- Iimited coordination between the Department of Health, the Philippine Psychiatric Association, academia, and other agencies providing prevention, treatment, rehabilitation, disability support and social services, including housing, employment and welfare
- serious shortages of professional workers trained in mental health
- lack of medicines and other resources

• insufficient attention to demand-reduction and harmreduction strategies for alcohol and substance misuse and dependence.

#### Sources

Casimiro-Querubin, M. L. & Castro-Rodriguez, S. (2002) Beyond the Physical. The State of the Nation's Mental Health: The Philippine Report. Melbourne: Centre for International Mental Health. World Health Organization (2001) Atlas: Country Profiles on Mental Health Resources. Geneva: WHO.

#### COUNTRY PROFILE

# Mental health services in Bermuda

# David Price

Consultant Adult Psychiatrist at St Brendan's Hospital, Bermuda, email David.Price@bermudahospitals.bm

Bermuda comprises a group of small islands in the Atlantic Ocean, situated approximately 1000 km east of the USA. It is a self-governing crown dependency of the UK. It is the third richest country in the world, with average wages per head of US\$41 495 in 2000. Its economy is based on a flourishing offshore insurance industry and tourism.

#### Psychiatric services

Bermuda's health care comprises both private and public initiatives. Employees are required to obtain health insurance for themselves and their dependants. For those who are not insured, the government provides through the public system.

The island has two hospitals, King Edward VII Memorial Hospital, a general medical hospital, and a separate psychiatric unit, St Brendan's Hospital. The latter provides mental health care for the majority of the islanders and receives a budget of over US\$28 million per year.

### Human resources

St Brendan's Hospital employs three adult and one child and adolescent psychiatrist. Each adult psychiatrist takes on the responsibility for providing one specialist area of service. The majority of staff in the hospital are Bermudian, although, given the global shortage of suitably qualified mental health staff, Bermuda recruits actively for doctors, nurses and allied staff in jurisdictions such as the UK, Canada, Australia and the USA. The cultural diversity of the staff produces an interesting mix of perspectives and ideas about health care policy.

# Overview of services

Since the early 1980s, mental health policy within Bermuda has focused on making services more accessible, more community oriented and less stigmatised. The closure of two long-stay wards in the 1980s provided the momentum for the development of community mental health teams. Teams are multi-disciplinary; individual members case manage up to 50 patients. Bermuda's small size facilitates assertive outreach.

There is a housing shortage for people with severe mental illness. The high cost of real estate due to the expansion of the business sector makes accommodation costs prohibitive for those on a low income and finding cheaper accommodation, such as at the island's Salvation Hostel, can be difficult. Many individuals with severe mental health problems live with their families, despite the high level of burden this frequently places on carers.

There are 25 acute hospital beds, including 5 on a psychiatric intensive care unit. Shortage of beds is unusual and this reduces the pressure to discharge patients before recovery is complete. A small rehabilitation unit offers a comprehensive package of psychosocial interventions for patients with complex needs; it has a philosophy of engagement for up to 2 years.

Two learning disability wards remain within the hospital but a government initiative aims to provide one new group home each year and a community learning disability service.

## Consumers of mental health services

The population of Bermuda is some 65 000, approximately 60% Black and 40% White. The population is relatively wealthy and well educated.

Despite the turnover of expatriates employed in the business sector, the population is relatively static and this allows for an accurate and up-to-date case register of clients who use the service.

# Education and research

St Brendan's Hospital is currently accredited for training by the Royal College of Psychiatrists. This is important to

Shortage of beds is unusual and this reduces the pressure to discharge patients before recovery is complete. A small rehabilitation unit offers a comprehensive package of psychosocial interventions for patients with complex needs; it has a philosophy of engagement for up to 2 years.

the hospital, as it helps to maintain standards of care and benchmarks training against UK standards and practice.

A recent community survey commissioned by the hospital board highlighted the need to improve the awareness of mental health issues in Bermuda; a campaign to reduce stigma and provide education is under way.

The relative stability and small size of the population of Bermuda facilitate genetic and epidemiological studies into mental illness. In particular, there appears to be a strong line of schizophrenia and bipolar affective disorder among the St Davids islanders. Collaborative research projects are currently being explored. One study is currently looking at the effect of cannabis on the presentation of psychosis.

### Mental Health Act

The Mental Health Act is largely based on the English Act. There is an assessment order and a longer treatment order that lasts for up to 1 year. Two consultant psychiatrists make a recommendation to either a nearest relative or a mental welfare officer. Appeals are allowed and there is a tribunal which hears cases, presided over by a lawyer.

#### COUNTRY PROFILE

# Canadian psychiatry: a status report

# Nady el-Guebaly

Professor, Department of Psychiatry, University of Calgary, Canada, email nady.el-guebaly@calgaryhealthregion.ca; Past President, Canadian Psychiatric Association; President, International Society of Addiction Medicine

The delivery of health care in Canada is shaped by a number of variables – geography, legislation, federal structure, location and culture.

# A vast geography

At 10 million km<sup>2</sup>, Canada is the second largest country in the world but it is sparsely populated – it has only 32 million inhabitants. Canada would cover the whole of Europe and part of Asia but two-thirds of the population live within 300 km of the US border.

# A federally monitored Health Act

Since 1967, the country has embarked on the ambitious provision of 'medically necessary' health care to all its citizens based on five tenets – universality, comprehensiveness, accessibility, portability of coverage and non-profit public administration. These equally apply to mental and addiction disorders. Currently, the main problem is long waiting lists interfering with accessibility.

The Canadian Community Health Survey (CCHS) in 2002 reported that some 20% of Canadians personally experience some form of mental illness during their lifetime.

# The dynamics of provincial jurisdiction

Each of the governments of the ten provinces and three territories has the responsibility and control of health care within its own boundaries. The national congruence of service delivery remains remarkable.

#### Location

Canada's contiguity with the USA shapes the public debate concerning health care. On the one hand, national pride is readily expressed at the high standards of North

American care delivery, while training and publishing in the USA are highly valued; on the other hand, there is widespread public concern about the excesses of US-based managed care and the significant portion of that population without insurance. This results in a determined effort to learn from both US and European influences to create a uniquely Canadian blend (Rae-Grant, 2001).

# A cultural mosaic

Canada is a welcoming land of opportunity to a steady stream of immigrants and with a birth rate of 1.5 children per couple the country will continue to depend on migration for its sustenance. With two official languages, English and French, and many unofficial cultures, multiculturalism rather than a 'melting pot' policy is one of the prized social characteristics. The health care workforce reflects society's mosaic. The first inhabitants of this country, the First Nations, have not fared well so far and this is reflected in higher morbidity and mortality risks.

Canadians in general highly value their health care system, known as medicare (which is publicly financed but privately run) and public polls suggest that medicare is considered an essential ingredient of Canadian identity. There are concerns, however, about the capacity to sustain it (Romanow, 2002).

# Mental health policies and statistics

The Canadian Community Health Survey (CCHS) in 2002 reported that some 20% of Canadians personally experience some form of mental illness during their life-time (Health Canada, 2002). Eighty-six per cent of hospital admissions for mental illness are to general

Bulletin of the Board of International Affairs of the Royal College of Psychiatrists