



## GENERAL INFORMATION

Guam has an approximate area of 0.54 thousand square kilometers (UNO, 2008). The population is 179,893 and the sex ratio (men per hundred women) is 103 (UNO, 2009). The life expectancy at birth is 73 years for males and 78 years for females (UNO, 2005-2010). The healthy life expectancy at birth is years for males and 78 years for females (UNPD, 2010). It is in the High income group (based on 2010 World Bank criteria). The total expenditure on health as a percentage of gross domestic product is not known and the per capita government expenditure on health (PPP int. \$) is not known. Suicide rate information is also not available.

## GOVERNANCE

An officially approved mental health policy exists and was approved or most recently revised in 1983. Mental health is specifically mentioned in the general health policy.

A mental health plan exists and the components include:

- Timelines for the implementation of the mental health plan.
- Funding allocation for the implementation of half or more of the items in the mental health plan.

Dedicated mental health legislation exists. In addition, legal provisions concerning mental health are also covered in other laws (e.g., welfare, disability, general health legislation etc.).

## FINANCING

Mental health expenditures and mental hospital expenditures by the government health department/ministry are not available.

## MENTAL HEALTH CARE DELIVERY

### Primary Care

Prescription regulations authorize primary health care doctors to prescribe and/or to continue prescription of psychotherapeutic medicines. In contrast, the department of health does not authorize primary health care nurses to prescribe and/or to continue prescription of psychotherapeutic medicines. Likewise, official policy does not permit primary health care nurses to independently diagnose and treat mental disorders within the primary care system.

The majority of primary health care doctors and nurses have not received official in-service training on mental health within the last five years. Officially approved manuals on the management and treatment of mental disorders are not available in the majority of primary health care clinics. Official referral procedures for referring persons from primary care to secondary/tertiary care exist, as do referral procedures from tertiary/secondary care to primary care.

## Mental Health Services

### Availability of mental health facilities

	Total number of facilities/beds	Rate per 100,000 population	Number of facilities/beds reserved for children and adolescents only	Rate per 100,000 population
Mental health outpatient facilities	1	0.56	0	0.0
Day treatment facilities	2	1.11	1	0.56
Psychiatric beds in general hospitals	0	0.0	NA	NA
Community residential facilities	9	5.0	2	1.11
Beds/places in community residential facilities	69	38.36	16	8.89
Mental hospitals	0	0.0	NA	NA
Beds in mental hospitals	0	0.0	NA	NA

### Access to care

	Rates per 100,000 population)	Females (%)	Under age 18 (%)
Persons treated in mental health outpatient facilities	898.87	UN	UN
Persons treated in mental health day treatment facilities	32.8	37%	42%
Admissions to psychiatric beds in general hospitals	NA	NA	NA
Persons staying in community residential facilities at the end of the year	33.91	48%	16%
Admissions to mental hospitals	NA	NA	NA

### Long term care in mental hospitals (% of persons staying):

Less than 1 year	UN
More than 1 and less than 5 years	UN
More than 5 years	UN

## HUMAN RESOURCES

### Workforce and training

	Health professionals working in the mental health sector Rate per 100,000	Training of health professions in educational institutions Rate per 100,000
Psychiatrists	5.56	UN
Medical doctors, not specialized in psychiatry	UN	UN
Nurses	UN	18.34
Psychologists	11.12	UN
Social workers	UN	UN
Occupational therapists	5.0	UN
Other health workers	UN	NA

### Informal human resources (Family and User Associations)

	User	Family
Present in the country/region?	Yes	UN
Number of members	UN	UN
Participation in the formulation/implementation of policy/plan/legislation?	UN	UN

## MEDICINES

### Expenditures for medicines for mental and behavioral disorders

Type of Medicines	Expenditures per year and per 100,000 population (in USD)
All the psychotherapeutic medicines <sup>1</sup>	UN
Medicines used for bipolar disorders <sup>2</sup>	UN
Medicines for psychotic disorders <sup>3</sup>	UN
Medicines used for general anxiety <sup>4</sup>	UN
Medicines used for mood disorders <sup>5</sup>	UN

<sup>1</sup> N03AG01, N05A, N05B, N05C, N06A

<sup>2</sup> N03AG01, N05A, N05B, N05C, N06A

<sup>3</sup> N05A (excluding N05AN)

<sup>4</sup> N05B & N05C

<sup>5</sup> N06A

Data collected in 2011

UN = information unavailable, NA = item not applicable

**INFORMATION SYSTEMS**

	<b>Data on number of people/ activities are collected and reported</b>	<b>Data on age and gender are collected and reported</b>	<b>Data on patient's diagnosis are collected and reported</b>
Persons with mental disorders treated in primary health care	No	No	No
Interventions (psychopharmacological and psychosocial) delivered in primary health care for people with mental disorders	No	No	No
Persons treated in mental health outpatient facilities	No	No	No
Contacts in mental health outpatient facilities	No	No	No
Persons treated in mental health day treatment facilities	No	No	No
Admissions in general hospitals with psychiatric beds	NA	NA	NA
Admissions in mental hospitals	NA	NA	NA
Days spent in mental hospitals	NA	NA	NA
Admissions in community residential facilities	No	No	No

Note: no mental health data have been compiled in a report for policy, planning or management purposes in the last three years

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