



Government of the Republic of Trinidad and Tobago

Ministry of Health

OFFICE OF THE MINISTER OF HEALTH

#63 Park Street, Port of Spain 100607

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January 19, 2023

The Honourable Bridgid Mary Annisette-George, MP
Speaker of the House
Speaker's Chambers
Office of the Parliament
Parliamentary Complex
The Red House
St. Vincent Street
Port of Spain

Dear Madam Speaker

Third Report of the Joint Select Committee on Human Rights, Equality & Diversity on an Inquiry into the Discrimination Faced by Persons with Mental Illness and the Ability to Access Quality Mental Health Care

Your letter referenced Parl.: 14/3/55 Vol. VI dated December 13, 2022 on the captioned subject is relevant.

Please find enclosed this Ministry's written response to the findings and recommendations of the Third Report of the Joint Select Committee on Human Rights, Equality & Diversity on an Inquiry into the Discrimination Faced by Persons with Mental Illness and the ability to access Quality Mental Health Care.

Sincerely

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Minister



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The recommendations outlined in the 3rd Report of the Joint Select Committee on Human Rights, Equality and Diversity on

“The discrimination faced by persons with mental illness and the ability to access quality mental health care”

5.1 The Quality Department of the RHAs are responsible for internal audits; however, no external audits have been conducted.

Recommendation:

a. The MoH should engage in an external audit of the mental health care quality of the services, procedures and policies at the RHAs.

Response:

During the period 2018-2019, two (2) major projects were implemented to assess the current mental health system and to devise suitable policy and service planning. These included the conduct of the WHO’s AIMS study and the drafting and finalization of the National Mental Health Policy and Plan in 2019, to effect the decentralization of mental health services. In both instances, extensive consultations with government and non-government sectors, inclusive of NGOs were conducted and several gaps were noted which include:

- i. The need to address the stigmatization surrounding mental health;
- ii. The need to develop and upgrade the health infrastructure to support the decentralization of mental health services;
- iii. The need to conduct training of mental health professionals; and
- iv. The provision of a mental health information system for the collection and analysis of information for policy development and programme implementation.

In light of the foregoing, an implementation plan has been developed and executed with all the key areas for which further details are provided below in 5.2.

Further, the Ministry of Health will contact its external partners which include the Pan American Health Organization (PAHO) or the Inter-American Development Bank (IADB) for a preferred Consultant to conduct an external audit of mental health care, quality of services, procedures and policies at the RHAs.

5.2 There is the need for additional mental health specialists for mental health services and increased interaction between; mental health services and departments/agencies responsible for HIV/AIDS, reproductive health, substance abuse, military and criminal justice, and traditional, religious and complementary healers that function as mental health providers.

Recommendation:

a. The MoH should:

- i. Conduct additional mental health public awareness programmes to promote good mental health and well-being practices and discourage negative stigma;**
- ii. Recruit additional mental health specialists for mental health services namely psychologists, occupational therapists, art and music therapists;**
- iii. Implement a multi-pronged and holistic approach to treating mental health and well-being of citizens by creating linkages between mental health services and departments/agencies responsible for HIV/AIDS, reproductive health, substance abuse, military and criminal justice and traditional, religious and complementary healers that function as mental health providers; and**
- iv. Create an official, publicly accessible national reporting system for mental health services and persons with mental health illnesses.**

Response:

The Ministry of Health has developed an implementation plan for the National Mental Health Policy 2019-2029. As a result, all of the issues above will be addressed through the implementation of the following:

- i. A National Communication Strategy and Plan for Community-based Mental Health was completed in December 2021. Potential funding opportunities for this strategy have been explored and year one (1) activities for this strategy will begin in January 2023. These activities include the completion of a Knowledge, Attitudes, Perceptions, Behaviour (KAPB) study; the contracting of a Behaviour Change Consultant; and media branding and advertising for community-based mental health, by the MoH;**
- ii. A Suicide Prevention Campaign is currently ongoing which includes the roll-out of a radio advertisement, a television advertisement, posters and social media content, promoting help seeking and access to services listed in the FindcareTT.com directory. This campaign is designed to specifically target males from areas where there is a high incidence of suicides;**
- iii. Human Resource strengthening is included in the Implementation Plan under the heading "Service Delivery";**
- iv. The Ministry of Health collaborates with a number of Non-Governmental Organizations (NGOs) through a Mental Health and Psychosocial Support (MHPSS) Technical Working Group (TWG). Some of these NGOs include the Trinidad and Tobago Red Cross; Mindwise; Lifeline; ChildLine; GROOTS TT; the Franciscan Institute Trauma Team; the Inter-Religious Organization of Trinidad and Tobago; the Trinidad and Tobago Association of Psychologists; Trinidad and Tobago Association of Psychiatrists of Trinidad and Tobago; and The Art**

therapy Association of Trinidad and Tobago. The RHAs also conduct outreach to these and other sectors;

- v. The Director, Mental Health Unit, MOH is currently a member of the National Sexual, Reproductive, Maternal, Newborn, Child and Adolescent Health (SRMNCAH) Committee, contributes to the work of this committee and ensures that the Mental Health Unit is adequately represented whenever she is unable to attend meetings of this committee;
- vi. Training in Mental Health and Law Enforcement with the Municipal Police is ongoing; and
- vii. The Mental Health Information System is currently being developed to be integrated into the overall MOH Health Information System.

5.3 There are several infrastructural, equipment and human resource upgrades awaiting realization across the mental health facilities in Trinidad and Tobago in order to facilitate the implementation of the community-based mental health service delivery as provided in the National Mental Health Policy.

- a. **The MoH should review the infrastructure and resources required at the mental health facilities in Trinidad and Tobago to develop a three-year plan inclusive of long-term and short-term goals to commence reconciling the resources and infrastructures necessary at each mental health facility by January 2023.**

Response:

One of the key priority areas for improvement and strengthening in the National Mental Health Policy implementation plan is infrastructure to ensure the provision of a modern, responsive and client friendly mental health system.

In this regard, several infrastructure projects are currently at various stages of development which include:

1. The provision of additional beds for psychiatry in general hospitals, through the inclusion of psychiatric wards in the Arima, Point Fortin and Sangre Grande Hospitals, as well as the new Central Block of the Port of Spain General Hospital. Construction of the psychiatric wards at the new Arima and Point Fortin Hospitals is complete and their operationalization will significantly decrease the number of persons requiring acute care and treatment at the St. Ann's Psychiatric Hospital;
2. The Couva Extended Care Center has been renovated and repurposed to provide long term in-patient care and treatment for children with severe mental health disorders; and
3. The "Wellness Center" model for community based out-patient mental health services which was piloted by the North West Regional Health Authority in Pembroke Street, Port of Spain and Barataria, was expanded through the conversion of the Diego Martin Health Center to a Wellness Center in October 2020. The establishment of additional Wellness Centers in other Regional Health Authorities, with the establishment of Day Hospital

services, will further decrease the demand for in-patient services. The infrastructure requirements for these services are being examined.

5.4 The MoH provides several programmes and services to persons with mental health illnesses however, according to the WHOAIMS study there are more NGOs associations in mental health focused on providing consumer-based mental health care services.

- a. The MoH should engage in a review of the current mental health care services and implement the necessary changes in the system to adopt a more consumer-based approach to providing mental health care services.**

Clients are included whenever consultations on mental health services are conducted. This ensures that their voices are heard and their priorities are included in all service planning exercises. Collaboration with persons with lived experience is ongoing. Patient and staff satisfaction surveys have been drafted and a concept note and terms of references are expected to be completed in the first quarter of 2023 to contract a lead researcher and patient survey administrators to administer the surveys to fellow patients.

5.5 There were reported cases of discrimination against members of the LGBTQ+ community seeking mental health care services including:

- i. Denial of service;**
- ii. The persistence of mental health care providers to treat the sexual or gender orientation of the person rather than the presented mental health issue/s; and**
- iii. Provision of empirically unsupported and potentially harmful interventions and treatments, including conversion therapy.**

Recommendation:

- a. The MoH should provide for additional sensitivity training exercises to be administered for all medical professionals as well as educators to mitigate the discrimination faced by persons within the LGBTQ+ community in need of mental health care services and to ensure that patients are treated with dignity.**

Response:

The Ministry is not aware of any such complaints of discrimination. However, if such complaints are reported to the Ministry, appropriate steps will be taken to address them. Medical staff and support staff employed within health facilities are expected to treat all patients with dignity, regardless of gender, ethnicity or sexual orientation.

Sensitization exercises, if conducted, should be directed towards all healthcare workers, instead of focusing exclusively on providers of mental health care. Focusing such efforts on mental health workers is likely to add to the stigma that is already associated with mental health patients and staff.

5.6 The absence of State regulation of mental health services provided through NGOs and private practitioners also creates risks based on gender including the failure to address the mental health considerations of men and boys and women and girls.

Recommendations:

- a. **The MoH should implement greater regulation of mental health services provided through NGOs and private practitioners.**
- b. **The MOH should conduct a formal scientific study on the provision of quality mental health care to and discrimination faced by persons with mental illnesses in Trinidad and Tobago, as they may have significant implications for the real availability of mental health care for citizens, and for public costs beyond the formal realm of mental health.**

Response:

The Medical Board of Trinidad and Tobago is responsible for regulating all medical practitioners, including psychiatrists. The Association of Psychologists is currently in the process of developing a framework for the regulation of that profession. Other Associations such as associations of Social Workers, Occupational Therapists and other allied health workers who provide services to persons with mental health disorders are encouraged to do the same.

5.7 There are barriers for persons with mental health illnesses to access to treatment for mental illnesses in Trinidad and Tobago in several areas including:

- i. **The stigma and sociocultural and religious influences associated with persons with mental health illnesses;**
- ii. **The financial strain and lack of economic Resources to access treatment;**
- iii. **Inadequate professionals and inconsistent medication supply;**
- iv. **Poor Infrastructure;**
- v. **Outdated and inadequate legislation;**
- vi. **Discrimination of patients due to their sexual orientation;**
- vii. **The absence of Gender-based treatment plans; and**
- viii. **The Assumptions and Framework of the Mental Health Care System.**

Recommendation:

- a. **The MoH should review and address the barriers for persons with mental health illnesses to access treatment in Trinidad and Tobago, to facilitate an effective roll-out of the model.**

Response:

- i. **The Pan American Health Organization, in collaboration with the MoH and Mindwise, launched a local version of the regional Anti-Stigma Campaign called “Do Your Share” in November 2022. This campaign included the use of wellness benches in strategic locations where persons are encouraged to sit and share openly. Additionally, an anti-stigma poster campaign is being rolled out in public health and other facilities where persons gather;**
- ii. **Collaboration with the Ministry of Education is planned to continue to increase awareness of mental health in the school population. Specifically, the rollout of a School Mental Health Literacy Programme is being explored;**

- iii. The ongoing integration of mental health into primary care seeks to ensure that mental health care is available at the first point of entry into the healthcare system. Some basic psychiatric drugs are available on CDAP. Steps are currently being taken to ensure that recommended psychiatric drugs are available at pharmacies within health centers and a review of this list of medications is planned to be completed by Year 3 of the aforementioned implementation plan;
- iv. A Human Resource Manpower Plan is expected to be 100% completed by 2025 (Year 3 of the plan);
- v. Some steps have already been taken to address the infrastructure requirements of the decentralization of mental health services and work is ongoing as previously outlined (5.3). The implementation plan proposes inpatient psychiatric beds in all general hospitals by year 3, and at least one (1) Behavioural Health and Wellness Centre in each RHA by year 3. Additionally, a model for long-term care of patients is expected to be completed by Year 2;
- vi. Legislation: The Ministry of Health will collaborate with the Office of the Attorney General and Ministry of Legal Affairs;
- vii. Alleged discrimination of patients due to their sexual orientation may need to be addressed with all healthcare workers for all forms of discrimination. Currently diagnosis and treatment of mental health disorders, as well as other psychosocial services are provided, as needed, regardless of the gender orientation of service recipients; and
- viii. The National Mental Health Policy 2019 to 2022 is the framework for current and future mental health services. An all of Government, all of society approach is being utilized to ensure that all identifiable barriers to receiving mental health care are addressed.

5.8 The Mental Health Act, 2000 was inadequate to reflect the current needs and realities of the society and that the amendment of the Act is necessary to provide a more holistic, patient - rights based mental health system.

Recommendation:

- a. **The MoH should collaborate with the AGLA to amend the Mental Health Act, 2000 to include the amendments proposed by the stakeholders.**

Response:

The Ministry of Health will collaborate with the Office of the Attorney General and Ministry of Legal Affairs, with a view to having the Act reviewed and/or updated, in accordance with the 2019 Policy, and subsequently placed on the legislative agenda.