Health Report Card for Trinidad and Tobago, 2011

The Directorate of Health Policy,
Research and Planning
What Determines Our Health

Health is influenced by a number of complex interactions between environmental factors, socioeconomic factors, health behaviours, health services and genetic factors. These factors are known as the determinants of our health. They do not work in isolation but rather combine together to affect individual health and by extension the health of the population.

Environmental Factors
- Access to safe food & water
- Air Quality
- Climatic conditions
- The physical environment at work and at home

The physical environment is an important determinant of our health. Air that is polluted or food and water that are contaminated can have adverse effects on our health. These effects can lead to gastroenteritis, respiratory illness and certain birth defects.

Socioeconomic Factors:
- Income
- Employment
- Education Levels
- Literacy
- Housing and Technology

All of the above variables are intricately linked to our health status. Research has shown that higher incomes and social status are linked to better health whereas persons with lower education levels are more susceptible to poor health conditions, higher stress levels and lower self-confidence.

Personal Behaviours and Health Practices:
- Diet
- Physical activity
- Sexual Behaviours
- Alcohol and drug abuse
- Tobacco smoking
- Breast feeding
- Violence

Diets high in fat, cholesterol and sugar contribute to the major causes of illnesses and death in Trinidad and Tobago. Tobacco consumption, excessive use of alcohol and driving under the influence of alcohol are also behaviours that impact adversely upon one’s health and also on society. In addition, having multiple sex partners and unprotected sex increases the risk of contracting sexually transmitted diseases. Violence including domestic abuse affects victims both physically and mentally and by extension impacts negatively on society.

Biological and Genetic Factors:
- Immune System
- Congenital abnormalities
- Inherited conditions

The genes that we inherit play an important role in determining our health status. Genetic factors determine the likelihood of developing certain diseases such as sickle cell anaemia and can even influence our life span.

Health Systems and Services:
- Provision of and access to health services

Having access to and use of available health services for routine checkups, screening tests e.g. mammograms, cholesterol tests and tests for prostate or cervical cancer play an essential role in preventing and treating diseases.
OUR POPULATION

In the year 2000 when the last national census was conducted, the population of Trinidad and Tobago stood at 1,262,366 persons. The total size of the population is dependent upon the rate of births and deaths and the level of migration. Using these variables, the Central Statistical Office computes mid-year estimates for the inter-census years. The mid-year population for 2010 was estimated at 1,317,714. The national Census is currently underway from which an actual population figure for 2011 will be derived.

Notwithstanding the absolute size, there is evidence that the demographic situation of this country over the last ten years has undergone changes from high natality and mortality that approximately balance each other to the current demographic situation in which births and deaths are low and also approximately balance out. The country is in an advanced stage of demographic transition depicted by a population structure in which the number of children below the age of 15 years has decreased while the number of persons 60 years and older has doubled.

This aging population is not unique to Trinidad and Tobago but reflects a global phenomenon. Graphically, our population pyramid no longer reflects the typical pyramid structure but rather one that reflects a constrictive pyramid. The constrictive pyramid structure shows a smaller percentage of younger people and a higher number of older persons.

LIFE EXPECTANCY

Life expectancy is an indicator of the overall health of a population. It indicates the expected average life span of a newborn given prevailing health conditions. In other words, it measures the average length of life an individual in the population can be expected to attain.

Life expectancy in Trinidad and Tobago has been increasing. In 2006, the expectancy of life for the overall population was 71 years. There were, however, significant gender differences. The expectancy of life for males is lower (66 years in 2006) than that of females (72 years).

Although the life expectancy of Trinidadians and Tobagonians has increased over the years, it has done so at a slower rate when compared to some of our Caribbean neighbours such as Barbados and Jamaica. Males in Barbados can expect to live to 72 years and females 79 years while Jamaican males and females have a life expectancy of 69 and 75 years respectively.

According to the United Nations, Trinidad and Tobago is ranked 116th in the world in terms of life expectancy. Our international counterparts have far greater life expectancies. Japanese females can expect to live to 86 years and males to 79.2 years. Australian females can expect to live to 83.7 years and males to 79 years.

Source: World Health Organisation
MATERNAL AND CHILD CARE

Maternal Care

One of the most rewarding roles in society is that of a mother. As such, caring for and improving the health of pregnant women and their newborn is of critical importance to the health and development of our country.

Maternal health according to the World Health Organization refers to the health of women during pregnancy, childbirth and the postpartum period. While pregnancy is supposed to be a happy and fulfilling period, for some women it is associated with suffering, sickness and even death.

In order to increase the health of pregnant women and decrease maternal deaths, pregnant women are advised to have regular prenatal visits with their doctor. Prenatal care allows expectant mothers to know if they are healthy and if their baby is developing normally. It also provides mothers with advice on how to take care of themselves and their unborn baby.

Infant Mortality

This indicator measures the number of children dying before the age of one year old. Like the life expectancy indicator, it is a measure used to determine a country’s level of health and development. In Trinidad and Tobago the Infant Mortality rate has been steadily decreasing over the last few years. As of 2006 (latest available data from the Central Statistical Office), our Infant Mortality rate was 13.1 deaths per 1,000 live births. This figure represented a decline of approximately 45% in the Infant Mortality Rate between the years 2002 to 2006.

Whilst our Infant Mortality Rate has been decreasing, our numbers are still high in comparison to countries such as Cuba, Canada, United States and Japan. These four countries attained single digit Infant Mortality rates (IMR) in 2006. In the United States of America the IMR was 6.43 deaths per 1,000 live births, in Cuba 6.22 deaths per 1000 live births, in Canada 4.69 deaths per 1,000 live births and in Japan 3.26 deaths per 1,000 live births.

Steps to Reduce Maternal and Infant Mortality

- Early and continuous access to Prenatal Care Services
- Abstain from cigarette smoking and alcohol consumption during pregnancy.
- Reduce the possibility of mother to child transmission of HIV AIDS. A free Prevention of Mother To Child Transmission Programme offering counselling, testing and medication, if needed, to pregnant women is provided at public health institutions.
- Eat a well balanced diet that provides nutrients from each of the food groups inclusive of iron and folic acid to avoid becoming anaemic.
- Breast feed your baby within one hour of birth and exclusively for no less than four months.
- Ensure that your child is fully immunized against all common vaccine preventable diseases.
LEADING HEALTH ISSUES AFFECTING DIFFERENT AGE GROUPS

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<td>School –age children</td>
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<td>Elderly</td>
<td>65+</td>
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SPECIFIC HEALTH ISSUES AFFECTING OUR COUNTRY

Accident & Injury

For the past three decades, injury and external causes (accidents, violence, poisoning, suicide, etc.) have consistently remained amongst the top five leading cause of death in this country.

In 2006, accidents and injuries were the fourth leading cause of death and the number one cause of public hospital discharges.

In recent years, mortality rates from this cause have increased considerably, approximately 86 percent over the period 1999 to 2006 (from 49.7 per 100,000 population in 1999 to 78.85 per 100,000 population in 2006).

Data from public hospitals show that over the past three decades, injury, poisoning and other consequences of external causes was also ranked as the top reasons for hospital admissions. For the period 2002 – 2006, there was an average 11,463 cases of injury discharged from hospitals per year, resulting in an average of 40,602 hospitalization days for all of these cumulative cases.

Mental Health

Mental illnesses comprise a number of disorders including depression, schizophrenia, bipolar disorders and anxiety. These illnesses vary in severity and impact not only upon the individual but also on families and can cause significant economic and social hardships for society as a whole.

Depression:

Though often undiagnosed and untreated, depression is a significant health problem. A survey conducted in Trinidad and Tobago reported a prevalence of depression among the community sampled of 14% (Bandhan et al 2006)\(^1\). Another study also reported high rates of depression for adolescents in this country and this was found to be associated with home violence and substance abuse (Maharaj et al
Although the precise causes of mental illness are varied, certain factors may increase one’s risk of presenting with clinical signs and symptoms associated with mental illnesses. These include:

- Genetics
- Having a biological relative, such as a parent or sibling with mental illness
- Undergoing stressful life situations, such as financial problems, a loved one’s death or a divorce
- Having a chronic medical condition such as cancer
- Undergoing traumatic experiences, such as witnessing violence or being assaulted
- Using illegal drugs
- Being abused or neglected as a child

**Where can I access Inpatient treatment?**

San Fernando General Hospital

Port-of-Spain General Hospital

Scarborough Hospital, Tobago

St. Ann’s Hospital

**Substance Abuse**

Substance abuse is a major public health problem that impacts society on multiple levels. Substance abuse is associated with accidents (drunk driving), violence (child, spousal abuse, homicides and other crimes) stress and mental illness.

In Trinidad and Tobago, alcohol abuse among the young is increasing. A survey of students in Forms 2, 4 and 6 in both public and private school conducted by The National Alcoholic and Drug Abuse Prevention Programme (NADAPP) in collaboration with the Inter-American Drug Abuse Control Commission (CICAD) sought to understand consumption patterns of alcoholic beverages among this population.

This report found that the average age of first time use of alcoholic beverages was 10.9 years with seventy five percent (75%) of all students having initiated alcohol use by age 13. Six of every ten students (57.4%) felt that this practice was very harmful and only 4.3% felt it was not harmful. About one-fifth (20.4%) of students felt this was moderately harmful and 5.3% did not know of the harm associated with frequently drinking alcoholic beverages.

Harmful use of alcohol has a serious effect on public health and is globally considered to be one of the main risk factors for poor health. The World Health Organization’s Global Strategy to Reduce the Harmful Use of Alcohol notes that drinking causes detrimental health and social consequences for the drinker, the people around the drinker and the society at large. This strategy also notes that children, teenagers and adults who choose not to drink alcoholic beverages have the right to be supported in their non-drinking behavior.
Oral Health

Oral diseases despite being largely preventable are still widespread throughout the national population and affect particularly the vulnerable groups in society. The most common oral diseases are tooth decay and periodontal disease.

Oral health is an integral element of general health and well-being as it impacts on our daily functioning and on our overall quality of life therefore, more attention must be paid to the prevention of oral disease and the promotion of oral health.

To ensure optimal oral health the Ministry of Health advocates that due attention be paid to the following:

Diet and Nutrition
Sugar is the leading cause of dental decay. Individuals should reduce the amount and frequency of sugar consumption, through the replacement of high sugar snack foods and drinks with more tooth friendly snack options such as whole fruit, vegetables, cheese, milk, yogurt, crackers, rice cakes, unsalted nuts, plain biscuits, popcorn (plain and unsalted), and breadsticks. Using sugar substitutes and choosing sugar-free medications are alternatives.

Oral Hygiene
Early adoption of oral hygiene practices in young children is recommended (as early as when the first tooth erupts). Regular brushing of the teeth and gums from an early age with a fluoride toothpaste will help prevent tooth decay and periodontal disease.

Fluoride Exposure
Lack of exposure to fluoride can increase the risk of tooth decay. Fluoride toothpaste is the most widely used fluoride vehicle in the world, and is one of the main reasons for improvement in oral health seen in many industrialized countries over the last 30 years. Effective, twice-daily tooth brushing with a fluoride toothpaste helps prevents dental caries and has the additional benefit of improving periodontal health.

Ceasing Exposure to Tobacco and Avoiding Excessive Alcohol Intake
Smoking increases the severity of periodontal disease and is one of the main risk factors for oral cancer. Smoking combined with excessive consumption of alcohol can lead to a 30 times greater risk of oral cancer, thus it is necessary to quit tobacco use and avoid excessive alcohol intake.

Injury Prevention
The health of teeth can be compromised by traumatic injury. Children and people who play contact sports are at particular risk and it is recommended that they use properly fitted mouth-guards to reduce oral trauma.

Routine Visits to an Oral Health Care Provider
To allow for the early identification of risk factors for oral disease and the early detection of oral disease, routine visits to an oral health care provider (dentist) is recommended.

Obesity in Children

Childhood obesity is a growing concern in Trinidad and Tobago. A study conducted by the Caribbean Food and Nutrition Institute (CFNI) over the period 2009 – 2010 found that 23% of primary school children in Trinidad and Tobago were overweight/obese, 25% of secondary school aged children were overweight/obese and that 14% were underweight.

Another recent survey conducted by the Diabetes Education Research and Prevention Institute (DERPI), has highlighted the significant increase in the prevalence of diabetes and obesity among school children. This study, (results reported in the UWI TODAY), which tested 67,000 school children aged 5-17 years in Trinidad for urine glucose during 2009, found that in testing every 100,000 children, 10 children with Type 2 diabetes and 19 children with difficulty in handling ingested glucose were detected. The survey also revealed that many of the children had undiagnosed Type 2 diabetes in their family.
Since obesity underlies most cases of diabetes, high blood pressure, high cholesterol and cardiovascular diseases, it is important to take the necessary steps to prevent obesity in children. Children become overweight and obese for a variety of reasons, the most common causes being genetic factors, lack of physical activity, unhealthy eating patterns, or a combination of these factors.

The prevalence of obesity in Trinidad and Tobago can be decreased by adopting healthy eating habits e.g. balanced diets, reduced fatty intake, reduced sugars and through regular exercise. Children should be monitored as there is a growing tendency for them to spend long hours being inactive while watching television, using computers and video games which are becoming increasingly popular.

**CARING FOR THE ELDERLY**

As we move towards a more aging population, the number of persons aged sixty five years will continue to increase. Caring for persons within this age group requires more time and attention and can be a bit challenging as they develop requirements that are unique to their age. While some elderly persons may be quite active both physically and mentally, others are not and are therefore dependent on relatives to take care of their everyday needs.

According to a report produced by the Ministry of The People and Social Development, loneliness is an area of concern among the elderly. This loneliness is not as a result of persons living by themselves but rather as a result of relatives not having enough time to socialize and interact with them.

In spite of busy work schedules, it is important for relatives and loved ones to take time to understand and identify the needs of the elderly and thus be in a better position to care for them so that they can feel a sense of belonging.

**COMMUNICABLE DISEASES**

**Dengue**

Dengue fever continues to be a national challenge occurring in cyclical outbreaks. Also known as ‘breakbone fever’, it is a disease caused by a virus carried by the Aedes Aegypti mosquito. It is spread from person to person by the bite of an infected Aedes Aegypti mosquito.

In some instances Dengue Haemorrhagic Fever can develop. This is a serious complication of Dengue Fever which can lead to death. Dengue is diagnosed by clinical signs and symptoms supported by a blood test. If you have Dengue, the doctor will prescribe medicines to reduce the fever and treat other symptoms as necessary.

**Signs and Symptoms of Dengue Fever**

Symptoms of Dengue Fever appear within 5 -6 days of being bitten by an infected mosquito. These symptoms include:

- High fever
- Backache
- Skin rash
- Muscle and Joint pains
- Pain behind eyes
- Diarrhea

In some cases, mild bleeding can occur including bleeding from the gum, nose or under the skin.

If you suspect that you have Dengue Fever Do Not Use the following medications:

**Aspirin or similar medication such as Motrin, Cataflam, Olfen or Ibuprofin. These may cause complications such as bleeding which can cause shock.** Instead use Paracetamol or Acetaminophen such as Panadol or Tylenol.

**Steps to Reduce the Spread of Dengue**

- Dispose of all unwanted containers that can collect water when exposed to rain e.g. styrotex cups, old tyres and bottles.
- Cover all water containers such as barrels, drums or buckets.
• Check your guttering and making sure that the water flows freely without any obstruction by leaves or branches.

• Empty the pan under the refrigerator which can collect water.

• Empty and scrub the sides of water vases or use dirt or sand instead to support the flowers.

• Change water in pet containers regularly.

**HIV/AIDS**

While the epidemic of AIDS has been broken largely due to the availability of free antiretroviral drugs nationally, new cases of HIV continue to be seen annually with the age cohort 15 – 24 years accounting for approximately 4.3 percent of all new infections. Females in this age group have a higher incidence of infection than males. In fact, the number of new HIV positive cases reported for young women between the ages of 15 to 19 years is nearly three times that reported for males in the same age group.

Currently, there are a number of programmes and services provided by the Ministry of Health aimed at prevention and treatment of HIV/AIDS.

These are RapPort, the Antiretroviral Treatment Programme and Prevention of Mother to Child Transmission Programme.

**What is RapPort?**

This programme aims to:

Empower youth with accurate, relevant information that will enable them to make informed choices, increase their awareness of sexual risk reduction behavior and increase knowledge of safer sex practices.

**How to Access RapPort:**

**North West Regional Health Authority - RapPort**
Morvant Health Centre
Lots A-B
212 Lady Young Avenue
Morvant
Tel: 627-7607

**North Central Regional Health Authority - RapPort**
Corner Robinson Circular and Queen Street
Arima
Tel: 667-5774

**Prevention of Mother to Child Transmission of HIV/AIDS Programme**

The aim of this programme is to reduce the transmission of HIV infection from the mother to the unborn infant. This strategy gives the infant the greatest chance of an HIV free survival.

**How to Access the Prevention of Mother to Child Transmission of HIV/AIDS Programme:**

This programme is available at all public hospitals and health centres across Trinidad and Tobago.

For further information contact:
Queen’s Park Counseling Centre & Clinic (QPCC&C)
3 Queens Park East

**The Antiretroviral Treatment Programme**

In the response to HIV&AIDS, this programme aims to provide Antiretroviral Treatment for persons infected with HIV or diagnosed as having AIDS, with the ultimate goal of reducing the morbidity and mortality due to HIV infection. This program also deals with:

• Treatment of women who are diagnosed HIV positive in pregnancy to prevent transmission to the infant;

• Treatment of victims of sexual abuse within 72 hours of the assault to prevent transmission of HIV and other STIs, and

• Treatment of occupational exposure to HIV.

**How to Access the Antiretroviral Treatment Programme:**

Medical Research Foundation
7 Queens Park East
Port of Spain
Tel: 623-5834

Sangre Grande Hospital
Outpatient Clinic
Ojoe Road
Sangre Grande
Tel: 668-2509

Ward 2, San Fernando
General Hospital

Tobago Health Promotion Clinic
Tel: 660-7872

Scarborough Hospital Clinic

Eric Williams Medical Sciences Complex (paediatric cases)
Tel: 645-4673
Leading Causes of Death 2006

What are the most frequently occurring (top five) diseases that Trinidadians and Tobagonians die from?

1. Cardiovascular Disease
2. Malignant neoplasm
3. Diabetes Mellitus
4. Cerebrovascular Disease
5. Injury/External Causes

The health status of a population is reflected in the number and rates of underlying causes of death. These causes give insight into the factors contributing to disease and disability in the nation.

Sixty (60) percent of all deaths in Trinidad and Tobago are due to chronic non-communicable diseases (CNCDs). CNCDs are conditions that do not result from infectious or transmissible conditions. CNCDs cause dysfunction or impairment in quality of life and usually develop over relatively long periods often being asymptomatic at first. CNCDs are similar in that they are all linked by a common set of modifiable biological and behavioural risk factors primarily obesity, high cholesterol, high blood sugar, high blood pressure, unhealthy diet, physical inactivity, tobacco consumption and alcohol abuse.

In Trinidad and Tobago, Heart Disease, Cancer, Diabetes Mellitus and Cerebrovascular Disease which leads to strokes are the leading CNCDs.

Source: Central Statistical Office, Population and Vital Statistics
We’ve Got You Covered
REFERENCES

1 Bandhan et al 2006. The prevalence of selected vascular disease risk factors in a community setting in Trinidad. West Indian Medical Journal 54 (Supplement 2), 78.


4 World Health Organization 2010. Draft Global Strategy to Reduce the Harmful Use of Alcohol

5 Caribbean Food and Nutrition Institute, 2010. Interim Report on the findings of the evaluation of School Meal Options in Trinidad and Tobago.


7 Rouse et al 2010. The Dynamics and Consequences of Population Ageing in Trinidad and Tobago: A Call for Responsible Planning for Sustainable Development. Ministry of People and Social Development. Trinidad and Tobago.