



Trinidad and Tobago

GENERAL INFORMATION

Trinidad and Tobago is a country with an approximate area of 1 thousand square kilometers (UNO, 2008). The population is 1,343,725 and the sex ratio (men per hundred women) is 94 (UNO, 2009). The proportion of the population under the age of 18 years is 25% and the proportion above age 60 is 7% (UNO, 2009). The literacy rate is 100% for men and 100% for women (UN Statistics, 2008). The life expectancy at birth is 66 years for males and 73 years for females (UNO, 2005-2010). The healthy life expectancy at birth is 59 years for males and 73 years for females (UNPD, 2010). The country 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 5.65% and the per capita government expenditure on health (PPP int. \$) is \$ (WHO, 2006). The suicide rate for males is 20.4 per 100, 000 population and for females is 4. per 100, 000 population. In Trinidad and Tobago, neuropsychiatric disorders are estimated to contribute to 17.1% of the global burden of disease (WHO, 2008).

GOVERNANCE

An officially approved mental health policy exists and was approved or most recently revised in 2000. Mental health is also specifically mentioned in the general health policy.

A mental health plan exists and was approved or most recently revised in 2000. The mental health plan components include:

- Funding allocation for the implementation of half or more of the items in the mental health plan.
- Shift of services and resources from mental hospitals to community mental health facilities.
- Integration of mental health services into primary care.

Dedicated mental health legislation exists and it was initiated or most recently revised in 1981. Legal provisions concerning mental health are not covered in other laws (e.g., welfare, disability, general health legislation etc.).

Note: The Mental Health Plan is currently being revised to reflect international human rights and standards of primary mental health care and community care programmes.

The Mental Health Bill was redrafted in 2010 and was submitted to the Legal Review Committee but has returned to the Ministry of Health for further amendments. The review of the Bill is currently ongoing. Infrastructural support is being considered as a foundation for the success of the Mental Health Bill.

FINANCING

Mental health 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

Data collected in 2011

UN = information unavailable, NA = item not applicable

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	31	2.31	1	0.07
Day treatment facilities	3	0.22	UN	UN
Psychiatric beds in general hospitals	35	2.6	UN	UN
Community residential facilities	8	0.6	UN	UN
Beds/places in community residential facilities	195	14.51	UN	UN
Mental hospitals	1	0.07	0	0.0
Beds in mental hospitals	1000	74.42	UN	UN

Access to care

	Rates per 100,000 population)	Females (%)	Under age 18 (%)
Persons treated in mental health outpatient facilities	2697.28	60%	1%
Persons treated in mental health day treatment facilities	1.71	UN	UN
Admissions to psychiatric beds in general hospitals	57.01	UN	UN
Persons staying in community residential facilities at the end of the year	11.91	UN	UN
Admissions to mental hospitals	159.11	UN	UN

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

Data collected in 2011

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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	0.67	0.97
Medical doctors, not specialized in psychiatry	1.86	10.42
Nurses	33.34	41.82
Psychologists	0.67	4.61
Social workers	2.23	UN
Occupational therapists	0.0	0.0
Other health workers	24.56	NA

Informal human resources (Family and User Associations)

	User	Family
Present in the country?	No	No
Number of members	NA	NA
Participation in the formulation/implementation of policy/plan/legislation?	NA	NA

MEDICINES

Expenditures for medicines for mental and behavioral disorders at country level

Type of Medicines	Expenditures at country level per year and per 100,000 population (in USD)
All the psychotherapeutic medicines ¹	UN
Medicines used for bipolar disorders ²	169,373
Medicines for psychotic disorders ³	545,286
Medicines used for general anxiety ⁴	UN
Medicines used for mood disorders ⁵	155,503

¹ N03AG01, N05A, N05B, N05C, N06A

² N03AG01, N05A, N05B, N05C, N06A

³ N05A (excluding N05AN)

⁴ N05B & N05C

⁵ N06A

Data collected in 2011

UN = information unavailable, NA = item not applicable

INFORMATION SYSTEMS

	Data on number of people/ activities are collected and reported	Data on age and gender are collected and reported	Data on patient's diagnosis are collected and reported
Persons with mental disorders treated in primary health care	Yes	Yes	Yes
Interventions (psychopharmacological and psychosocial) delivered in primary health care for people with mental disorders	Yes	NA	NA
Persons treated in mental health outpatient facilities	Yes	Yes	Yes
Contacts in mental health outpatient facilities	Yes	Yes	Yes
Persons treated in mental health day treatment facilities	Yes	Yes	Yes
Admissions in general hospitals with psychiatric beds	Yes	Yes	Yes
Admissions in mental hospitals	Yes	Yes	Yes
Days spent in mental hospitals	Yes	Yes	Yes
Admissions in community residential facilities	Yes	Yes	Yes

Note: mental health data (either on the public system, private system or both) have been compiled for general health statistics in the last three years, but not in a specific mental health report.