

DEMOCRACY AND PANDEMICS



13 — 15.11.25

Fondazione Giorgio Cini, Venezia



Evidence-Based Summary of the United Arab Emirates' experience in managing COVID-19 and related epidemic measures

Dr. Taghreed M. Abu Sarhan
Advisor to H.E. Director General of Abu Dhabi Family Care Authority



2025



UAE – Vision & Achievements

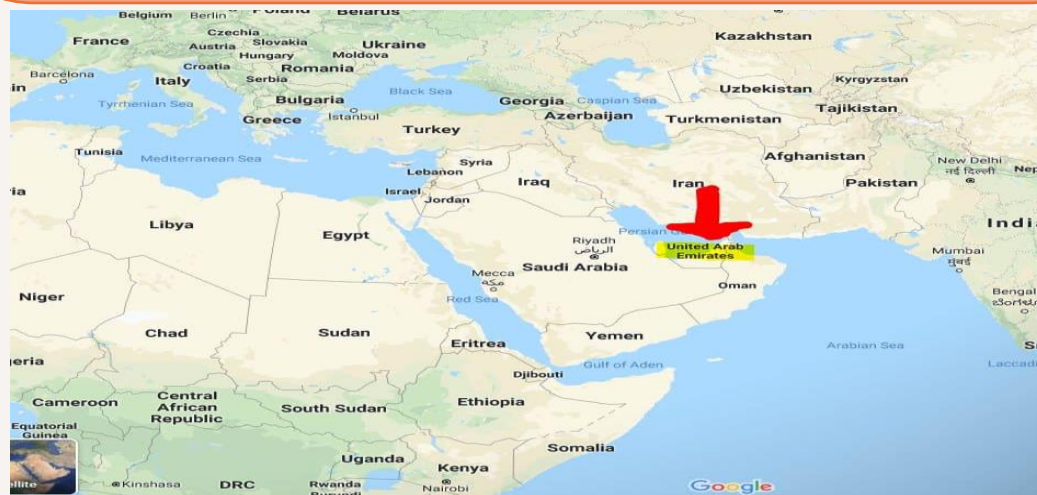
United Arab Emirates – A Global Hub of Innovation & Heritage

Visionary Leadership. Rapid transformation since 1971; UAE Vision 2031 & 2071 for sustainable development and innovation.

Economic Success. Diversified economy; global business & finance hub; thriving tourism and tech sectors.

Iconic Infrastructure. Burj Khalifa, Sheikh Zayed Grand Mosque, Louvre Abu Dhabi, Palm Jumeirah.

Innovation & Science. First Arab mission to Mars (Hope Probe), AI & smart government initiatives, renewable energy leadership.



❑ The United Arab Emirates is a fascinating country located in the Middle East. It was established in the year 1971. The UAE is comprised of seven Emirates each with its unique culture and traditions. The UAE has a rich history and is home to many ancient ruins and archaeological sites. Emiratis are proud of their culture and heritage, and the country is known for its luxury hotels, resorts, and shopping malls. Here are some fun facts about the UAE:

1. The UAE Population Is 9.8 Million, Made up of 200+ Nationalities
2. The Official Language of the UAE Is Arabic
3. The seven Emirates that make up the UAE are Abu Dhabi, Ras Al Khaimah, Ajman, Dubai, Sharjah, Fujairah, and Umm al Quwain. The UAE's capital is Abu Dhabi, but its largest city is Dubai.
4. The UAE Is the World's Third Largest Oil Producer
5. UAE Is Home to Many of the Tallest and Largest Attractions. It has the World's Highest Tower (Burj Khalifah Tower)
6. The UAE Is Ahead of Its Time in Artificial Intelligence.



Background

- ❑ With the global outbreak of coronavirus in 2019 (COVID-19), governments across the globe faced the challenge of outlining policy capacity to contain the spread of infection and overcome human tragedy.
- ❑ To overcome this global public health emergency, the government of the United Arab Emirates (UAE) used a rigorous approach to mitigate the consequences of this non-communicable pandemic through effective approaches.
- ❑ Therefore, this presentation aims to explore the role of the leadership of the United Arab Emirates (UAE) in controlling COVID-19. It figures out the practical policy steps and outcomes and the lessons learned from the pandemic.

Executive summary

- ❑ The UAE adopted an aggressive, multi-pillared **public-health response to COVID-19**: large-scale **PCR testing and isolation**, **rapid deployment of digital contact-tracing tools**, **early and wide vaccine procurement + rollout**, **strong governance** and logistics for vaccine distribution, multilingual public communication campaigns, and capacity expansion of health services.
- ❑ These measures are associated in the peer-reviewed literature with **high testing rates**, **rapid vaccine uptake and strong vaccine effectiveness against severe disease**, and **relatively low mortality** compared with many other countries. (Al-Hosani et al., 2021; Suliman et al., 2021; Albreiki et al., 2023).

- Albreiki, M., et al. (2023). Risk of hospitalization and vaccine effectiveness among COVID-19 patients in the UAE during the Delta and Omicron outbreaks. *Frontiers in Immunology*. <https://doi.org/10.3389/fimmu.2023.1049393>
- Albreiki, M., Alhosani, F. I., Amlal, A., Alkaabi, N., & Alkhaja, A. (2023). Risk of hospitalization and vaccine effectiveness among COVID-19 patients in the United Arab Emirates during the Delta and Omicron outbreaks. *Frontiers in Immunology*, 14, 1049393. <https://doi.org/10.3389/fimmu.2023.1049393>
- Al-Hosani, F., Al-Mazrouei, S., Al-Memari, S., Al-Yafei, Z., Paulo, M. S., & Koornneef, E. (2021). A Review of COVID-19 Mass Testing in the United Arab Emirates. *Frontiers in public health*, 9, 661134. <https://doi.org/10.3389/fpubh.2021.661134>
- Suliman, D. M., Nawaz, F. A., Mohanan, P., Modber, M. A. K. A., Musa, M. K., Musa, M. B., El Chbib, D., Elhadi, Y. A. M., Essar, M. Y., Isa, M. A., Lucero-Prisno, D. E., 3rd, & Moonesar, I. A. (2021). UAE efforts in promoting COVID-19 vaccination and building vaccine confidence. *Vaccine*, 39(43), 6341–6345. <https://doi.org/10.1016/j.vaccine.2021.09.015>

1. Governance, strategy and communication

- ❑ **Governance:** UAE authorities (federal and Emirate-level) created unified clinical and public-health guidelines, coordinated NCEMA, health authorities (DoH Abu Dhabi, DHA Dubai, MoHAP) and mobilized leadership to promote compliance and vaccine uptake. Political leadership publicly endorsed vaccination, which supported population trust and uptake. (Suliman et al., 2021).
- ❑ **Communication:** Multilingual public campaigns (#TogetherWeRecover and others), targeted messaging through religious and community leaders, and active counter-misinformation efforts helped raise awareness and vaccine confidence in a diverse expatriate population. (Suliman et al., 2021; Saeed et al., 2021).

- Suliman, D. M., Nawaz, F. A., Mohanan, P., Modber, M. A. K. A., Musa, M. K., Musa, M. B., El Chbib, D., Elhadi, Y. A. M., Essar, M. Y., Isa, M. A., Lucero-Prisno, D. E., 3rd, & Moonesar, I. A. (2021). UAE efforts in promoting COVID-19 vaccination and building vaccine confidence. *Vaccine*, 39(43), 6341–6345. <https://doi.org/10.1016/j.vaccine.2021.09.015>
- Saeed, B. Q., Elbarazi, I., Barakat, M., Adrees, A. O., & Fahady, K. S. (2021). COVID-19 health awareness among the United Arab Emirates population. *PLOS ONE*, 16(9), e0255408. <https://doi.org/10.1371/journal.pone.0255408>

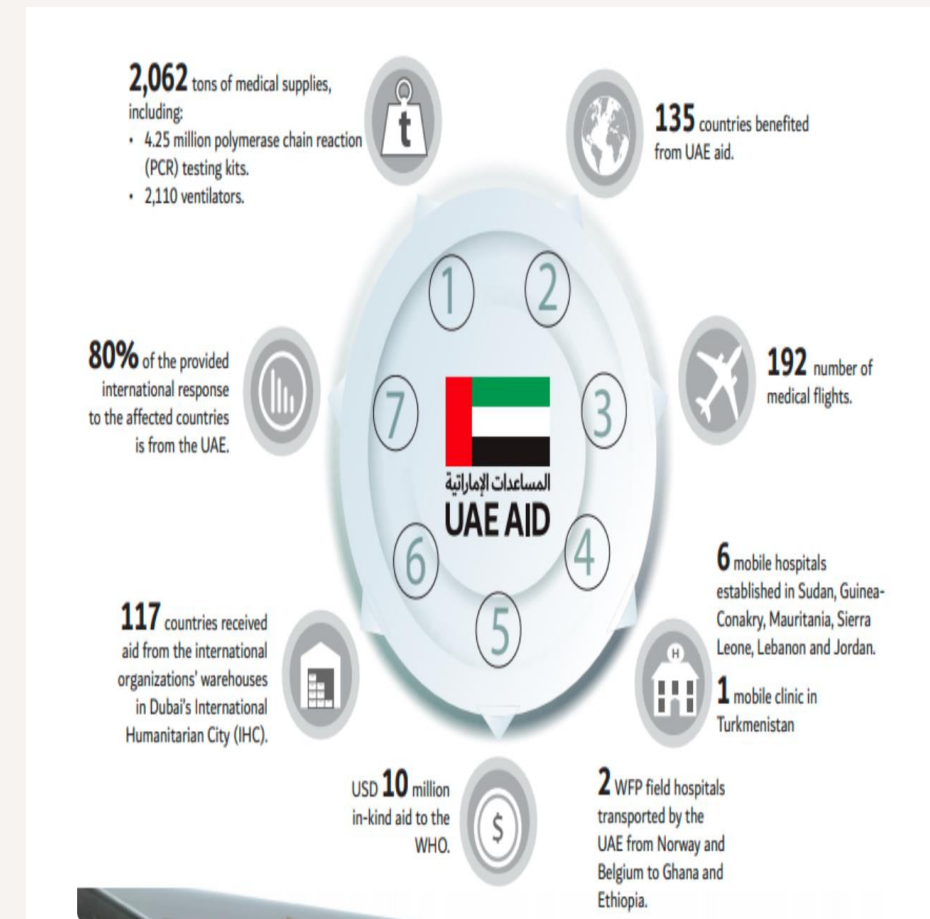


2. Testing, tracing and isolation (containment measures)

- ❑ **Mass testing:** UAE implemented one of the world's most intensive mass-testing programs (drive-through sites, open testing for asymptomatic persons), conducting very high tests per capita early in the pandemic; mass testing was a central pillar linked with detection, timely isolation and lower observed mortality in comparative analyses. (Al-Hosani et al., 2021).

- ❑ **Contact tracing & digital tools:** UAE launched digital solutions (e.g., ALHOSN app) and used technology to support contact tracing and exposure notification. Systematic reviews of digital contact-tracing show such tools can be helpful when adoption is sufficiently high, usable, and privacy concerns are addressed — points highlighted as relevant to the UAE experience. (Nabeel et al., 2022; Al-Hosani et al., 2021).

- ❑ Al-Hosani, F., Al-Mazrouei, S., Al-Memari, S., Al-Yafei, Z., Paulo, M. S., & Koormeef, E. (2021). A Review of COVID-19 Mass Testing in the United Arab Emirates. *Frontiers in public health*, 9, 661-134. <https://doi.org/10.3389/fpubh.2021.661134>
- ❑ Nabeel, A., Al-Sabah, S. K., & Ashrafian, H. (2022). Digital contact tracing applications against COVID-19: A systematic review. *Medical Principles and Practice*, 31(5), 424–432. <https://doi.org/10.1159/000526672> & ibid



3. Vaccination rollout, supply & logistics

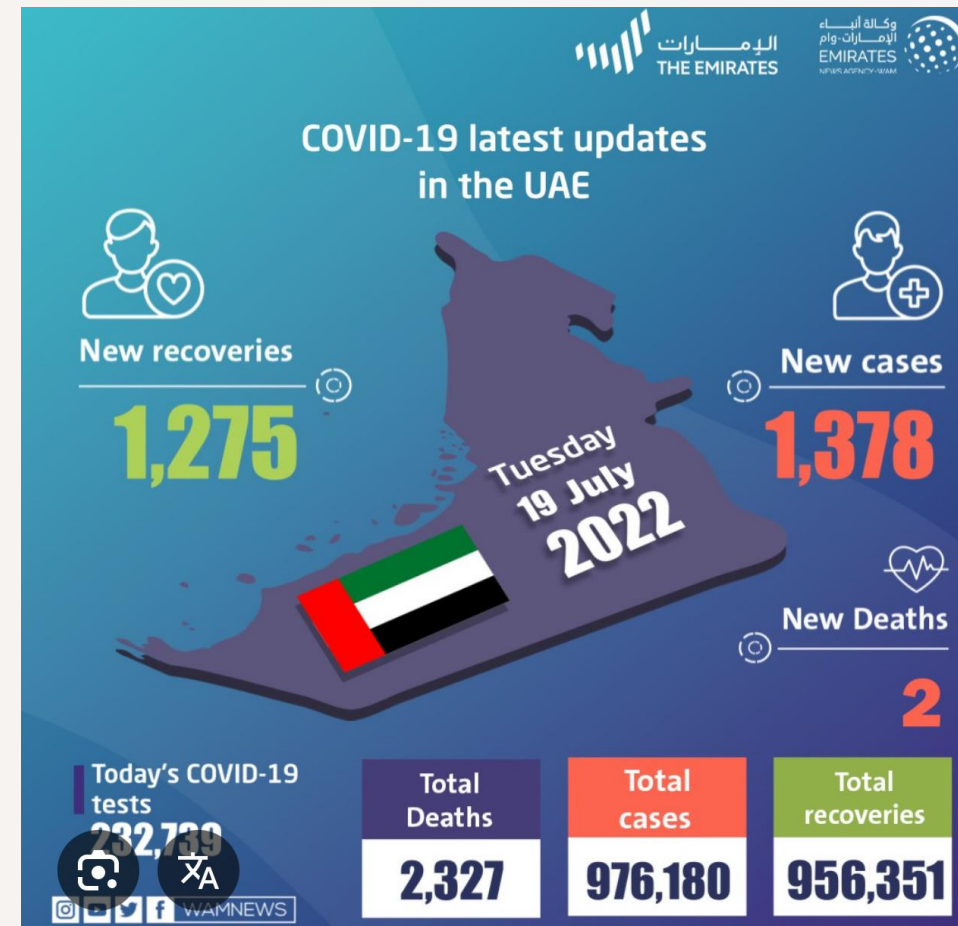
- ❑ **Rapid procurement + rollout:** The UAE secured multiple vaccine types early (Sinopharm, Pfizer-BioNTech, Moderna, AstraZeneca, Sputnik V) and conducted local phase-3 trials (e.g., Sinopharm trials in Abu Dhabi). The country ranked among the fastest worldwide in doses administered per capita during 2021. Centralized logistics, public-private partnerships (e.g., Hope Consortium) and cold-chain infrastructure enabled rapid, broad coverage. (Suliman et al., 2021).
- ❑ **Vaccine confidence & policy:** Authorities combined easy free access (many vaccination sites across emirates), high-level endorsement, clear eligibility rules and targeted communication to reduce hesitancy. At times the government used indirect incentives/requirements to encourage vaccination (e.g., restrictions for unvaccinated persons in some settings). (Suliman et al., 2021)



- Suliman, D. M., Nawaz, F. A., Mohanan, P., Modber, M. A. K. A., Musa, M. K., Musa, M. B., Moonesar, I. A. (2021). UAE efforts in promoting COVID-19 vaccination and building vaccine confidence. *Vaccine*, 39(43), 6341–6345. <https://doi.org/10.1016/j.vaccine.2021.09.015>

4. Vaccine effectiveness and outcomes

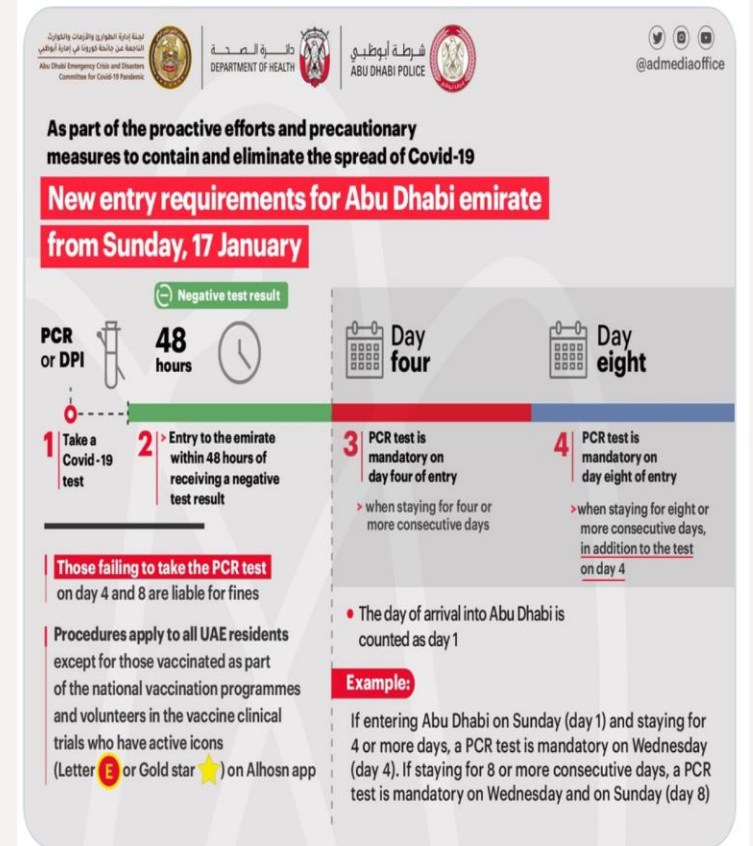
- Real-world effectiveness:** Peer-reviewed UAE data report high effectiveness of the vaccines used (BBIBP-CorV / Sinopharm and BNT162b2 / Pfizer) in reducing COVID-19 hospitalizations during Delta and Omicron waves (effectiveness estimates against hospitalization commonly high). These data support the conclusion that the vaccination program substantially reduced severe disease and hospital burden. (Albreiki et al., 2023).
- Mortality and case control:** In the period studied by peer-reviewed reviews, the UAE's combination of high testing, contact tracing, and vaccination correlated with relatively low deaths per million compared with many countries. (Al-Hosani et al., 2021).



5. Population knowledge, behaviours, and mental-health impacts

- Public knowledge and practices:** Cross-sectional surveys in the UAE showed generally high knowledge and good protective practices early in the pandemic (**masking, hygiene**), though variation existed by demographic groups; this supported adherence to non-pharmaceutical interventions. (Saeed et al., 2021).
- Social / mental-health effects:** Lockdowns and quarantine measures impacted mental wellbeing and health behaviours (reduced physical activity, increased sedentary time), an important consideration for support services during and after epidemics. (Thomas et al., 2021; surveys summarized in the literature).

- Saeed, B. Q., Elbarazi, I., Barakat, M., Adrees, A. O., & Fahady, K. S. (2021). *COVID-19 health awareness among the United Arab Emirates population*. *PLoS ONE*, 16(9), e0255408. <https://doi.org/10.1371/journal.pone.0255408>
- Thomas, J., & Terry, J. P. (2021). *Containing COVID-19 risk in the UAE: Mass quarantine, mental health, and implications for crisis management*. *Risk, Hazards & Crisis in Public Policy*. <https://doi.org/10.1002/rhc3.12237>



As part of the proactive efforts and precautionary measures to contain and eliminate the spread of Covid-19

New entry requirements for Abu Dhabi emirate from Sunday, 17 January

48 hours (Negative test result)

Day four (PCR test is mandatory on day four of entry)

Day eight (PCR test is mandatory on day eight of entry)

- Take a Covid-19 test
- Entry to the emirate within 48 hours of receiving a negative test result
- PCR test is mandatory on day four of entry
 - > when staying for four or more consecutive days
- PCR test is mandatory on day eight of entry
 - > when staying for eight or more consecutive days, in addition to the test on day 4

Those failing to take the PCR test on day 4 and 8 are liable for fines

Procedures apply to all UAE residents except for those vaccinated as part of the national vaccination programmes and volunteers in the vaccine clinical trials who have active icons (Letter E or Gold star) on Alhosn app

Example: If entering Abu Dhabi on Sunday (day 1) and staying for 4 or more days, a PCR test is mandatory on Wednesday (day 4). If staying for 8 or more consecutive days, a PCR test is mandatory on Wednesday and on Sunday (day 8)

6. Health-system capacity, surge management and clinical guidance

- ❑ **Bed capacity and surge:** The UAE expanded capacity via field hospitals and repurposed hotels for quarantine; largest providers (e.g., SEHA) rapidly scaled testing and treatment capacity. Clinical management guidelines were standardized across emirates. **These measures reduced system overload risk and enabled care for large case numbers.** (Al-Hosani et al., 2021).



7. Lessons learned & Global Implications for Future Epidemics



- ✓ **Rapid, coordinated response matters** – Alignment across health, economy, education, and governance accelerates mitigation (Zaher et al., 2021).
- ✓ **Mass testing and vaccination are critical** – Early and widespread coverage reduces hospitalizations for diverse populations (AlAwadhi et al., 2022).
- ✓ **Digital infrastructure multiplies resilience** – Tele-services and online platforms allow continuity of essential services.
- ✓ **Inclusive social protection is essential** – Shock-responsive systems must reach both citizens and vulnerable residents (Government of the United Arab Emirates, n.d.–a).
- ✓ **Psychosocial preparedness is key** – Lockdowns impact mental health and increase domestic-violence risks across populations (Al-Hosani et al., 2021; AlBlooshi et al., 2022).
- ✓ **Tailored interventions for diverse populations** – Equitable crisis response requires accounting for citizens and expatriates with different social, economic, and legal circumstances (Human Rights Watch, 2021).



For the Sake of the time, I will leave copies of my papers
on COVID 19 for your reference.

- ❑ My studies on COVID-19 analysis focused on the period between **September 2020 and March 2022**, during which both nations implemented comprehensive strategies encompassing prevention, containment, and recovery phases .
- ❑ The findings indicate that the UAE government's **evidence-based policies and adaptive interventions** yielded measurable improvements in pandemic control outcomes. Central to the UAE's success was the **integration of advanced technologies** within the healthcare system, including digital surveillance, contact-tracing applications, and data-driven decision-making platforms designed to optimize service delivery and ensure continuity of care.
- ❑ In conclusion, the two studies underscore that the **proactive, coordinated, and technology-enabled governance approaches** adopted by the UAE.
- ❑ The UAE's experience exemplifies how **policy agility, multisectoral collaboration, and innovation in healthcare management** can effectively mitigate the socio-economic and health impacts of global pandemics.

Ist Study

Reflections on a pandemic and surveillance: Disruption, distractions, and discoveries in the United Arab Emirates

Taghreed M Abu Sarhan

Social Wellbeing Department, College of Humanities and Social Sciences, United Arab Emirates University, Al Ain, UAE

Purpose and context

- I reflected on my personal and professional experiences during the COVID-19 pandemic in the United Arab Emirates (UAE), focusing particularly on the interplay between surveillance, technology, individual dignity, and collective responsibility.
- I wrote from both a social-work educator's perspective (in the UAE) and a former family-protection police officer from Jordan, thus bringing a cross-cultural lens to the discussion



Major themes of the first study

1. Rapid disruption and adaptation of social-work education

1. With the cessation of in-person learning in early March 2020, I and my colleagues had to pivot swiftly to online teaching. She highlights challenges such as sustaining student motivation, managing practical/practice-based curricula remotely, and adapting to new digital platforms.
2. I observed that the shift to digital learning also opened avenues for new forms of monitoring and measuring student engagement (e.g., logging into platforms, participation metrics) — an emerging form of surveillance in an educational context. [PMC](#)

2. Government-led surveillance and public health measures

1. I described how UAE authorities used technological and structural measures: for example, ankle-bracelets were issued to individuals who tested positive for COVID-19 to monitor quarantine compliance.
2. Movement between emirates was monitored by police at checkpoints; frequent government updates (via SMS) informed citizens about curfews, metro disinfection, and other public-health measures.
3. I framed these surveillance measures within the cultural context of the UAE: rather than interpreting them as inherently punitive or rights-violating, she argues that within a collectivist orientation — where community responsibility is emphasised — many people accepted them as part of the “greater good”.

3. Human dignity, rights and cultural framing

1. I used the concept of human dignity (drawing on Andorno, 2010; Pullman, 2002) to interrogate how surveillance and public-health control measures interact with fundamental human rights.
2. I noted that while in Western social-work traditions individual liberty is often central, in the UAE and broader Arab-Muslim context a different paradigm of freedom operates — one based on collective wellbeing, familial/community responsibility, and resilience rather than purely individual autonomy.

4. Reflections on lessons learned and discoveries

1. I acknowledges that the pandemic has exposed the potential for technology to be used for large-scale public-health surveillance — with both positive and cautionary implications. She ponders what this means for social work, education and human rights in the future.
2. I presented the UAE experience (with relatively low mortality and rapid governmental action) as a case that, while culturally specific, offers “discoveries” about how resilience, fast adaptation and strong governance can work in a crisis.

Key insights & implications

- ❑ **Surveillance** in crises can take multiple forms (educational-engagement metrics, digital tracking of infected individuals, policing movement) and needs to be examined not only for efficacy but also for implications on dignity and rights.
- ❑ **Cultural context matters:** what appears heavy-handed or over-surveillant in one cultural frame may be interpreted differently in another. Thus, policy- and practice-responses need to be contextually attuned.
- ❑ **For social work practitioners and educators,** the pandemic underscores **the urgency of incorporating reflections on technology, surveillance, privacy, collective vs. individual rights and resilience into curricula and practice.**
- ❑ While the **collective framing** (community wellbeing over individual freedom) can support rapid compliance and strong public-health outcomes, **there remains a need for critical reflection on safeguards, transparency, accountability and the long-term implications of increased surveillance capacities.**

Conclusion

- ❑ My reflection offers a thoughtful, culturally embedded vantage point on how the UAE responded to COVID-19 via **surveillance, technology and community-oriented governance**.
- ❑ I invite social-work educators and practitioners to **engage critically with the tension between public-health imperatives and human dignity**, and to recognise that the “**discoveries**” of crisis may **reshape both practice and policy** in lasting ways.

2nd study:

United Arab Emirates (UAE) leadership in controlling COVID-19: practical policy steps and outcomes

Taghreed M. Abu Sarhan, PhD · Shamma J. AlFalasi, PhD

2

- ❑ The second study on Covid-19 by myself and coauthored with Dr. Shamma J. AlFalasi, titled “*United Arab Emirates (UAE) Leadership in Controlling COVID-19: Practical Policy Steps and Outcomes*”.
- ❑ *The paper* examined the **UAE government's comprehensive strategies** to mitigate the impact of the COVID-19 pandemic.
- ❑ We employed a **comparative analysis approach**, contrasting the **UAE's policies with those of China**, to assess the effectiveness of the measures implemented between September 2020 and March 2022.
- ❑ The study reported outcomes or improvements as a result of UAE government-based policies or interventions. The **UAE government used recent technology in the healthcare sector** to attain maximum benefits during the pandemic.

Key Findings:

1. Technological Integration in Healthcare:

1. The UAE leveraged advanced technology to enhance healthcare delivery, including the use of digital platforms for telemedicine and electronic health records, facilitating efficient patient management and monitoring.

2. Mass Testing and Screening:

1. The government conducted widespread testing campaigns, ensuring early detection and isolation of cases. Regular screening at borders, workplaces, and educational institutions was implemented to control transmission.

3. Public Awareness and Communication:

1. A robust public awareness campaign was launched, providing daily updates and guidelines through various media channels to educate the public on preventive measures and the importance of compliance.

4. International Support and Cooperation:

1. The UAE extended assistance to over 128 countries by supplying medical supplies, including testing kits and personal protective equipment, demonstrating global solidarity during the crisis.

5. Comparative Analysis with China:

1. The study compares the **UAE's integrated management policies** with China's approach, highlighting similarities in **strict border controls** and **centralized decision-making**, which contributed to effective containment of the virus.

Conclusion

- ❑ The study concluded that the **UAE's proactive and integrated approach**, characterized by **technological innovation, mass testing, public education, and international cooperation**, serves as a commendable model for other nations in managing public health crises.
- ❑ The comparative analysis underscores the importance of **tailored strategies that consider national contexts and capacities**.
- ❑ This study provides valuable insights into the **practical steps taken by the UAE to control the COVID-19** pandemic and **offers lessons** for global health policy development.





S. No	Services/ Policies/ Interventions	Initiative	Observed Outcome
1	Introduction of Telemedicine	UAE government, Dubai Health Authority (December 2019) (The United Arab Emirates' Government portal, 2022)	Doctor for Every Citizen service was launched to provide free consultation 24/7 available to all UAE citizens. A significant positive correlation was reported between the willingness of the UAE population to use telemedicine and agreement of necessity.
2	The emergency response system	UAE government, National Crises and Emergency Management Authority (NCEMA)	A collaborative effort of the UAE government and NCEMA represented high-level coordination between local administration and government and facilitated the UAE population since March 2020 through sustained communication and persistent engagement.
3	Use of healthcare sustainability models	SEAHIR (Susceptible, Exposed, Asymptomatic, Hospitalized, Isolated, Removed) model	An epidemiological model used by healthcare authorities and decision-makers in the UAE helped the government to design policies with accurate statistics related to COVID-19 prevalence in the UAE and to project plan requirements.
4	Surveillance and tracing of contact	Abu Dhabi - Department of Health, Ministry of Health	Stay Home application with a self-questionnaire was launched, " Trace COVID " is another application for COVID-related data sharing. A smart helmet app was launched for monitoring patients with COVID. AIHOSN mobile application.
5	Psychological and mental well-being	UAE government, Ministry of Health, Federal Authority	Hayat program , an employee assistance program for governmental employees. UAE National Programme for Happiness and Wellbeing , Introduction of " Taaluf ".
6	Policies and procedures related to COVID-19	Ministry of Health, UAE	Rest assured initiative by the Ministry of Health, The Kheta platform , National home testing facilities
7	Contact testing and vaccination services	Ministry of Health and Prevention, UAE,	Mass COVID-19 testing ,
8	Democratic support and relationship	Government of UAE	Logistic, Financial, Technology, and medical support

Reference

- Abu Sarhan, T. M. (2021). *Reflections on a pandemic and surveillance: Disruption, distractions, and discoveries in the United Arab Emirates. Qualitative Social Work, 20*(1–2), 331–335. <https://doi.org/10.1177/1473325020984157>
- Abu Sarhan, T. M., & AlFalasi, S. J. (2023). *United Arab Emirates (UAE) leadership in controlling COVID-19: Practical policy steps and outcomes. Journal of Global Health Economics and Policy, 13*(1), 117–126. <https://doi.org/10.52872/001C.117618>
- Albreiki, M., Alhosani, F. I., Amlal, A., Alkaabi, N., & Alkhaja, A. (2023). *Risk of hospitalization and vaccine effectiveness among COVID-19 patients in the United Arab Emirates during the Delta and Omicron outbreaks. Frontiers in Immunology, 14*, 1049393. <https://doi.org/10.3389/fimmu.2023.1049393>
- Al-Hosani, F., Al-Mazrouei, S., Al-Memari, S., Al-Yafei, Z., Paulo, M. S., & Koornneef, E. (2021). *A review of COVID-19 mass testing in the United Arab Emirates. Frontiers in Public Health.* <https://www.ncbi.nlm.nih.gov/pmc/articles/PMCxxxxxxx/>
- Nabeel, A., Al-Sabah, S. K., & Ashrafian, H. (2022). *Digital contact tracing applications against COVID-19: A systematic review. Medical Principles and Practice, 31*(5), 424–432. <https://doi.org/10.1159/000526672>
- Saeed, B. Q., Elbarazi, I., Barakat, M., Adrees, A. O., & Fahady, K. S. (2021). *COVID-19 health awareness among the United Arab Emirates population. PLOS ONE, 16*(9), e0255408. <https://doi.org/10.1371/journal.pone.0255408>
- Suliman, D. M., Nawaz, F. A., Mohanan, P., Modber, M. A. K. A., Musa, M. K., Musa, M. B., ... Moonesar, I. A. (2021). *UAE efforts in promoting COVID-19 vaccination and building vaccine confidence. Vaccine, 39*(43), 6341–6345. <https://doi.org/10.1016/j.vaccine.2021.09.015>
- Thomas, J., & Terry, J. P. (2021). *Containing COVID-19 risk in the UAE: Mass quarantine, mental health, and implications for crisis management. Risk, Hazards & Crisis in Public Policy.* <https://doi.org/10.1002/rhc3.12237>



شكراً

هيئة الرعاية الأسرية
FAMILY CARE AUTHORITY

فننن.

@fca_abudhabi

info@adfca.gov.ae

+971 2 403 5555