

ANNUAL REPORT 2021

# TRINIDAD AND TOBAGO

Responding to COVID-19 and Preparing for the Future





Annual Report 2021. Trinidad and Tobago: Responding to COVID-19 and Preparing for the Future PAHO/TTO/22-0001

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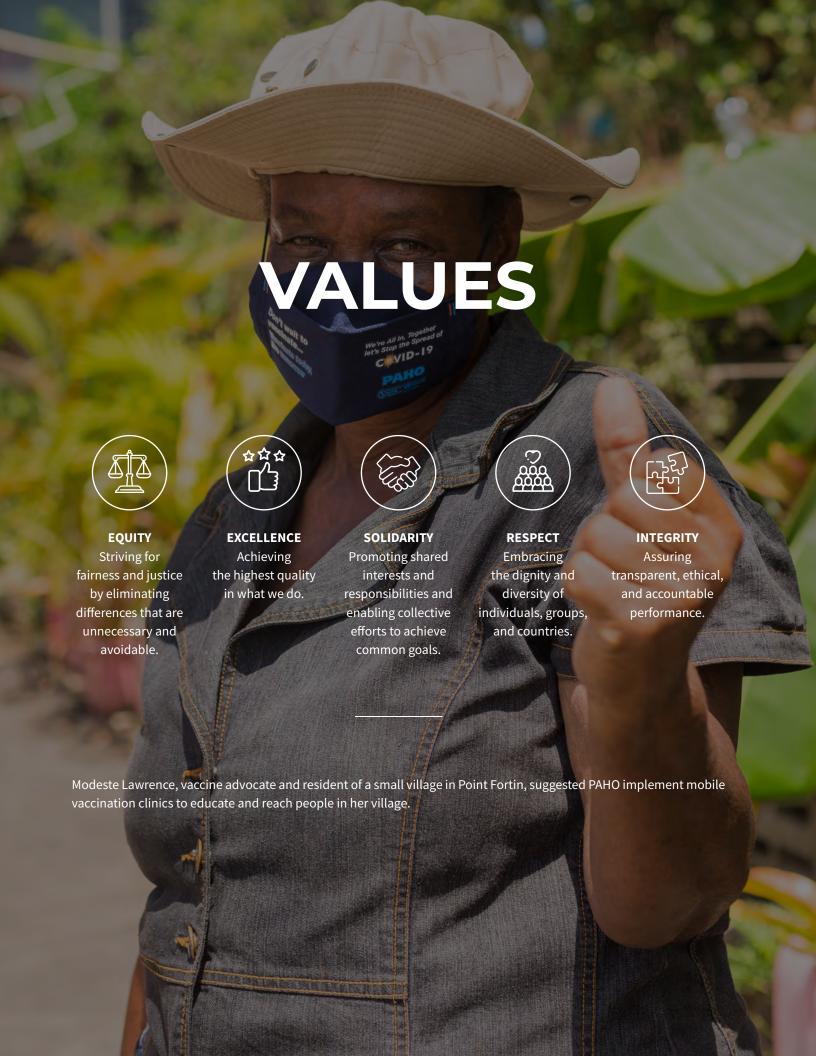
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The Pan American Health Organization (PAHO) was founded in 1902 and is recognized as the independent specialized health agency of the inter-American system, under the Charter of the Organization of American States. In 1949, PAHO agreed to serve as the Regional Office for the Americas of the World Health Organization (WHO), a specialized agency of the United Nations system. Acting in its capacity as WHO's Regional Office, PAHO participates actively in the United Nations Country Team, collaborating with other agencies, the funds and programmes of the United Nations system, and with the United Nations Resident Coordinator to contribute to the achievement of the Sustainable Development Goals at country level. For 120 years, PAHO has developed recognized competence and expertise, providing technical cooperation to its Member States to fight communicable and noncommunicable diseases and their causes, to strengthen health systems, and to respond to emergencies and disasters throughout the Region of the Americas.

Given PAHO's dual legal status and the difficulty of disaggregating PAHO from WHO activities, this Annual Report reflects both PAHO and WHO activities in the Americas as related to technical cooperation in 2021. Approximately 80% of PAHO's technical cooperation in health in the Region of the Americas is funded by PAHO's own quota and voluntary contributions, as an inter-American organization. The remaining 20% of PAHO's integrated biennial budget includes WHO-funded activities. Further detailed financial information for this Annual Report can be found in the Financial Summary section.





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### MESSAGE FROM THE DIRECTOR



In 2021, COVID-19 remained the greatest public health challenge of modern history. The Region of the Americas was hardest hit and, as new variants of the virus emerged, it became clear that the pandemic was not yet over. However, new vaccines heralded its ending and the advent of a new normal at work, at school, and in everyday social interactions.

The Pan American Health Organization (PAHO) strengthened its technical cooperation to support Member States in vaccinating populations against COVID-19. However, vaccine hesitancy and misinformation sometimes hampered their valiant efforts. PAHO must continue to assist countries in implementing strategies to overcome such obstacles for the COVID-19 vaccination program and routine childhood and other immunization programs.

COVID-19 has had a devastating impact on all countries. Given the attention focused on the pandemic response, we risk losing gains already made in other areas of public health and face a significant worsening in the socioeconomic

determinants of health. The COVID-19 experience has underscored the need to continue to advocate for resilient health systems; strengthen the first level of care using a primary health care approach; promote health in all policies; and revitalize essential public health functions.

Therefore, in 2021 we focused more on those areas of health neglected earlier in the pandemic. These 2021 annual reports chronicle the work in countries and subregions as we prepare for the post-pandemic era.

I sincerely thank our Member States, partners, and donors for working with us to address the challenges of COVID-19. We need to continue to collaborate closely in the complex task of ending the pandemic; tackling the inequities and inequalities in health that plague our Region; maintaining health high on the political agenda of all Member States; and championing health equity as the cornerstone for sustainable development to ensure that we leave no one behind.

#### Dr. Carissa F. Etienne

Director of the Pan American Health Organization

### MESSAGE FROM THE REPRESENTATIVE



In 2021, COVID-19 continued to shape the priorities of the Trinidad and Tobago Country Office. During the first quarter the focus was on country readiness to receive and deploy COVID-19 vaccines. Facilitated through COVAX and the PAHO Revolving Fund, the first vaccines arrived in the country on 30 March 2021, just one year after COVID-19 was declared a pandemic.

With the technical support of the Country Office, the Ministry of Health built upon the desktop simulation for vaccine deployment developed by WHO and COVAX through an innovative approach – conducting a live simulation to strengthen systems for equitable vaccine distribution. Thanks to the successful efforts at country preparedness, PAHO/WHO's advocacy for equitable access to vaccines regardless of a country's gross domestic product, and the significant contributions from our donors, vaccines became available and accessible to the broader population. However, by the end of 2021 Trinidad and Tobago's vaccination rate had plateaued at 50% despite months of robust COVID-19 communication campaigns by the Government, private sector, and PAHO.

Vaccine hesitancy, fueled by unprecedented and well-documented mis/disinformation, has proven to be a fundamental challenge to ending this pandemic, and even a threat to advances in immunization.

In the context of the pandemic, this year the Country Office also focused on capacity building in health technology management, and health economics and financing. In addition, working with the Ministry of Health, PAHO supported activities targeting several communicable diseases (tuberculosis, HIV/AIDS, leprosy, and polio) as well as surveillance of events supposedly attributable to vaccination or immunization, international health regulations, antimicrobial resistance, and production of infection prevention and control manuals. Lastly, prevention and management of noncommunicable diseases and mental health issues were also addressed with the HEARTS initiatives for cardiovascular disease management, as well as inclusion of persons with disabilities, mental health care access and monitoring systems, and prevention and monitoring of suicide, violence, and injuries.

I am pleased to present this annual report from the Trinidad and Tobago Country Office with its contributions and achievements, as well as challenges faced by the country during this second year of the pandemic. Recovery and preparedness for the next health emergency will require an all-of-government, all-of-society approach.

### Erica Wheeler PAHO Representative in Trinidad and Tobago



### HIGHLIGHTS

- PAHO contributed to the overall response to the pandemic, and the COVID-19 vaccination campaign and roll-out in the country in 2021, which led to a total of 668 717 persons (47.7% of the population) fully vaccinated by the end of the year. Thanks to the donations of 15 oxygen concentrators, ventilators, and accessories, PAHO also helped ensure case management of severe COVID-19 cases. In addition, the Country Office supported the roll-out of COVID-19 rapid diagnostic tests and genomic sequencing of variants in the country.
- Capacity building was a strong focus of the technical collaboration in the country this year, with training programs and workshops conducted by PAHO in health technology management (HTM) and health economics and financing for both the country and the Caribbean Region.
- The Country Office worked with the Ministry of Health on specific activities targeting several communicable diseases, such as tuberculosis (TB), HIV/AIDS, leprosy, and polio, with additional activities focused on surveillance of events supposedly attributable to vaccination or immunization (ESAVI), international health regulations (IHR), antimicrobial resistance (AMR), and production of infection prevention and control (IPC) manuals.

PAHO was instrumental in working with the Ministry of Health toward prevention and management of noncommunicable diseases (NCDs) and mental health issues, with activities in 2021 for enhancement of cardiovascular disease management via the HEARTS initiative, while also focusing on inclusion of persons with disabilities, mental health care access and monitoring systems, and prevention and monitoring of suicide, violence, and injuries.

### PAHO TECHNICAL COOPERATION



### **HEALTH EMERGENCIES**



In 2021, PAHO continued working with the Ministry of Health to recover from the COVID-19 pandemic impact, with activities ranging from vaccine acquisition and roll-out as well as a strong vaccination campaign to

# diagnostic tests, case management, and genomic surveillance, while also providing support for vulnerable populations with food and food voucher distribution.

#### COVID-19 vaccine roll-out

COVID-19 vaccines were procured in 2021 by the country through the PAHO Revolving Fund and in collaboration with the COVAX Facility, and were often received upon arrival at the Piarco International Airport by representatives of the Ministry of Health and PAHO. Once the vaccines were available in the country, PAHO supported several key activities for the effective and efficient COVID-19 vaccine roll-out. This technical support included the development and implementation of simulation exercises that resulted in recommendations. the adoption of a facilitators handbook and participants guide, and a short course in immunology and virology for more than 100 health care workers involved in COVID-19 vaccination. In addition, a survey to ascertain concerns, attitudes, and practices of health care workers regarding COVID-19 vaccines in Trinidad and Tobago was conducted.

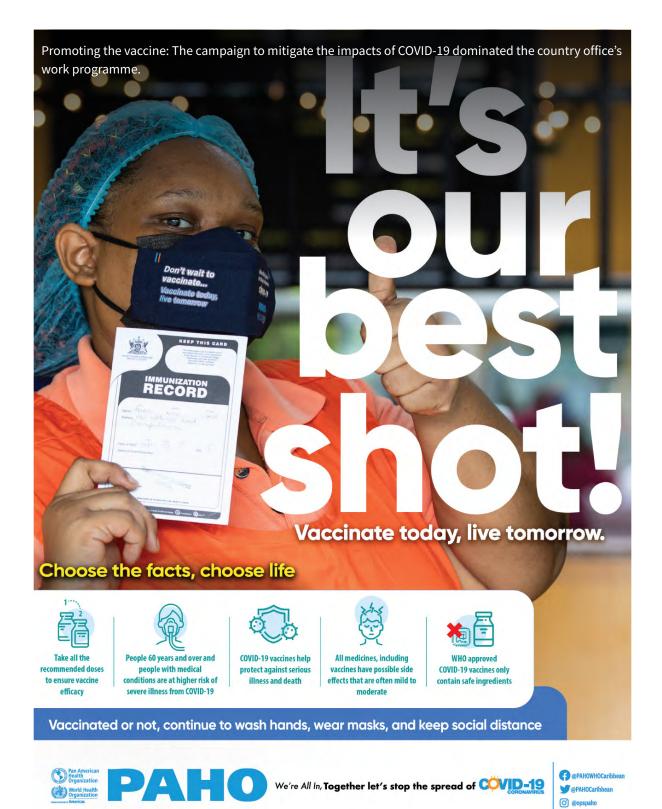
PAHO handed over 1000 vaccine carriers and 20 desktop computers in addition to laptops, wireless network routers, firewalls and laser printers, which contributed to strengthening the information system for the COVID-19 vaccination program as part of the Expanded Program on Immunization (EPI).

#### **COVID-19 vaccination campaign**

Available vaccine hesitancy surveys, insights from the Ministry of Health, PAHO/WHO social media platforms, and scans of local news media informed the development of the COVID-19 campaign. Customization of communications assets to the local context ensured the content was understandable and relatable to targeted communities. The campaign contributed to a successful vaccination program in the country, with 1 408 384 doses administered by 31 December 2021. Some people received a two-dose while others a single dose vaccination regimen and 76 184 additional booster doses were administered, with a total of 668 717 persons (47.7% of the population) fully vaccinated in 2021.

PAHO implemented a novel communications tactic to promote the COVID-19 vaccine via the production of PAHO on De Road, a community outreach interview series. The Country Office visited 21 communities and conducted over 200 interviews to obtain insights and feelings about COVID-19 and vaccines from target audiences. Responses from vaccine advocates provided the content for advertisements broadcast on the three major television stations, 10 major radio stations (youth, community, East Indian, and urban), and on social media.

During filming, 2500 masks with COVID-19 vaccine advocacy messages were distributed within communities. To promote positive COVID-19 preventative behaviors among young urban people, the Country Office developed the "Chronicles of Carla & COVID," a series of four animation videos featuring Carla, a vaccine advocate, dressed and speaking in the target audience's language. Also developed were five short videos to promote vaccine safety and efficacy, played on screens at select supermarkets, billboards, and social media.



Mac @PAHOCaribbean © @opspaho

The PAHO on de Road exercise provided the opportunity to photograph people in towns and villages across the country who became the source of images to develop communication assets for the campaign. The assets comprised newspaper print advertisements, 1000 copies each of eight posters, digital billboards, and grocery cart advertisements. With the support of the Supermarkets' Association, Medical Association, The Ministry of Local Government, and the United Nations High Commissioner for Refugees (UNHCR), the Country Office managed to execute a poster campaign with distribution in 600 small village shops, doctors' offices, and in 11 supermarkets via grocery carts and screens.

Printed materials were also developed. The *Vax Scene* column was published for 10 consecutive weeks in three major newspapers. Each week featured a different COVID-19 topic written in a storytelling style and ended with a related key fact. Two print advertisements weekly were additionally published that aligned with the topic in the *Vax Scene*.

The Trinidad and Tobago Non-Communicable Disease Alliance (TTNCDA) vaccine enrollment initiative used a two-pronged approach to reach people living with noncommunicable diseases (NCDs) and who had questions about COVID-19 vaccines and vaccinations. First, a hotline was set up for persons to speak with board-certified physicians who volunteered to assist with this initiative, and training sessions were held in August for physicians using a briefing book compiled by PAHO based on questions/responses taken from either the PAHO/WHO website or the Ministry of Health website. The second step was a social marketing media campaign, launched in September, to promote vaccine acceptance.

### COVID-19 rapid antigen tests evaluation and roll-out

The Ministry of Health improved access to timely diagnosis of COVID-19 infection through the introduction of COVID-19 rapid antigen testing by the Caribbean

Medical Laboratories Foundation. The Foundation was contracted by PAHO, which also provided support and donated both rapid antigen tests and control kits. This resulted in augmented capacity to identify SARS-COV-2 infected persons, as well as improved the cost-effectiveness of COVID-19 testing, and contributed to the prevention and control of the spread of COVID-19 infection.

Two SD Biosensor COVID-19 rapid antigen tests (SD Biosensor Standard F and Standard Q) were evaluated in their intended use settings and according to site-specific testing capacity within each of five regional health authorities (RHAs). This evaluation was accompanied by a testing roll-out in 29 sites across the five RHAs, with a total of 458 clinical, nursing, and laboratory RHA staff trained in a series of six online webinars and sensitized to basic facts about COVID-19 rapid antigen testing. The Country Office gave technical support for evaluation and monitoring of the process.

### Case management and genomic surveillance

During the year, PAHO donated 15 oxygen concentrators with accessories as well as personal protective equipment (PPE) and 21 ventilators with accessories for use in the ICU for COVID-19 patients. In addition, to conduct genomic sequencing of viral variants PAHO supported the University of the West Indies (UWI) Virology Laboratory through donations of equipment and supplies. This resulted in improved genomic surveillance capacity for both Trinidad and Tobago and the Caribbean Region, capacity development through technical training of staff, and strengthened testing systems for genomic-based surveillance.

In early 2021, PAHO Headquarters in Washington, D.C. identified the UWI St. Augustine Virology Laboratory, under the leadership of Prof. Christine Carrington, to serve as a PAHO Reference Sequencing Laboratory (PAHO-RSL) of the COVID-19 Genomic Surveillance

Regional Network. This process was completed in 2021, with a Letter of Agreement establishing UWI St. Augustine Virology Laboratory as a PAHO RSL signed by both UWI St. Augustine and PAHO Headquarters.

### **Food supply**

To mitigate possible food supply chain disruptions due to the pandemic, especially for vulnerable populations including host community vulnerable/other migrants and Venezuelan migrants in Trinidad and Tobago, the Country Office coordinated with the International Organization for Migration (IOM) for distribution of 765 food hampers in September 2021. Food vouchers were also distributed to vulnerable populations in December, in partnership with 11 nongovernmental organizations (NGOs).

### Young people and COVID-19

In collaboration with the Health Education Division of the Ministry of Health, PAHO facilitated a qualitative study entitled "Knowledge, Attitudes and Behaviors of Young People in Trinidad and Tobago during the COVID-19 Pandemic" with young people aged 18–24 years who participated in focus groups stratified by geographic region and socioeconomic status. Two additional focus group discussions were conducted in Spanish with young people from the Venezuelan migrant community.

The results of the study, to be used in 2022 to inform youth engagement and communication for COVID-19 prevention, coping strategies, and supportive services, were shared in a webinar with representatives of youth organizations. This led to recommendations

for development of interactive psychosocial support services, outreach to communities with low access to the Internet, development of youth-oriented health communication, provision of spaces and events to obtain answers about COVID-19 variants and vaccines, and education on how to identify reliable and truthful sources of information.

### **Respiratory disease**

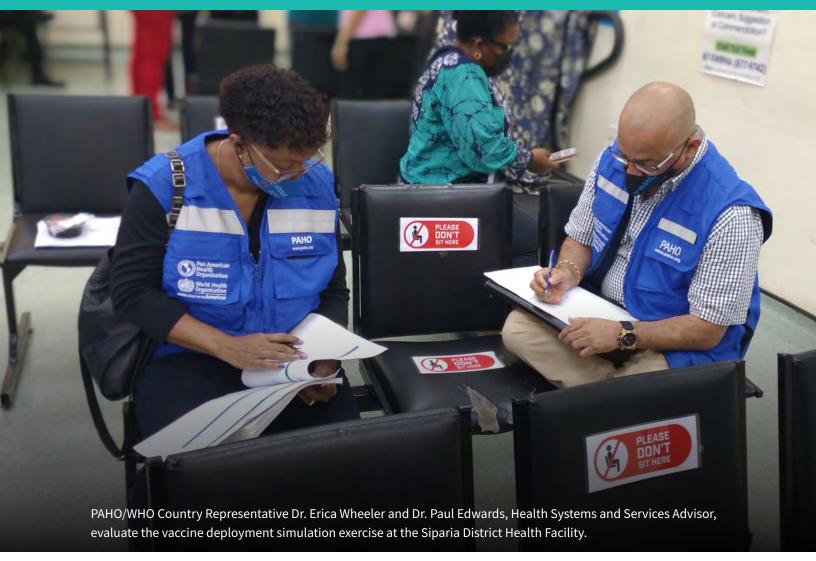
PAHO Headquarters provided weekly trainings to Ministry of Health epidemiology staff in Epi-Estim Modeling. These trainings covered advanced modeling methods incorporating the use of Google Mobility, while the use of epidemic modeling to incorporate the percentage of the country's population vaccinated was explored.

#### **Environment and health**

In 2021, PAHO collaborated with the Ministry of Health, Ministry of Planning and Development, and the Environmental Management Authority toward strengthening the health, climate change, and air quality program in Trinidad and Tobago. The Country Office received a grant from the Climate and Clean Air Coalition (CCAC) in October 2021 for US\$ 50 000 to estimate the burden of disease attributable to air pollution. This grant will allow the monitoring and reporting of related Sustainable Development Goals (SDGs) indicators (3.9.1 and 11.6.2) and the preparation of an integrated road map on air quality, short-lived climate pollutants mitigation, and health. As part of these efforts, PAHO facilitated a stakeholder consultation and training to increase awareness and build local capacity to assess the burden of diseases related to air pollution.



### **HEALTH SYSTEMS AND SERVICES**



© Ministry of Health Trinidad and Tobago

In 2021, in addition to supporting the response to the pandemic, the Country Office also prioritized capacity building with workshops addressing the challenges and possible strategies associated with implementing

health technology management in Trinidad and Tobago, and further training for health systems managers from Aruba, Curaçao, Jamaica, Sint Maarten, and Trinidad and Tobago in health economics and financing.

### Health technology management capacity building

PAHO conducted two workshops addressing the high technology world applied to life cycle management in a "cradle-to-grave" approach and covering efficacy, safety, costs, maintenance, and use of medical equipment and systems. The purpose was to discuss the importance of health technology management (HTM) in Trinidad and Tobago and to identify challenges faced in implementing HTM in the country, as well as to address the challenges and shortcomings identified through a framework to provide root causes and solutions.

The first workshop identified three critical challenges: 1) Lack of understanding of the value of HTM by national health system leadership; 2) Inadequacies in user and service training following medical equipment acquisition; and 3) Timely receipt by biomedical engineering of repair parts following purchase requests. These outcomes provide the basis for future workshops and capacity building as well as a strategic plan in the near future. The second workshop involved case studies and discussion to highlight the value of HTM. Each workshop had approximately 25 participants mainly from the Ministry of Health, including the five RHAs.

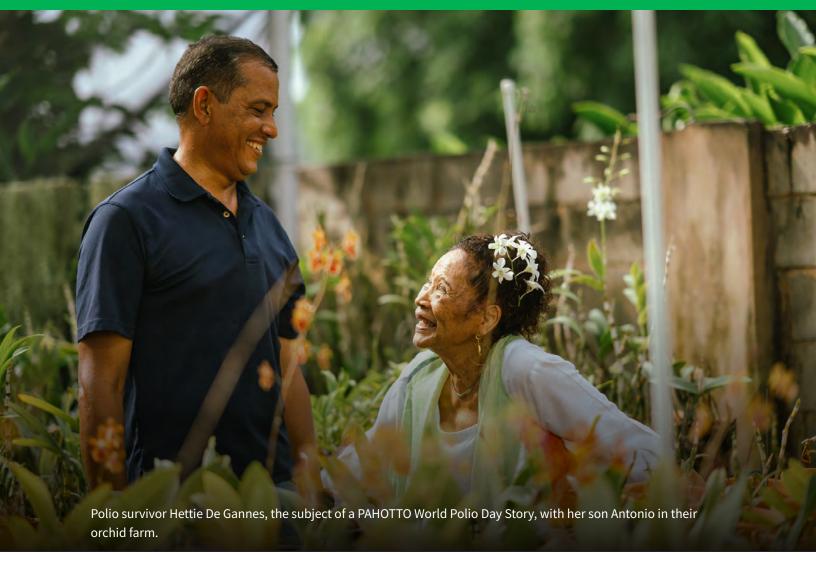
### Capacity building in health economics and financing

PAHO supported capacity building for 21 managers in health systems from Aruba, Curaçao, Jamaica, Sint Maarten, and Trinidad and Tobago in health economics and financing. The training program comprised the following four modules titled: 1) Health financing for Universal Health Coverage; 2) Capacity building to support the development and implementation of health financing strategies: The case of costing in healthcare; 3) Economic evaluation for managers in healthcare or WHO cross-programmatic efficiency analysis; and 4) Use of instruments/indicators for monitoring and evaluating the performance of financing.

The training proved successful, with participants showing evidence of learning and generally rating the program, as well as its delivery and content, highly. Thus, the PAHO/WHO Collaborating Center in Trinidad and Tobago, known as the Health Economics Unit, is now well placed to mount further training initiatives in the four areas covered. Moreover, the managers will have valuable information to support decision-making that impacts resource allocation and financing decisions for their respective health systems.



### COMMUNICABLE DISEASES



This year the Country Office worked with the Ministry of Health on a range of communicable diseases such as tuberculosis (TB), HIV/AIDS, leprosy, and polio. Additional activities focused on surveillance of events supposedly

attributable to vaccination or immunization (ESAVI), international health regulations (IHR), antimicrobial resistance (AMR), and revision and printing of infection prevention and control (IPC) manuals.

#### **Antimicrobial resistance (AMR)**

PAHO worked with the country's focal point for AMR to identify the laboratory of The Sangre Grande Hospital, Eastern Regional Health Authority, Ojoe Road Sangre Grande, for testing of AMR reference panels for the Caribbean External Quality Assurance (EQA) Program. In addition, the Trinidad and Tobago Ministry of Health agreed to an uncomplicated UTI study being conducted in the country in the framework of Country Cooperation for Health Development (CCHD) between CARICOM, Argentina, and PAHO with an aim to improve prescribing practices and the development of appropriate treatment guidelines. The implementation of this study is led by the Country Office AMR focal point.

### Infection prevention and control (IPC)

PAHO completed a technical review of four drafts of IPC manuals. After using these drafts for quotes from printers and graphic artists, PAHO provided final copies of three manuals. Provision of the final copy of the fourth manual by the Ministry of Health for production of the final design and printing by PAHO is pending.

### **Neglected diseases**

PAHO collaborated with the Ministry of Health to submit a revised proposal for the Leprosy Active Case Finding Pilot Project, which was submitted along with a revised budget to WHO and the Sasakawa Foundation in September 2022.

### Expanded program for immunization

Trinidad and Tobago is committed to sustaining polio elimination in the Caribbean. To promote observance of World Polio Day (24 October), PAHO and the Ministry of Health held meetings in August and September to determine possible themes and areas of focus for videos to be created. Following these meetings, the Country Office collaborated with PAHO's Communications Management Unit to produce two stories featuring polio survivors, Mr. David Rudder, world-renowned Trinidad and Tobago born entertainer and Ms. Hettie De Gannes, Artist and Optometrist. In addition, as part of working toward surveillance of events supposedly attributable to vaccination or immunization (ESAVI) in the country, PAHO requested a meeting with the Ministry of Health and other representatives of the EPI program and PAHO Headquarters, and proposed a meeting agenda and objectives. PAHO Headquarters provided the Country Office with a concept note outlining possible work with the Ministry of Health.

#### **Tuberculosis**

The TB team from PAHO Headquarters had completed a virtual TB monitoring visit in December 2020. The Country Office received the final monitoring report in April 2021. One of the report's recommendations was for the use of LAM TB kits for people living with HIV. Subsequently, the Ministry of Health requested support to purchase both Alere and Fuji LAM TB kits for a pilot study, and PAHO provided both Alere and Fuji LAM TB

kits to the Trinidad and Tobago Ministry of Health in 2021 for comparative studies.

#### **HIV/AIDS**

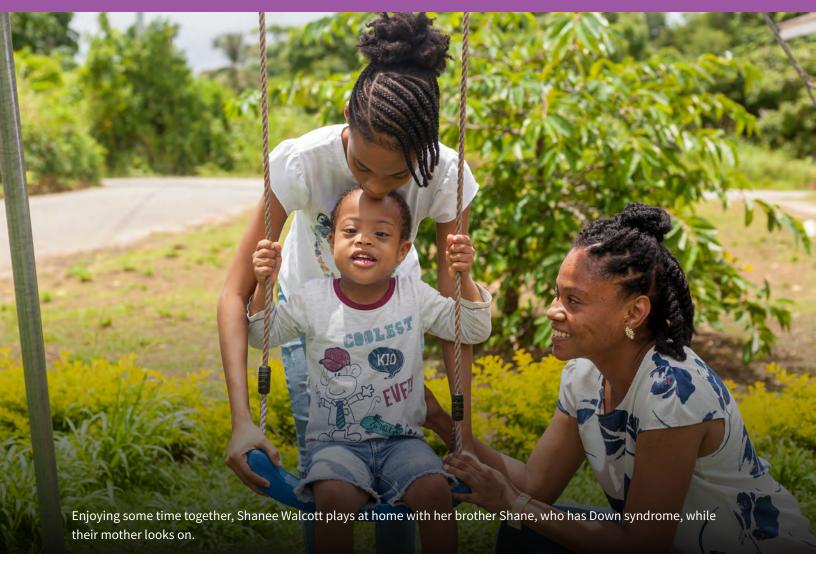
An Excel-based tool developed by PAHO was used to estimate pre-exposure prophylaxis (PrEP) needs for key populations and the cost implications of implementing PrEP over a 3–5 year period. In 2021, PAHO developed a report with relevant indicators on the HIV epidemics and the responses among key populations in the country. PAHO expects to submit a report with relevant indicators on the HIV epidemics among key populations along with results from applying the costing tool in 2021. The Country Office also scheduled weekly meetings with Ministry of Health stakeholders, the PAHO subregional and regional advisors, and the AIDS Coordinating Unit (HACU) to discuss the best way forward with respect to comparative studies using the LAM TB kits.

As Trinidad and Tobago advances toward its Revised National HIV Strategic Plan, an ongoing evaluation included feedback and comments from the technical staff of the Country Office and PAHO office for the Sub-Regional Programme Coordination (Caribbean) (SPC-CRB), which were collated and provided to the Ministry of Health on 3 September 2021. The PAHO HIV focal point in the country, Ayanna Sebro, liaised with the Technical Director, National AIDS Coordinating Committee Secretariat, Office of the Prime Minister, to support completion of the report in 2021.

As part of additional efforts on HIV in the country, PAHO worked with the Ministry of Health to revise Trinidad and Tobago's clinical guidelines to align with new 2021 WHO recommendations.



### NONCOMMUNICABLE DISEASES AND MENTAL HEALTH



Prevention and management of noncommunicable diseases and mental health issues were the target of diverse activities by the Ministry of Health along with PAHO and resulted in advances in cardiovascular disease management

### with the HEARTS initiative, inclusion of persons with disabilities, mental health care access and monitoring systems, and prevention and monitoring of suicide, violence, and injuries.

# The management of noncommunicable diseases (NCDs) in primary care

The technical cooperation focused on strengthening the management of NCDs in primary care. These activities included the development of the **HEARTS** initiative scaled-up plan 2021–2025 that intends to fully institutionalize a partnership between the Ministry of Health, PAHO and local stakeholders, as the model of care for cardiovascular diseases by 2025. HEARTS provides a holistic approach to chronic NCD management by incorporating both public health and clinical primary care in one program. In order to increase awareness, build blood pressure measurement competency among patients, and ensure standardization of data collection, analysis, and reporting, PAHO facilitated the development of educational materials and promotional videos for patients, training of the health team, as well as supporting the development of a standardized hypertension registry framework and a data dictionary.

The experience with the roll-out of the <u>HEARTS Diabetes</u> <u>Module</u> in one RHA in Tobago was documented and shared with the other RHAs and PAHO Headquarters to facilitate the transfer of knowledge. The Tobago Regional Health Authority (TRHA) is responsible for operations and delivery of health services in Tobago. The roll-out consisted of:

 Circulation of the HEARTS Diabetes Module to primary care practitioners (medical practitioners, district health visitors (DHVs), and senior nurses in the health centers.

- Preparation of a standardized presentation on the HEARTS D-Module.
- Sensitization of all the medical officers, and some of the DHVs in primary health care on the HEARTS D-Module conducted.
- Clinical manifestations of diabetes mellitus (DM), and guidelines for management and health promotion regarding DM in keeping with the HEARTS D-Module were also developed and sent to doctors and primary care nurse managers (PCNMs), asking them to review and simplify the content into "patient friendly" information to aid in improved self-management.
- The newly appointed clinical manager was tasked with introducing the HEARTS D-Module to medical officers, PCNMs, and DHVs in Tobago.

The roll-out process reached primary care staff (medical practitioners, DHVs, senior nurses in the health centers, and medical officers, with the module introduced by the newly appointed clinical manager.

To empower patients, 74 persons with NCDs participated in a six-week training consisting of a chronic disease self-management course implemented by PAHO/WHO, with the support of the <u>Universal Health Coverage Partnership</u> (UHC Partnership). The initiative will be scaled up nationwide to reach all communities.

### **Disability inclusion**

Following the country's selection for 2020 funding in the UNPRPD MPTF 4th funding round, the disability program in Trinidad and Tobago was enhanced with the hosting of a national workshop on the United Nations (UN) Convention on the Rights of Persons with Disabilities (CRPD) in 2021. The overall goal was to prepare stakeholders and other partners to jointly complete the situational analysis and develop a strong joint programming proposal in line with the UNPRPD's Strategic Operating Framework and the CRPD.

Due to the ongoing COVID-19 pandemic restrictions, the workshop convened online via the Zoom platform. While PAHO is the lead UN agency, the workshop was done in collaboration with the UN Resident Coordinator's Office (UNRC) and the UN Population Fund (UNFPA), with a multi-sectoral approach to ensure full involvement of key stakeholders, including persons with disabilities.

The workshop, supported by a US\$ 100 000 grant from the UNPRPD Multi-Partner Trust Fund (MPTF), was very well received by participants, with frequent requests to conduct trainings/workshops with more groups. There were over 70 participants (31.4% men and 68.6% women) from several organizations including persons with disabilities over 9 days who worked on development of a comprehensive situational analysis and explored a range of topics: equality and non-discrimination; accessibility; inclusive service delivery; participation of persons living with disabilities (PWDs); CRPD-compliant budgeting and

financial management; accountability and governance; enabling full and effective participation of PWDs; ensuring inclusion of marginalized and underrepresented groups; and gender.

### Coordinated action on mental health

Some COVID-19 pandemic consequences (isolation, loss of income, death of relatives, increase in domestic violence, etc.) have negatively impacted the mental health of many in Trinidad and Tobago. Although considerable mental health and psychosocial support was provided, many persons were unaware of who could access these services distributed in silos, and how to access them.

To address these challenges, the mental health program was strengthened with the training of mental health and psychosocial support services (MHPSS) providers representing several ministries, departments, agencies, NGOs, professional associations, and academia in monitoring and evaluation for MHPSS. Additionally, the Mental Health GAP Action Programme (mhGAP) was evaluated and a communications strategy and plan for a community-based mental health model of care developed.

National Emergency & Crisis Mental Health Services Directory homepage



Source: https://www.findcarett.com/ and https://www.paho.org/en/launch-findcarettcom-directory-mhpss-services-trinidad-and-tobago.

The 34 members of the Mental Health Technical Working Group also collaborated on the development and launching of the MHPSS digital Directory of Services (findcarett.com). In addition to PAHO and the Caribbean Alliance of National Psychological Associations, these included seven Government ministries, all five RHAs, seven NGOs, and several professional associations and private providers. This directory makes it easier for persons seeking care to have easy access to required services, which are free of charge to citizens.

### **Suicide prevention**

Suicide claims the lives of nearly 100 000 people per year in the Americas and is a critical issue in Trinidad and Tobago, Guyana, and Suriname. The pandemic's growing impact on well-established risk factors for suicide, including job or financial loss, isolation and lack of social support, trauma or abuse, and barriers to accessing health, highlighted the immediate public health priority of suicide and its risk factors. PAHO directed efforts toward suicide prevention, reporting, surveillance activities, and training.

In collaboration with the Ministry of Health, PAHO focused on suicide prevention with the development of a two-year implementation plan with the monitoring and evaluation framework and budget for the national suicide prevention strategy 2021–2030. This strategy envisions "A resilient, well-informed society that exhibits a proactive culture of wellness where every human life is valued, and it is rare for anyone to attempt suicide," and its mission is "To build a collaborative intersectoral response to suicide and self-harm with the implementation of timely, effective and accessible support systems, evidence-based approaches and interventions for all."

With the aim of establishing a National Suicide Surveillance System, the suicide and self-harm data flow and reporting mechanism were assessed, with training conducted for the piloting of a suicide and self-harm surveillance system, and desktop computers provided to the Ministry of Health for mental health surveillance. PAHO engaged a consultant to conduct an evaluation and provided training and technical guidance on the process for establishing this system, as well as the scoping review to determine sites to be used for its piloting. PAHO offered additional support to aid the development of a workplan for the roll-out of the system in the different RHAs. This initiative is supported by a WHO/UNDP funding grant for strengthening mental health and psychosocial response to COVID-19 and other crises in three Caribbean countries: Guyana, Suriname, and Trinidad and Tobago.

#### Violence and injuries

The Country Office collaborated with the Ministry of Health to launch important initiatives to monitor violence and injuries. This included training human resources in caring for survivors of violence with the development of the country's first National Clinical and Policy Guidelines on Intimate Partner Violence and Sexual Violence (IPV and SV), as well as an Intimate Partner Violence and Sexual Violence Health Information System (IPVSV HIS).

# Improved response capacity for comprehensive, quality health services for violence and injuries

In collaboration with the Spotlight Initiative, PAHO provided support to the Ministry of Health for development of the country's first National Clinical and Policy Guidelines on Intimate Partner Violence and Sexual Violence (IPV and SV), based on relevant WHO and PAHO guidelines on care of survivors of IPV and SV against women, adapted through review of national policies, laws, protocols, and consultations with health care providers. They include guidance on care in the context of emergencies such as COVID-19, and work on the Guidelines was highlighted in a national TV interview. In addition, draft curricula on care of survivors of IPV and SV were developed for pre-service training of undergraduates and postgraduates in professions

such as nursing, midwifery, medicine, social work, and psychology, for testing in 2022.

A program based on the Guidelines and WHO curriculum trained 29 nurses, doctors, social workers, and training managers from RHAs, the UWI, and the Ministry of Health as trainers, who in turn trained a further 133 health care providers in RHAs. The train the trainers' workshop was organized and facilitated by PAHO. In 2021, trainers from three of the five RHAs went on to train a further 124 staff in care of survivors of IPV and SV, with technical support from PAHO, and further training planned by the remaining RHAs for 2022. This program was featured in the media, with two trainers in a radio interview and an article on the PAHO website: PAHO Trinidad and Tobago builds capacity to respond to gender-based violence under the Spotlight Initiative. Products bearing key messages from the training (notebooks, water bottles, tote bags, and face masks) were developed for distribution to health care providers.

For the 16 Days of Activism Against Gender-Based Violence, 2550 posters were distributed to 23 nongovernmental and governmental organizations with evidence-based messages and referral information for the public on how to support survivors of domestic violence during COVID-19. PAHO collaborated with six NGOs in putting up these posters in visible locations in

vulnerable communities and discussing their contents with community members.

### Intersectoral action for reduction of violence and injuries

Documentation and information systems on violence and injuries are important to enable optimal management of care for survivors and the provision of data for policy decision-making. An Intimate Partner Violence and Sexual Violence Health Information System (IPVSV HIS) was developed in Trinidad and Tobago, the first such HIS in the Americas, to be implemented in 2022.

Following extensive national consultation with health care providers, a form was completed to standardize documentation of physical, sexual, and emotional violence, health status of survivors, and care and referral services provided. The pathway of care outlined in the form is consistent with WHO guidance and the National Clinical and Policy Guidelines on IPV and SV, and the computer interface for data entry was developed by CLAP/PAHO based on the Perinatal Information System, SIP Plus. Indicators of quality of care have been developed and programmed into the system so that automated reports can be generated to monitor quality, as well as a user manual and interactive video to facilitate use of the system.



### NONCOMMUNICABLE DISEASES AND MENTAL HEALTH

#### STORIES FROM THE FIELD

### **Empowering communities to** prevent and self-manage NCDs

Trinidad and Tobago is facing a growing burden of NCDs such as heart disease, stroke, cancer, diabetes, and chronic lung disease, which account for over 62% of deaths each year. Over half the country's population has three or more risk factors, such as poor nutrition, physical inactivity, and harmful use of alcohol and tobacco.

Dr. Michael Jaggernauth, despite being a primary health care physician working in the South West RHA in Trinidad, suffers from diabetes and struggles to manage his own condition. This is very common even when people know they need adequate exercise and a healthy diet, which require difficult lifestyle changes. However, Dr. Jaggernauth took part in a training course on chronic disease self-management implemented by PAHO/WHO, with the support of the Universal Health Coverage Partnership (UHC Partnership).

"Chronic illnesses make you tired, with poor sleep and physical limitations. This program has given me many more tools to work with, and I am seeing much



improvement in my health. I am sleeping better, I am exercising better, and my weight is better controlled. Having realized the benefits of the program, I see myself as an advocate or mentor to other people with chronic illnesses who may be struggling to manage their conditions," said Dr. Jaggernauth.

This training for people with NCDs from a range of organizations will empower trainees to both manage their own condition effectively and become "lead trainers" in their communities. This community-based approach designed by the Ministry of Health with PAHO ensures that people can support each other to make healthy lifestyle choices and manage their own NCD conditions, while also receiving the right support, when needed, from the health system.

## Empowering persons with disabilities to promote inclusion, awareness, and access

In Trinidad and Tobago, discrimination against people with disabilities can be seen at all levels – from lack of equal access to education, health services, employment opportunities, and housing to social stigma and limitations in mobility because of inaccessible buildings, etc.

The 52-year-old and four times winner of the "Extempo Monarch" title awarded for a Trinidad Carnival competition, Lingo (Joseph Vautor-La Placeliere) began singing as a child, while attending the School for Blind Children in Santa Cruz, and never let disability hold him back. In fact, his success as an Extempo calypsonian is rooted in his refusal to let the world define or restrict his ability. Born blind due to a viral infection his mother suffered, Lingo is insistent on proving that a person with a disability can live a full life once the opportunity is created.

Persons with disabilities must have expectations for themselves. Lingo stated, "I realized that the world would simply attempt to limit me and I should not live by those limitations." Empowering persons with disabilities to promote inclusion, awareness, and access is a key step in supporting the goal of inclusion and reminding persons with disabilities to not let the disability be a hindrance to succeeding in life.



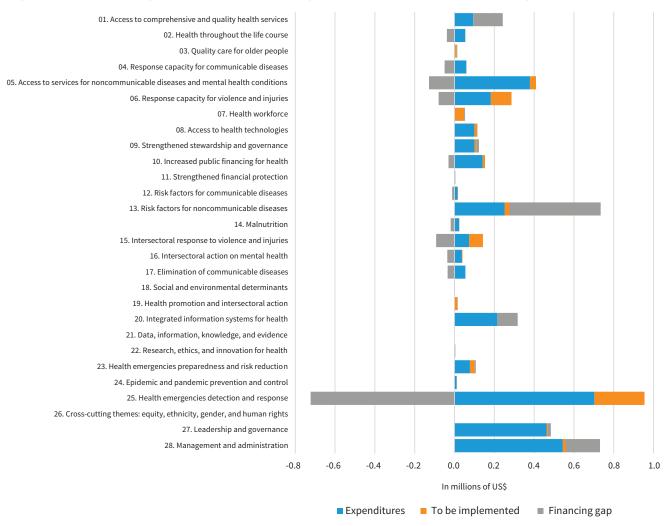
### FINANCIAL SUMMARY

PAHO's reports on the budget and its financing cover a biennial period. Hence, the financial information shown in this report corresponds to the 2020–2021 biennium. For more information, visit <a href="https://open.paho.org/2020-21/country/TTO">https://open.paho.org/2020-21/country/TTO</a> and select the "Financial Flow" tab (upper right-hand part of the screen).

Trinidad and Tobago received approximately US\$ 6.8 million from several funds and grants. This amount, compared to the 2018/2019 biennium (US\$ 2.6 million), represented an increase (approximately 161%) in funding, directly linked to the COVID-19 pandemic.

Approximately 76% comprised WHO funds (51.74% / US\$ 3.5 million) and assessed contributions (24.53% / US\$ 1.7 million). The remaining 24% were from other donors, such as Canada, UNDP, USA, PD, UNOSSC, AJHCT, and EU. Approximately 82.98% (US\$ 5.6 million) was implemented at the end of the fourth quarter and mainly covered the following outcomes: outbreak and crisis response (41.75% / US\$ 2.3 million); management and administration (9.71% / US\$ 544 000); and leadership and governance (8.25% / US\$ 462 000). Implementation also spanned over 23 other outcomes and ranged from 0.03% to 7.04%.

Figure. Outcome budget allocations, financing, and implementation: Base programs



### **LOOKING AHEAD**

As we focus on the future, we must be optimistic and accept the reality that the pandemic has changed perspectives on health, requiring a re-examination of priorities working with the Ministry of Health and other stakeholders.

We must keep uppermost in mind the need to assist the Ministry of Health to sustain the health gains achieved before the pandemic, while pushing forward to expand our reach. Another consideration is how critical innovations in the way we work – a legacy of the pandemic – will allow PAHO to broaden service delivery.

The pandemic has brought renewed urgency and attention to health systems strengthening, the essential public health functions, social determinants of health, the need for guidance on violence especially to women and girls during the pandemic, and also to immunization and other areas such as risk communication and community engagement.

Trust in science has taken a considerable blow, because of the "infodemic," with a considerable negative impact on vaccine acceptance and uptake. Therefore, we must rebuild prior assumptions about the benefits of

vaccination in several groups in the population. The pandemic's socioeconomic impact has brought the issues of poverty and accessibility to the fore, challenging governments to meet the needs of the less well-off, while gaining their trust that service delivery and efforts to save lives will continue.

Throughout it all the role of PAHO has become more visible, and we have had more opportunities to interact with persons of all socioeconomic levels and in diverse parts of the country. We remain optimistic about the contribution that we can make in "leaving no one behind" as we enter 2022, a year that marks the 120th Anniversary of PAHO.

The achievements presented in this report were possible thanks to the dedicated work of the Country Office staff, in collaboration with the Ministry of Health, partners, and donors. We will continue to work toward health equity as we move into a post-pandemic phase.







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