

المؤسسة الاتحادية للشباب
FEDERAL YOUTH AUTHORITY

EHS | مؤسسة الإمارات للخدمات الصحية
Emirates Health Services

سلام

مبادرة شباب الإمارات للصحة النفسية
Emirates Youth Mental Health Initiative

Youth Mental Health Manual



INDEX

2	_____	IN CASE OF EMERGENCY
3	_____	Ways to help yourself when feeling vulnerable
4	_____	If a Friend is at Risk
6	_____	Wellness Library (Books/Podcasts/ movies)
10	_____	Facilities Offering Mental Health Services Under Emirates Health Services
12	_____	Relaxation Guide
20	_____	Mental Health at a Glance

Introduction

Global statistics indicate that nearly one in every five young people around the world experiences some form of mental health challenge—whether it's stress, anxiety, or even mental fatigue—and more than 70% of them do not seek help, either because they feel embarrassed or simply don't know where to start.

Other studies also show that about six in ten young people consider their mental health a top priority in life, yet they still search for practical and simple tools to help them maintain balance amid the pressures of daily life.

Even here in the United Arab Emirates, we've observed through youth events and initiatives that conversations around mental well-being have become more open and aware. However, there remains a need for safe spaces and awareness resources that resonate with young people's mindset and way of expression.

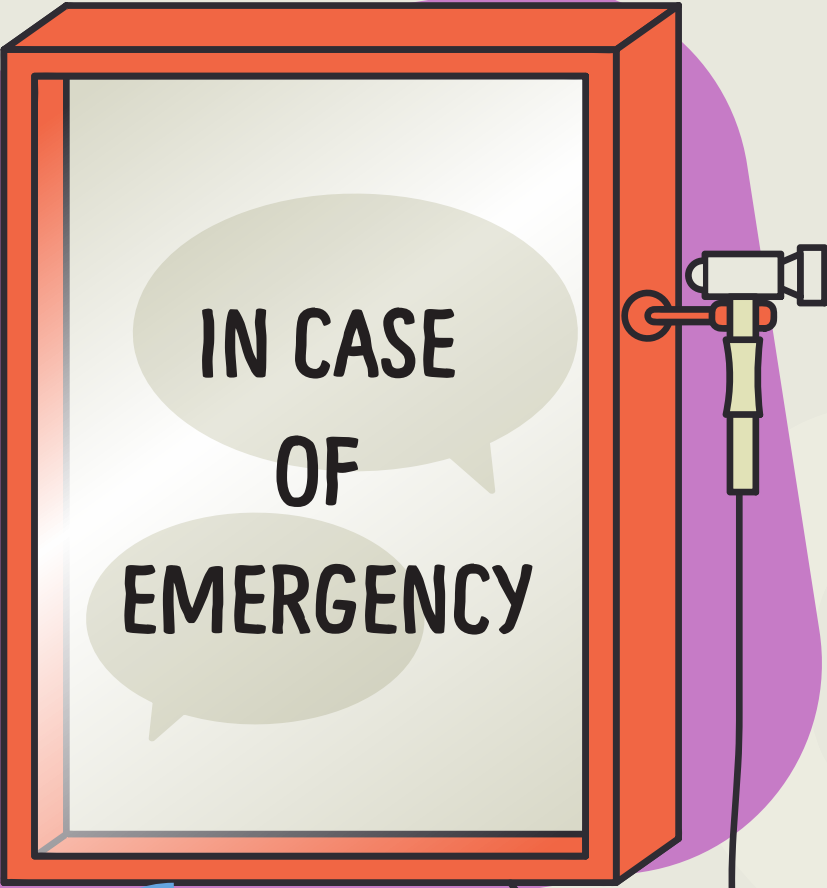
From this need—and within the framework of the "Emirates Youth Mental Health Initiative – Salam"—our project was born: the Youth Mental Health Guide Manual, developed in collaboration between the Federal Youth Authority and the Emirates Health Services.

Our vision was clear — to make the concept of mental health accessible, realistic, and easy to understand for youth. This manual is not a theoretical book, but rather an interactive space that includes simple exercises, practical tips, and tools to help young people understand themselves more deeply and manage stress more effectively.

It also includes a dedicated section for immediate support hotlines, a library of simplified educational content, and a space for calm and relaxation.

We hope this manual serves as a starting point for every young person who wishes to take better care of themselves—and that everyone realizes that self-care is strength, not weakness.

Together, we will continue to build a youth environment that is more balanced, comfortable, and happy.



IN CASE
OF
EMERGENCY

Hospitals

Psychiatric Emergency Services (Dubai):

Al Amal Psychiatric Hospital:

24/7 psychiatric emergency unit
with a full team.

Rashid Hospital:

Emergency department equipped for
psychiatric crises. In any urgent
situation, go to the nearest hospital
for initial support and referral.

Ambulance

998

Helpline:

"Speak out, We're Listening" –
Al Amal Hospital:

800-8877 (press 2, then 2).

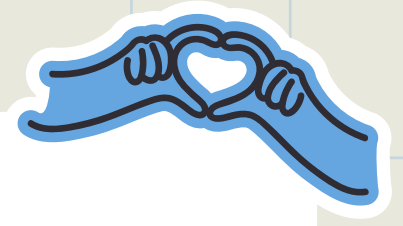
Available Mon–Fri, 9 am–6 pm
for stress, anxiety, mood, and
depression support.

Police

999

Ways to help yourself when feeling vulnerable

Strategies to cope, improve resilience, and reduce overwhelm



1

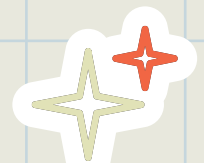
Self-Care Basics

- ☐ Regular Sleep Schedule
- ☐ Balanced Nutrition
- ☐ Physical Activity
- ☐ Breaks From Screen/Social Media When Needed

2

Routine & Structure

- ☐ Make Time For Rest, Hobbies, Social Connections
- ☐ Set Small Daily Goals
- ☐ Use Tools Like Planners & Reminders



3

Mindfulness & Relaxation Techniques

- ☐ Breathing Exercises, Meditation Apps
- ☐ Journaling To Process Thoughts, Worries
- ☐ Practices That Ground You
(E.g. Walks In Nature, Listening To Music)



4

Reach Out & Build Support

- ☐ Trusted friends, family, mentors
- ☐ When needed, mental health professionals (Therapists)

5

Learn to recognize when it's more serious

- ☐ If symptoms are severe, long-lasting, or getting worse
- ☐ If day-to-day functioning is impaired (school/work/friends)
- ☐ Thoughts of self-harm or suicide — seek help immediately



If a Friend is at Risk



Know when it's an emergency

If they talk about suicide, have a plan, or act in dangerous ways. Call local emergency number: 999 in UAE. Or contact suicide prevention hotlines in your area

Notice the warning signs

- Talking about hopelessness, death, or self-harm
- Withdrawal from friends, family, or activities
- Sudden changes in sleep, mood, or behavior
- Giving away belongings or saying "goodbye" in unusual ways

Start the conversation

- Choose a private, calm moment
- Speak with care: "I've noticed you seem down lately, I'm worried about you"
- Listen without judgment

Encourage professional help

- Suggest reaching out to a therapist, doctor, or helpline
- Offer to go with them if they feel nervous

Stay connected

- Check in regularly
- Invite them to activities, even if they say no at first
- Remind them they are not alone



BOOKS

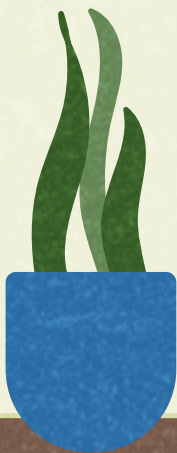


The Happiness Advantage — Shawn Achor

Atomic Habits — James Clear

In the Early Hours — Khurram Murad

The Gifts of Imperfection — Brené Brown



The Power of Now — Eckhart Tolle

Mindset: The New Psychology of Success
Carol S. Dweck

Ikigai: The Japanese Secret to a Long and Happy Life
Héctor García & Francesc Miralles

PODCASTS

Think With Hessa

Hessa Alsuwaidi

طمئن

Samar

لأنك تستحق العيش بسلام

Zahra Alnafaily

أنا عايش ؟

SELF-IMPROVMENT

Ara-أري

Mythayal Al Ali

كلام وعي

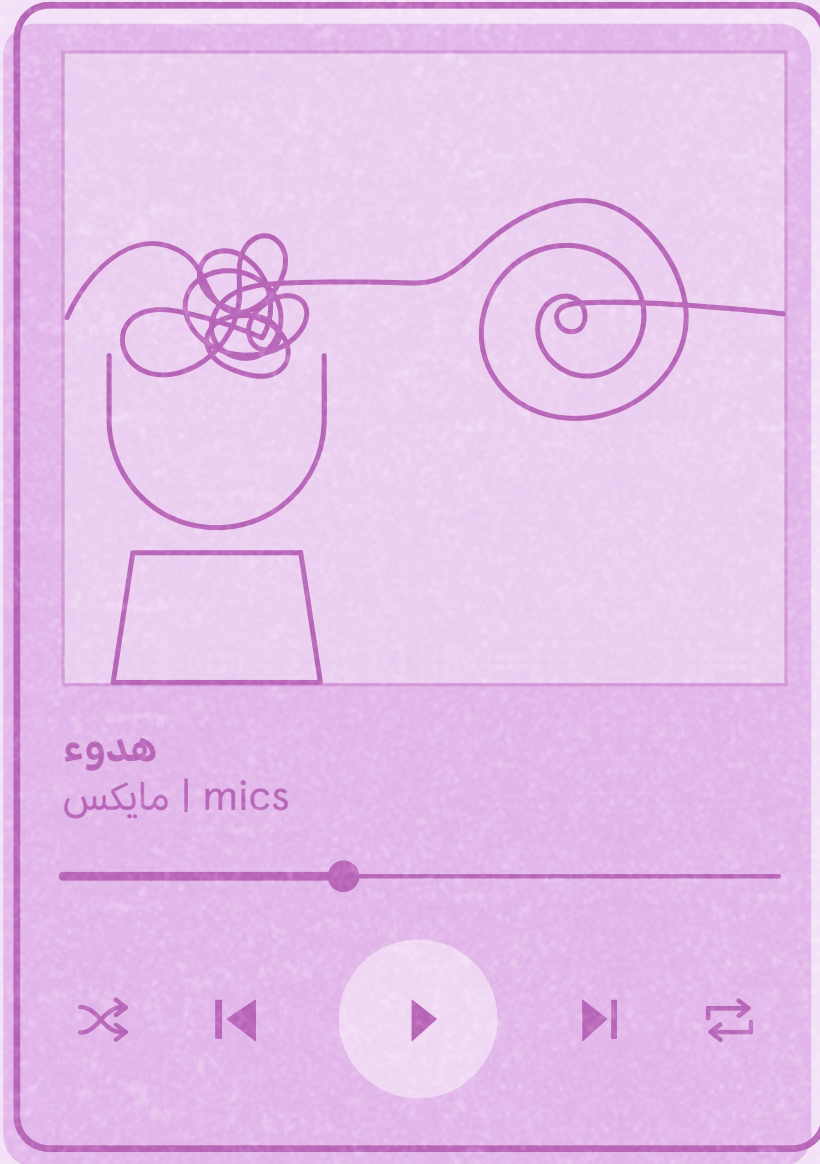
Sausan Fahad

بودكاست رذاذ

RathathPodcast

هدوء

mics | مايكس





MOVIES

Wonder Park

Big Hero 6

Headspace Guide to Sleep

The Mind, Explained

Inside Out 1 & 2

The Pursuit of Happyness

Headspace Guide to Meditation

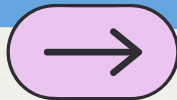
A Beautiful Mind

The Blind Side

Temple Grandin



**Facilities Offering Mental
Health Services Under
Emirates Health Services**





Mindfulness

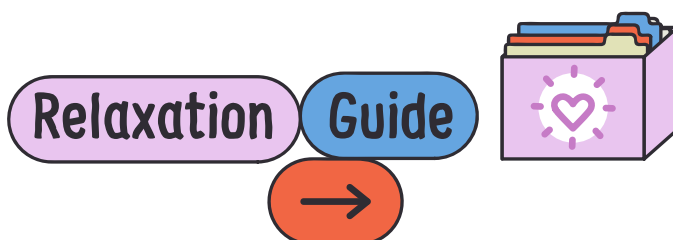
Gratitude

Relaxation & Breathing Techniques

Worry Time

Behavioral Activation

Thought Record & Cognitive Restructuring





Desk Stretches

Incorporate simple stretches at your desk to release tension in your neck, shoulders, and back.

Single Tasking

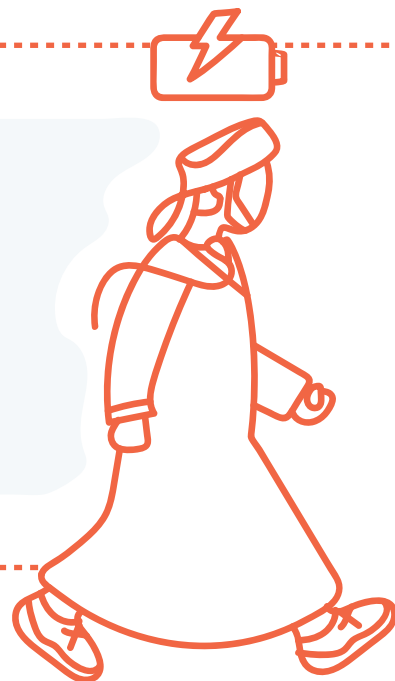
Focus on one task at a time. Avoid multitasking to reduce stress and improve the quality of your work.

Digital Detox

Schedule short breaks without screens. Step away from your computer and phone to give your mind a rest.

Mindful Walking

Take short walks during breaks. Pay attention to your steps, the sensation of walking, and your surroundings.



Gratitude

Gratitude is the recognition of what is truly valuable and meaningful, reflecting a general state of thankfulness. Practicing gratitude enhances both physical & mental well-being.

How to
keep a
gratitude
journal



Keep it moderate

Writing 1–3 times per week is more effective than daily journaling

Write it down

Don't just keep a list in your head. record people and things you're grateful for so you can revisit them later

Be specific

The clearer and more precise you are, the stronger the impact

Depth matters more

than quantity
Focusing deeply on one thing brings more benefit than making a long, shallow list



Technique: Deep Breathing

Purpose: Calm your body
and mind when
feeling anxious or
overwhelmed.

Steps

1

Sit
comfortably

2

Inhale deeply
through your
nose for 4 sec

3

Hold your breath
for 2–3 sec

4

Exhale slowly
through your
mouth for 6 sec

5

Repeat for
2–5 minutes



Worry Time

Purpose: Manage anxious thoughts by containing them to a specific time.

steps



Choose a 15–20 minute “worry time” each day

Whenever a worry pops up during the day, say: “I’ll think about this at worry time”

During your worry time, write down all your worries

When the time ends, close the list and move on to another activity

Behavioral Activation

Purpose: Improve mood by doing enjoyable or meaningful activities

steps

List small activities that give you a sense of joy or accomplishment

- ☐ Walking
- ☒ Cooking
- ☐ Talking to a friend



Schedule 1–2 activities per day, even if small

Complete the activity and note your feelings before and after

Repeat daily, slowly increasing what you do as you feel better

Mindfulness

Gratitude

Relaxation & Breathing Techniques

Worry Time

Behavioral Activation

Thought Record & Cognitive Restructuring

Thought Record & Cognitive Restructuring

Purpose: Challenge negative thinking and change unhelpful thought patterns

steps

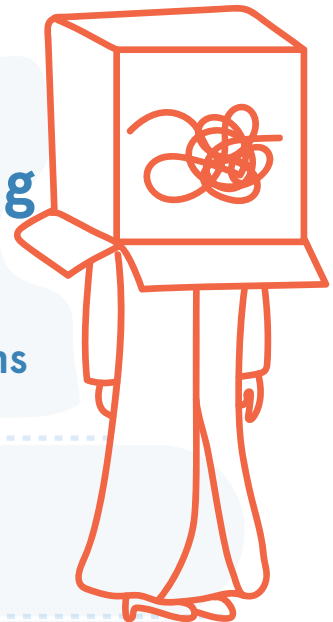
Identify a negative thought
(e.g. "I'm a failure")

Write down the situation when this thought occurred

Ask yourself: What is the evidence for and against this thought? Is there another way to look at the situation?

Replace it with a more balanced thought
(e.g. "I had a hard day, but that doesn't define me")

Reflect on how your feelings changed after reframing



19

Mental Health a Glance



Myths vs. Facts

Myth

Fact

Mental health problems are rare and affect only a few people

Mental health issues are common. In any given year, 1 in 5 people experience a mental illness

Mental health problems are a sign of personal weakness.

Mental health conditions are not a reflection of character. They are influenced by a combination of genetic, biological, environmental, and psychological factors

People with mental health problems are often violent or dangerous.

Individuals with mental health conditions are more likely to be victims of violence than perpetrators.

Mental health problems are always obvious.

Many mental health issues are invisible. People can manage symptoms privately, and early signs may not be apparent to others.

Myth	Fact
Mental health problems are permanent and unchangeable.	With appropriate treatment and support, many individuals recover or manage their mental health conditions effectively
Only adults experience mental health problems.	Mental health issues can affect children and adolescents. Half of all mental health disorders show first signs before a person turns 14, and three-quarters begin before age 24
Talking about mental health makes it worse.	Open conversations about mental health can reduce stigma and encourage individuals to seek help when needed.
Seeking help for mental health problems is a sign of failure.	Seeking help is a proactive step towards recovery and well-being. It reflects strength and self-awareness, not failure



Things to know about GRIEF |



There's No "Right" Way to Grieve. All emotional responses are valid.

Grief Can Be Triggered Unexpectedly by anniversaries, holidays, or familiar scents.

Grief Doesn't Follow a Set Timeline. Healing takes time and varies for each person.

It's Okay to Seek Professional Help if grief feels overwhelming or persistent.

Grief Can Affect Your Physical Health. Taking care of your body supports emotional healing.

Grief is a Natural Response to Loss. It's a personal journey, not a disorder.

You Don't Have to Grieve Alone. Seek support from friends, family, or a counselor

You Can Honor Your Loved One's Memory by creating a tribute or making a donation.

Grief Can Be a Spiritual Journey leading to personal growth and deeper understanding.



About Self-Harm |

Self-harm is intentional injury without suicidal intent. It is not a suicide attempt but a way to cope with emotional pain (cutting, burning, overdosing on medication).

It's a coping mechanism, not a cry for attention. Many individuals hide their self-harm behaviors due to shame. They often seek help only when they feel safe & supported

It can affect anyone, regardless of age or gender

It's often linked to mental health conditions like depression, anxiety, ptsd, and borderline personality disorder

It's not always about past abuse. It can also stem from difficulties in expressing emotions or feeling overwhelmed

Self-harm can lead to serious physical injury and accidental suicide

It's not a trend or phase. It reflects deep emotional distress.

Social media can exacerbate the issue

Support and treatment are available (Treatment may include therapy, medication, and support from loved ones).

Early intervention improves outcomes

Schizophrenia I

Schizophrenia is a disorder affecting thinking, behavior, and perception. It does not mean having two personalities or violent behavior. Typically begins between ages 15–25 and affects both genders equally. Affects 1 in every 100 people.

I Symptoms

Hallucinations: Hearing voices, seeing things, or smelling scents that do not exist.

Delusions: False beliefs not based in reality, such as feeling watched, controlled, or having special powers.

Loss of motivation and drive to work or engage in activities.

Social withdrawal and discomfort around others.

Difficulty concentrating and easily getting distracted.

Neglect of personal hygiene and grooming

I Diagnosis

There is no laboratory or imaging test to diagnose schizophrenia.

Diagnosis is made through a comprehensive psychiatric evaluation.

Diagnosis relies on internationally recognized manuals.

When to See a Doctor?

When experiencing or noticing any of the positive or negative symptoms mentioned.

Early intervention improves treatment response and reduces relapse risk



Living with Schizophrenia I

Take prescribed medications as directed by your doctor.

Learn and recognize early warning signs of relapse by consulting your doctor.

If hospital visits are difficult, a community mental health team can provide home visits (available in Dubai and Sharjah).

Seek support from family and friends, and talk openly about challenges.

The doctor can refer you to the hospital's social services for help with social or family issues.

How to Support Someone with Schizophrenia I

Be supportive, empathetic, and a good listener.

Share accurate information about the illness.

Encourage treatment adherence and a balanced lifestyle.

Common Misconceptions and Truths I

Misconceptions	Truth
All people with schizophrenia have the same symptoms	Symptoms vary from person to person
People with schizophrenia are dangerous	Most are not dangerous, especially with treatment
They must live in a hospital	Many live with their families
They cannot lead a productive life	They can work and study with treatment and support
The illness always gets worse over time	The condition can improve with treatment and follow-up
Schizophrenia is purely genetic	Genetics is a factor, but environment and stress play a major role

Addiction I

Addiction is a chronic relapsing disease where a person continues using alcohol or drugs despite harm. It often begins as an experiment during adolescence, then progresses into a compulsive pattern with loss of control and strong craving for the substance.

An addict loses control, whereas a drug user can still regulate use. Recognition of addiction often occurs when the person fails to quit and realizes the need for professional help

Factors I

Environmental factors: Availability of substances, presence of an addicted role model, peer pressure, or social acceptance of drugs (e.g., cannabis).

Personal risk factors: ADHD, emotional disorders, adolescence crisis, borderline or psychopathic personality disorders.

Family upbringing factors: Neglect, excessive control, over-pampering, or violence



Myth 1: Addiction is voluntary

Truth: It starts voluntarily but later brain changes make it compulsive and out of control.

Myth 2: Addicts are criminals, insane, or stupid.

Truth: They are not criminals or insane; addiction is a disease, not stupidity.

Myth 3: Addiction is a problem of will

Truth: It damages brain areas controlling use, so it's not just weak will.

Myth 4: All drugs kill brain cells.

Truth: Only some (alcohol, inhalants, meth) do — and recovery can improve brain health

Myth 5: Prescription drugs are always safe.

Truth: Misuse or high doses can cause serious harm or death

Myth 6: Legal means safe.

Truth: Legality doesn't equal safety; health risk depends on the substance



Myth 7: Addicts can quit anytime without help.

Truth: The decision is key but professional treatment is needed for lasting recovery

Myth 8: You must “hit bottom” to recover.

Truth: Early treatment brings faster, easier recovery and fewer losses

Myth 9: Only willing patients recover.

Truth: Forced or voluntary treatment both work if the full program is completed

Myth 10: Addiction can't be treated.

Truth: Treatment cuts relapse by 40–60% and improves all life areas

Myth 11: One treatment cures addiction.

Truth: It's a chronic disease needing lifelong management.

Myth 12: Recovery requires hospitalization.

Truth: Some recover through outpatient programs



Myth 13: Treating withdrawal = treating addiction.

Truth: Withdrawal care is just the first step; full rehab is essential.

Myth 14: Hospital discharge means cured.

Truth: Recovery continues with at least a year of follow-up

Myth 15: Motivation shortens treatment.

Truth: Proven effective programs last at least 90 days, then continued care

Myth 16: Using medication opposes recovery.

Truth: Medications are vital to manage symptoms and prevent complications

Myth 17: Substitution meds alone cure addiction.

Truth: Drugs help but must be combined with psychological therapy

Myth 18: CBT means addiction is only behavioral.

Truth: Addiction is a brain disease; CBT helps by changing brain function

Job Burnout I

Job burnout is a state of emotional, physical, and mental exhaustion caused by excessive and prolonged stress. It reduces productivity and drains your energy, gradually making you feel helpless, hopeless, pessimistic, and resentful.

Symptoms I

Feeling tired and exhausted most of the time.

Weakened immunity and frequent illnesses.

Frequent headaches or muscle pain.

Changes in appetite or sleeping habits.

Feelings of failure and self-doubt.

Feeling helpless, trapped, or unmotivated.

Gradually developing a more negative and pessimistic outlook, with reduced satisfaction and a sense of accomplishment.

Procrastinating, delaying tasks, or withdrawing from responsibilities.

Skipping work, arriving late, or leaving early.

Causes I

Tendency toward perfectionism — never satisfied with “good enough,” always striving for more.

A pessimistic outlook on yourself and the world.

A need for control and reluctance to delegate tasks to others.

Working excessively without enough time for rest or social connection.

Not getting enough sleep.



How to deal with job burnout I

Social connection is a natural stress reliever; talking face-to-face with someone who listens well is one of the quickest ways to calm your nervous system.

Limit contact with negative people.

Find balance in your life and take regular breaks.

Take time to reflect on your hopes, goals, and dreams, and nurture your creative side.

Prioritize rest and make sure you get enough sleep.

Learn how to manage stress in the moment by controlling your thoughts and emotions.

Strengthen your relationships at work and at home to enhance your overall well-being and happiness.

Try rhythmic exercises such as walking, jogging, weight training, swimming, martial arts, or dancing.

Bipolar I

Bipolar disorder was previously called “manic-depressive illness”. It involves extreme mood swings between depression and mania.

Symptoms I

Depressive episodes: deep sadness, hopelessness, and loss of interest.

Manic episodes: excessive happiness, energy, and risky behaviour.

Hypomania: a milder form of mania.

Mixed episodes: combine depression and mania.

Severe episodes: may include psychotic symptoms such as delusions or guilt

Prevalence & Causes I

About 1 in 50 adults experience bipolar disorder during their lifetime.

It usually begins between ages 15 and 25 and rarely after 50.

Both genetic and environmental factors influence risk.



Treatment I

Psychological treatments include: psychoeducation, CBT, and family therapy.

Medication options: lithium, anticonvulsants, and antipsychotics.

Patients should see a general practitioner first and then a psychiatrist if diagnosed.

Managing the Condition & Self-care I

Managing mood includes recognizing early signs and maintaining self-care.

Self-care involves: balance, exercise, medication adherence, and avoiding stress.

Depression |

Depression is more than feeling sad; it's a real illness, not a weakness

Symptoms |

Common symptoms include persistent low mood, hopelessness, guilt, and loss of interest. Physical symptoms may include fatigue, weight changes, pain, and sleep disturbance.

Causes & Triggers |

Stress, Illness, Loss, Relationship Problems, Or Hormonal Imbalance

Diagnosis |

Doctors use the ICD-10 and DSM-5 manuals to diagnose depression. Diagnosis is made by psychiatric assessment, not blood tests or scans

Treatment |

Treatment depends on the type and severity of depression:

Self-help: improving sleep, diet, exercise, relaxation, and mindfulness

Psychological therapy: CBT, counseling, mindfulness therapy, psychodynamic therapy

Antidepressants (especially SSRIs) may be prescribed for moderate to severe depression.



Coping Strategies I

Exercise – Regular Sleep – Healthy Diet – Social Support – Relaxation – Mindfulness.

When to Seek Help I

Seek professional help if you feel suicidal, hopeless, or unable to cope. It requires professional help from a psychiatrist or psychologist but is treatable. Most people with depression can recover fully with proper treatment and support.

In Emergency I

Al Amal Psychiatric Hospital offers 24-hour emergency services in Dubai.



Obsessive–Compulsive Disorder (OCD) I

A mental disorder that causes obsessions (intrusive, recurring thoughts) and compulsions (repetitive behaviors or mental acts). It is classified as a type of anxiety disorder.

Obsessions are irrational thoughts or beliefs that persist even when the person knows they are not real.

Compulsions are mental or physical actions that the person feels compelled to perform.

Symptoms I

Repetitive, intrusive thoughts or behaviors that are hard to control, and anxiety when trying to resist them

Examples include:

Fear of others' intentions, germs, contamination, or things not being perfectly arranged



Causes |

Genetics: Having a close relative with OCD increases the risk.

Life changes: Puberty, moving, or taking on new responsibilities.

Personality traits: Highly organized or perfectionist individuals may be more prone to OCD.

Treatment |

Cognitive Behavioral Therapy (CBT): Helps change thought and behavior patterns related to obsessions.

Medication: Reduces symptoms and helps balance brain chemistry.

Both treatments can be combined under psychiatric supervision.

Commitment to treatment and ongoing support are key to long-term recovery.

Anxiety

Anxiety is how your body responds to a demand. Anything that brings on feelings of stress is called a stressor. Anxiety is not necessarily bad and is meant to protect you from external dangers. When you sense danger—whether it's real or imagined—the body's defenses kick into an automatic process known as the "fight-or-flight" reaction or the "stress response." This is helpful when you are faced with a real danger (as it will help you to run or fight) but if this reaction happens too often or when you are not actually under threat then it may become a problem for you.

Symptoms |

When a person feels stressed, certain hormones (chemicals in your body) are released. These hormones cause many changes in your body, for example:

Increased heart rate

High blood pressure

Intestinal cramps

Muscle tension

Chronic anxiety can affect both your physical and mental health. Common effects include:

Physical: Weakened immunity, headaches, poor sleep, muscle tension, digestive or skin issues.

Mental: Poor concentration, forgetfulness, recurring negative thoughts.

Emotional: Anxiety, depression, anger, irritability, helplessness.

Behavioral: Unhealthy eating, reckless driving, or substance misuse



How to Cope with Anxiety I

Recognize your stress: Notice signs like poor focus, headaches, or low energy, and identify what triggers your anxiety

Relax your body: Try Box Breathing — inhale 4 sec, hold 4, exhale 4, pause 4 — for 5 minutes daily

Practice mindfulness: It helps calm your mind and increase focus

Get enough rest: Lack of sleep can worsen stress; unwind with calm music or reading

Eat well: Choose balanced meals, avoid junk food and alcohol
Stay active: Exercise releases endorphins that lift your mood

Set boundaries: Don't overload yourself; saying "no" sometimes helps

Seek support: Talk to trusted people or a therapist if stress feels overwhelming.

