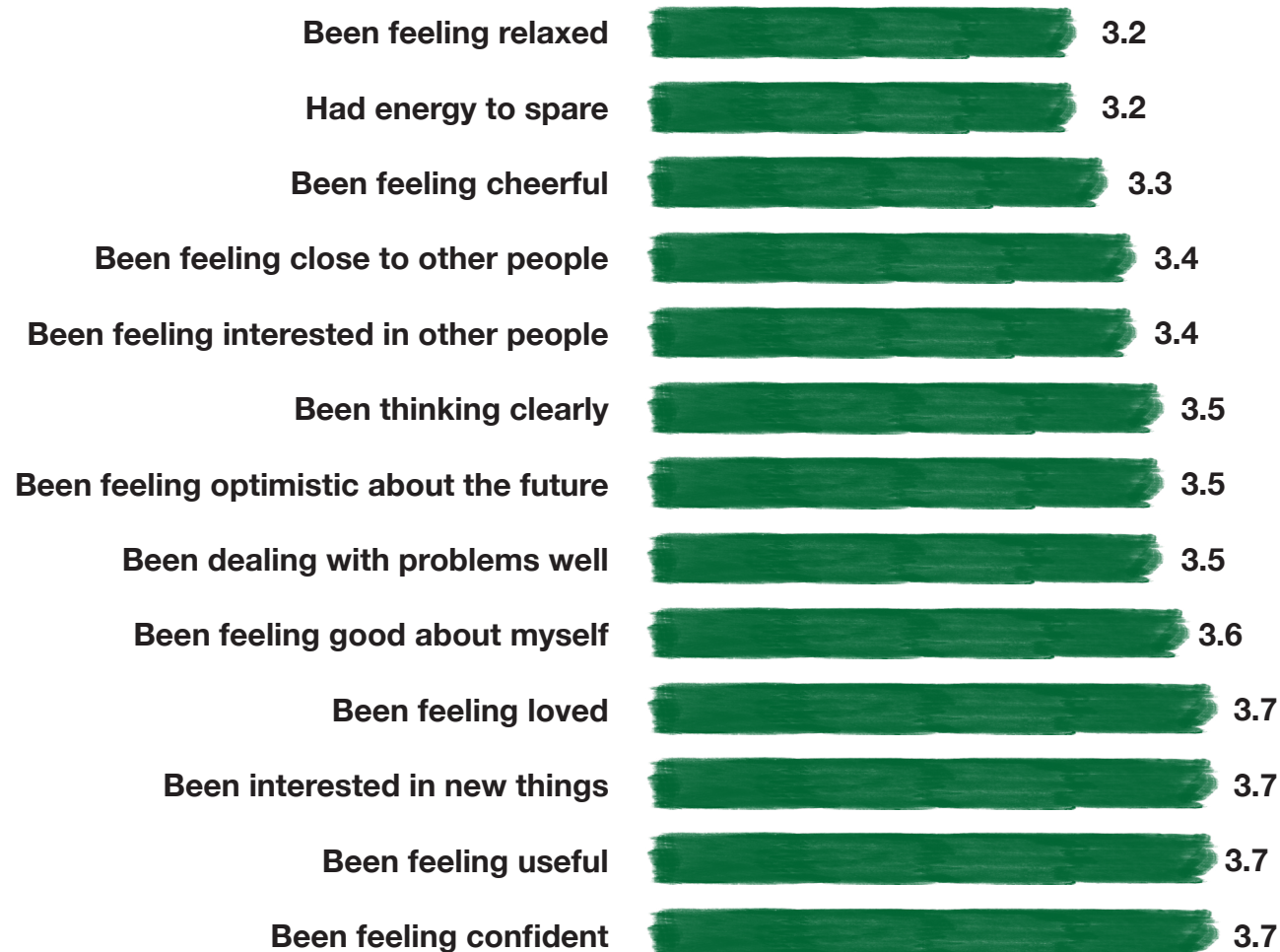|	**Probable Clinical Depression at 16%**	**Mild Depression at 10%**	**Borderline Positive Wellbeing is 38%**	**Positive Wellbeing population is 37%**
	Among the population identified as having Probable Clinical Depression with a score below 35 points, the highest concentration is among:	Among the population identified with Mild Depression (score between 36-39 points) the highest concentration is among:	Among the population identified as above the line for Mild Depression is a group we identify as Borderline Positive Wellbeing (a score between 40-49 points) the highest concentration is among:	Among the population identified with Positive Wellbeing (a score between 50-65 points) the highest concentration is among:
Age	Under 16 at 31%, 18-29 at 26%.	Under 16 at 16%.	40-49 & 18-29 had lowest score in this one.	Over 60% of people aged 50 and above.
Gender	Females at 19%.	Females at 11%.	No difference between males and females.	41% of Males.
Education	High School at 20%, Elementary at 19%.	High School at 12%, Elementary at 12%.	50% of elementary holders.	43% of Master or PhD, 44% of diploma holders.
Nationality	Non-Arab at 18%.	Non-Arab at 12%.	40% of Non-Arabs	40% of Arabs.
Area of residence	Hawalli at 17%	No significant difference.	No significant difference.	No significant differences.
Employer	Student at 27%, Not employed at 23%.	Student at 15%.	43% among Unemployed	68% of Retired people, 51% work in Non-profits.

Stress is causing fatigue and isolation

Been feeling relaxed	3.2
Had energy to spare	3.2
Been feeling cheerful	3.3
Been feeling close to other people	3.4
Been feeling interested in other people	3.4
Been thinking clearly	3.5
Been feeling optimistic about the future	3.5
Been dealing with problems well	3.5
Been feeling good about myself	3.6
Been feeling loved	3.7
Been interested in new things	3.7
Been feeling useful	3.7
Been feeling confident	3.7

Additional questions unique to Kuwait

In addition to the WEMWBS index, five questions were added.

- These questions scored 3.2 overall which translates into 64% out of 100%.
- Highest is sense of community.
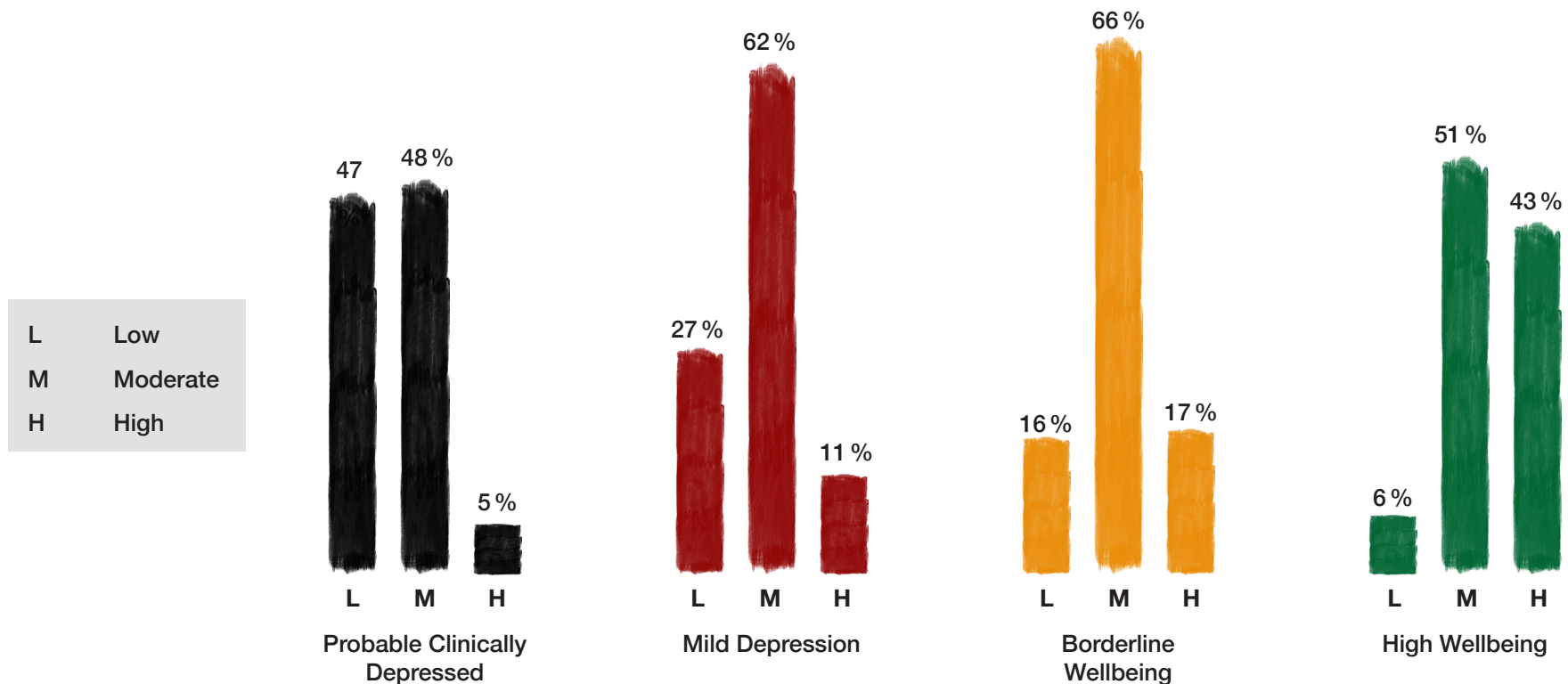- Lowest is finding access to help and social stigma.

Local context questions	Total	All
I feel like I belong to a community in Kuwait	3.7	74%
I feel comfortable discussing my mental health openly	3.4	68%
I'm close to someone with mental health issues	3.3	66%
I feel Kuwait has a progressive outlook towards mental health	2.8	56%
I feel it is easy to find mental health help for people in Kuwait	2.7	54%
Total	**3.2**	**64%**
Out of 100%		**64%**

Mental Wellbeing and local score

Correlating what respondents scored the local community and support to the WEMWBS groups, uncovers that:

- People with Clinical Depression scored the lowest for local community and support.

- People with High Positive Wellbeing scored the highest for local community and support.

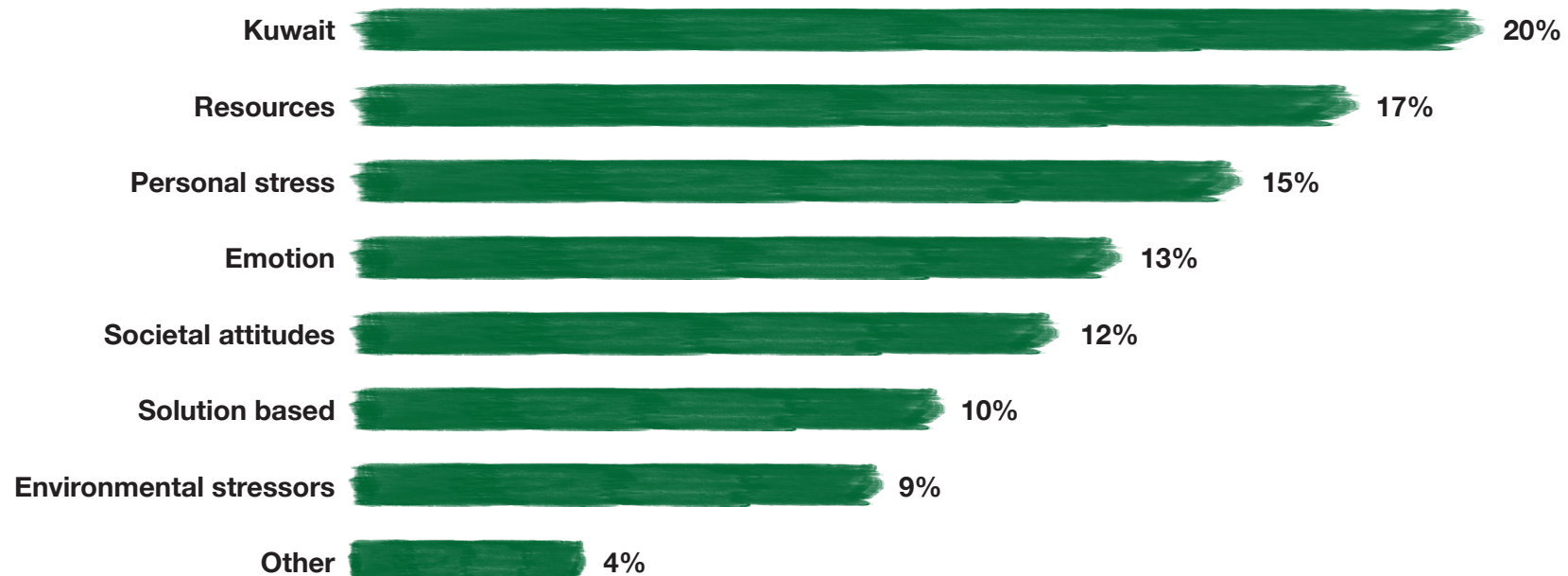**WEMWBS Group vs. Kuwait Local Score**

L	Low
M	Moderate
H	High

Probable Clinically Depressed: L 47, M 48 %, H 5 %

Mild Depression: L 27 %, M 62 %, H 11 %

Borderline Wellbeing: L 16 %, M 66 %, H 17 %

High Wellbeing: L 6 %, M 51 %, H 43 %

Open-ended comments analysis

Kuwait   infrastructure, future, legislation.

Resources   accessibility, affordability, lack of good professionals, medication.

Personal stress financial security, uncertainty, job security.

Emotion   unhappy, recovery, need help, hope.

Societal attitudes   lack of empathy, stigma, work environment.

Solution based   awareness, youth focus, religion.

Environmental stressors racism, inadequate recreational spaces, war, education.

Other

Comment theme overview

Kuwait	20%
Resources	17%
Personal stress	15%
Emotion	13%
Societal attitudes	12%
Solution based	10%
Environmental stressors	9%
Other	4%

Implications for Kuwait

Depression prevalent among youth, Non-Arab and Kuwaiti students, unemployed and women

1 **out of** **4**

people have either Clinical or Mild Depression

Damaging wellbeing

Stress, lack of energy and pessimism

Not being able to find help and social stigma

Poor infrastructure, uncertain future, legislation

Lack of accessibility affordability, lack of good professionals

Financial and job security

Four areas driving better mental wellbeing

Resources

Making resources easily available in government and private clinics and facilitating easier access

Youth

Ensure qualified counselors are found in schools, parents are trained to recognize mental wellbeing issues, and enable more recreational activities

Fighting stigma and raising awareness

Build awareness campaigns to destigmatize the disease and change attitudes

Legislation

Ensure laws in place to protect those with mental health issues, establish a licensing board, and encourage employers to have mental wellbeing programs