



Government of the Republic of Trinidad and Tobago

## Ministry of Health

OFFICE OF THE PERMANENT SECRETARY

#63 Park Street, Port of Spain 100607

He: 3/16/177 Vol. I

March 31, 2023

Ms. Jacqui Sampson-Meiguel  
Clerk of the House  
Joint Select Committee on Land and Physical Infrastructure  
Parliament of the Republic of Trinidad & Tobago  
Parliament Complex  
Cabildo Building  
St. Vincent Street  
Port-of-Spain

Dear Ms. Sampson-Meiguel

**Fourth Report of the Joint Select Committee on Social Services and Public Administration on an Inquiry into the Mental Health and Psychosocial Services Available to the Population During the COVID-19 Pandemic (with a Specific Focus on Measures to Curb Substance Abuse and Suicide)**

Your letter referenced Parl.: 14/3/69 Vol. VI dated February 17, 2023 on the captioned subject is relevant.

Please find enclosed the written response from the Ministry of Health to the recommendations of the Fourth Report of the Joint Select Committee on Social Services and Public Administration on an inquiry into the mental health and psychosocial services available to the population during the COVID-19 pandemic (with a specific focus on measures to curb substance abuse and suicide).

Sincerely

  
Asif Ali  
Permanent Secretary  
PERMANENT SECRETARY  
MINISTRY OF HEALTH



1(868) 627-0012  
Ext. 1619, 1620



1(868) 623-9528



[www.health.gov.tt](http://www.health.gov.tt)



[psmoh@health.gov.tt](mailto:psmoh@health.gov.tt)



**An Inquiry into the Mental Health and Psychosocial Services Available to the  
Population during the COVID-19 Pandemic  
(with a specific focus on measures to curb substance abuse and suicide)**

---

**Request for Written Responses by the Ministry of Health**

**OBJECTIVE 1: To undertake a preliminary examination of the trends in mental health and mental illnesses during the COVID-19 pandemic**

- A. As part of its Ministerial Response, the Ministry of Health should provide a strategy detailing how it intends to improve its data collection and data sharing systems as well as provide an update on the development/implementation of the National Mental Health Information System.**

One of the key areas of action under the Mental Health Policy 2019 to 2029 is the development and implementation of a National Mental Health Information System (NMHIS).

The NMHIS will allow authorized personnel digital access to patients' medical records from any facility at which in-patient or out-patient psychiatric care and treatment are being provided. A key component is the development of the surveillance system supported by dashboards to indicate the progress of service utilisation and resources used in the delivery of mental health services and the tracking of targets and indicators.

Ultimately, this information will also facilitate monitoring and evaluation activities, providing for the evidenced-based policy direction that is essential for making critical decisions. The key strategic areas of focus to effect the NMHIS include:

- i. standardization of the data collection and reporting tools inclusive of the development of the surveillance system and dashboards to track service delivery with supporting targets and health indicators;
- ii. strengthening, training and hiring of key personnel for the development and execution of the NMHIS, inclusive of Monitoring and Evaluation and Health Information Officers; and
- iii. development of an implementation plan for the NMHIS component with supporting costing and resources required.

As of March 17, 2023, the indicators for the NMHIS have been developed and data collection is being piloted in the Regional Health Authorities (RHAs).



- B. Within six (6) months of the presentation of this Report, the Ministry of Health should conduct an audit of the mental health support services existing in Trinidad and Tobago and identify the key gaps in care. Thereafter, an appropriate plan of action should be formulated for treating with the gaps identified.**

During the period 2015 to 2021, several assessments and consultations were conducted on Mental Health services in Trinidad and Tobago to identify possible gaps and thereafter, inform the development of the National Mental Health Policy with a supporting implementation plan. The details on the assessments are as follows:

- i. in 2015, a stakeholder consultation was conducted on “Models of Care” and several gaps in mental health care were identified including the need for the decentralization for Mental Health Services, the training of Mental Health Professionals and the need for a NMHS;
- ii. in 2017, the Ministry of Health collaborated with the Pan American Health Organization (PAHO) for a technical mission team to assess and determine the way forward in developing a Suicide Surveillance System;
- iii. in 2019, the Ministry of Health facilitated a meeting with key stakeholders in mental health on management and delivery of mental health services with the remit being to plan the way forward for a National Policy document highlighting the success, gaps and challenges with recommendations and providing the vision for Mental Health Services for Trinidad and Tobago. These stakeholders included:
  - a. the Regional Health Authorities (RHAs);
  - b. the Office of the Prime Minister;
  - c. the Student Support Services Division, Ministry of Education;
  - d. the Children’s Authority of Trinidad and Tobago; and
  - e. the Trinidad and Tobago Association of Psychologists & the Trinidad and Tobago Association of Psychiatrists.
- iv. in 2019, the Ministry of Health, in collaboration with PAHO, completed a study on mental health using version 2.2 of the World Health Organization Assessment Instrument for Mental Health Systems (WHO AIMS) tool.

From the above assessments of mental health services, the National Mental Health Policy 2019-2029 was developed and approved by the Cabinet for the provision of the overarching policy framework for mental health care in Trinidad and Tobago.

The scope of the policy is based on the goals of Vision 2030 (Theme I, Goals 4 and 5) which aligns to the United Nations (UN) Sustainable Development Goals (SDGs) which speak to promoting overall well-being and improving the healthcare system of this country, of which mental health is an integral component.



The key areas of focus include:

- i. promotion of mental health and well-being of all Trinidadians and Tobagonians;
- ii. recognition of the social determinants of health/mental health with a strong emphasis on the prevention of mental disorders;
- iii. a needs assessment to determine critical demands for mental health services with the supply network of health institutions and provision of the service with the required skilled set of staff, equipment and other supporting services across public and private health institutions;
- iv. review of legislation and policy framework to ensure adequacy and relevance of mental health services;
- v. decentralisation of mental health services across public health institutions to remove the stigma and allow for the provision of seamless care within communities using an appropriate governance and leadership framework;
- vi. the use of a patient-centred approach to the delivery of mental health care services;
- vii. the use of the appropriate best practice guidelines, protocols and standards with the mental health environment;
- viii. provision of adequate training opportunities for healthcare workers to ensure that the above agreed standards can be maintained and met in a professional and equitable manner;
- ix. design and implement the appropriate management information systems to allow for the integration and reporting of mental health services and to allow for sufficiently in-depth analysis of the mental health and wellbeing of the population;
- x. ensure that the required monitoring and evaluation tools are developed to ensure accountability, transparency and value for money in the provision of mental health services by healthcare workers and institutions; and
- xi. dissemination of information on healthy lifestyle choices related to Non-Communicable Diseases (NCDs), of which mental well-being is an integral part.

The above policy provides the strategic framework for achieving these goals as they relate specifically to increasing the mental wellbeing of the general population and improving mental health outcomes for people who are at risk of developing mental disorders.

Emphasis will be placed on human rights protection, promotion, prevention and mental health service delivery through a combination of inpatient, primary care and community-



based services focusing on rehabilitation and recovery for persons with mental health and substance use conditions.

The above scope focuses on strengthening mental health systems with the aim of decreasing the treatment gap, the burden of disease and resultant disabilities caused by mental disorders as part of the wider plan for NCDs.

The goal of the NMHP is to improve the mental health and well-being of the people of Trinidad and Tobago. The objectives of the policy are:

- i. to strengthen governance and leadership for mental health at all levels;
- ii. to provide comprehensive, integrated and responsive mental health care with special emphasis on rehabilitation and recovery in community-based settings rather than institutionalization;
- iii. to implement strategies for mental health promotion, prevention of mental disorders and decrease the stigma and discrimination associated with mental disorders;
- iv. to strengthen human resources in mental health; and
- v. to develop a mental health information system and strengthen evidence and research for mental health.

Further, in light of the COVID-19 pandemic, the Ministry of Health provided additional mental health support services which continue to be available free of charge to the public, through the establishment of the Mental Health and Psychosocial Support (MHPSS) Technical Working Group (TWG). The MHPSS TWG has since created a digital directory of these services in the form of the [findcarett.com](http://findcarett.com) website which is updated whenever new resources are identified.

It is envisaged that once the implementation plan for the Mental Health Policy is finalized, approved and implemented, an audit of its services will be conducted thereafter.

**C. The Ministry of Health should compile a report on its key findings on the effect of the Covid-19 pandemic on mental health in Trinidad and Tobago and submit same to the Parliament.**

Researchers from the University of the West Indies, in collaboration with the Ministry of Health, conducted research on the effect of the COVID-19 pandemic on mental health in Trinidad and Tobago. There has been one publication to date from that research: "Positive influences of the COVID-19 pandemic on community dwelling adults in Trinidad and Tobago: a cross sectional study."

The UWI researchers plan to submit another article for publication in the near future, focusing on the mental health impact of COVID-19 on persons with non-communicable diseases during lockdown. They have committed to completing their final report and



submitting their findings and recommendations to the Ministry of Health with urgency and those findings and recommendations will be shared with the Parliament.

**D. The Ministry of Education and the Ministry of Health should collaborate to conduct a study on the long-term effects of the COVID-19 pandemic on the mental health of children in Trinidad and Tobago.**

A longitudinal study such as one looking at the long-term effects of the COVID-19 pandemic on the mental health of children in Trinidad and Tobago is a complex undertaking which would necessitate a lead researcher from an institution such as the University of the West Indies. The Ministry of Health will collaborate with the Ministry of Education and other key stakeholders such as UWI and CSO to facilitate the conduct of this longitudinal study.

**OBJECTIVE 2: To evaluate the efficacy of the support systems and services of the State aimed at counteracting the adverse effects of the Covid-19 pandemic on mental health and wellness.**

**A. The Ministry of Health should collaborate with the Trinidad and Tobago Association of Psychologists to develop a comprehensive database of Mental Health resources available to the population.**

A comprehensive database of all private providers of psychological services who have registered their services with the Trinidad and Tobago Association of Psychologists is available on the Association's website. All public mental health services and all private mental health services that are provided free of charge are currently listed on [findcarett.com](http://findcarett.com).

**B. As part of its Ministerial Response, the Ministry of Health should provide an outline of a proposal for case management of children's mental health.**

In 2019, a Child and Adolescent Mental Health Services (CAMHS) Working Committee was established to examine mental health services available to children and adolescents. The committee produced a report that recommended a new comprehensive model of care for CAMHS in Trinidad and Tobago, with the next step being the drafting of a comprehensive new model of care (multi-disciplinary/multi-stakeholder) for children and adolescents.

Although that exercise has not yet commenced, the service delivery activities outlined in the Implementation Plan for the National Mental Health Policy include the expansion of in-patient and out-patient mental health services for children. The expansion of both in-patient and out-patient CAMHS, with the requisite human resource strengthening, as envisioned in the Implementation Plan for the National Mental Health Policy, is a prerequisite to the implementation of a case management strategy.



**C. The Ministry of Health should collaborate with the Ministry of Digital Transformation to develop ICT-based solutions to improve data collection regarding mental health in Trinidad and Tobago. Areas of focus should include:**

- i. Demographic data such as age, gender and geographic distribution of mental health issues;**
- ii. Distribution of human, infrastructural and financial resources allocated to mental health across both the public and private sector;**
- iii. Consolidation of observations on mental health trends made by both public and private sector practitioners;**
- iv. Platform for streamlining the referral system; and**
- v. Platform for case conferencing to manage patients that require intervention from multiple practitioners in the healthcare, social welfare network and school system**

As noted in the response above (Objective 1 part A), the NMHIS will collect the listed demographic and clinical data based on service delivery and resources utilised supported by a surveillance system with dashboards and the tracking of targets and indicators. The Ministry of Health will collaborate with the Ministry of Digital Transformation in developing and finalising the action plan for the NMHIS.

**OBJECTIVE 3: To evaluate the adequacy of support systems and services available for persons in the areas of substance abuse and suicide prevention.**

**A. The Ministry of Health should collaborate with the University of the West Indies, St. Augustine Campus and other tertiary institutions to conduct research on substance abuse and suicide trends, prevention and solutions. This research will then help to create data driven policies. Research subjects should include:**

- i. Root causes of suicide and substance abuse in Trinidad and Tobago;**
- ii. Assessment of protocols to both prevent and treat substance abuse and suicide ideation; and**
- iii. Culturally appropriate and relevant methodologies for counteracting suicide and substance abuse.**

The Centre for Health Systems Research at UWI conducted a Reverse Research Day on July 18, 2022, to discuss research activities in alignment with the Ministry's Strategic Priority Areas inclusive of Mental Health services. Follow-up discussions are planned which will inform future research priorities.

Additionally, the Mental Health Unit routinely examines research publications on various mental health topics, inclusive of suicide and substance abuse to ensure that all current and future plans are evidence-based.

**B. In light of information provided that the Ministry of Health does not interface with the family of those who have died by suicide due to those cases being handled by the**



**Trinidad and Tobago Police Service, the two institutions should develop a protocol for referring families and associates of those who have died by suicide to mental health support services and trauma counselling.**

When referred, suicide survivors currently receive support from psychologists and social workers employed at the Regional Health Authorities. In addition, when identifying data and contact information are available, these mental health professionals reach out to suicide survivors and other persons known to have endured trauma. Participation in publicly provided psychosocial support is entirely voluntary and survivors sometimes decline offers of psychosocial support from the RHAs.

- C. The Ministry of Health in collaboration with the Ministry of Education and Community Based Organisations should develop a robust peer education and peer support system to 4th Report of the Joint Select Committee on Social Services and Public Administration 13 train individuals at the school and community level in identifying, treating and referring cases related to depression, suicide and substance abuse.**

The Ministry of Health has developed a Communication Plan, the implementation of which will help to meet this objective. In addition, the Ministry of Health, in collaboration with PAHO and other stakeholders, has begun discussions with the Ministry of Education towards the roll out of an adolescent mental health engagement plan, inclusive of a "Mental Health Literacy" curriculum in secondary schools. A program suitable for primary schools is currently being explored.

**OBJECTIVE 4: To evaluate the mental health support provided to health care workers directly involved in rendering treatment to COVID-19 patients.**

- A. The Ministry of Health should collaborate with the Ministry of Digital Transformation to develop a standard system to collect data on healthcare workers who access mental health support services. Having this information readily available will assist in developing optimal mental health support for healthcare workers.**

Workers who access mental health services are entitled to privacy and confidentiality and whenever these are perceived to be threatened or compromised, help seeking behavior becomes less likely. Healthcare workers, like all other workers, should have access to externally provided Employee Assistance Programmes (EAPS) and feedback between the employer and the EAP should only take place in extreme circumstances. These circumstances are well understood by EAP providers.

- B. The Ministry of Health should also develop a standardised feedback mechanism for healthcare workers to anonymously provide feedback on the quality of mental health support services received.**



Feedback received from healthcare workers about the quality of mental health services received can be instructive, whether or not the source is anonymous. A feedback mechanism, whether it be via email, written or verbal communication, can be considered.

**C. The Ministry of Health should provide continuous follow-up on healthcare workers who access mental health support services to ensure that presenting issues have been adequately monitored and treated**

Once workers access mental health services, or any other type of medical services, follow-up is the responsibility of the service provider. Unless the worker voluntarily shares information about that service, that information remains confidential and cannot be disclosed to his/her employer without his/her written consent. Workers can, however, be encouraged to report adverse experiences and thereafter, appropriate corrective measures will be actioned accordingly.