

The Epidemiology of Mental Health Issues in the Caribbean

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Introduction

The Caribbean region consists of 26 countries and territories,¹⁴ and most countries in the region are classified as Small Island Developing States (SIDS) by the United Nations, with Haiti being classified as one of the least developed countries in the world (2, 3). This classification indicates a country's economic stability as measured by gross national income per capita (GNI) as well as its accomplishments in the area of human development. The situation in Haiti has serious implications when put in the context that 66% of the world's population living in the poorest countries accounts for 95% of the mortality due to disasters (4).

The disruptions in normal day-to-day activity caused by disasters are particularly burdensome and have extremely far-reaching repercussions for small nation states with limited resources for rebuilding and with entrenched social and political problems. Unfortunately, these factors are characteristic of many countries and territories of the Caribbean and make disaster and disaster mitigation complex issues to deal with. Furthermore, history has demonstrated that the Caribbean is highly vulnerable to disasters, both natural and human generated. Hurricanes, floods, earthquakes, volcanoes, droughts, and mass deaths due to illness or violence are some of the hazards that have affected the region.

Between 1970 and 2000, the Caribbean region recorded an average of 32.4 disasters per year, which caused a total of 226,000 fatalities or approximately 7,500 deaths per year (6). Significantly, earthquakes accounted for 53% of total mortality associated with disasters in the region (6). In light of current statistics of loss of life as a result of the 2010 earthquake in Haiti, these numbers seem less alarming as an aggregate loss over a 30-year period. Though the official count remains undetermined, Haitian authorities have recorded at least 230,000

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14. Anguilla, Antigua and Barbuda, Aruba, Bahamas, Barbados, British Virgin Islands, Cayman Islands, Cuba, Dominica, Dominican Republic, Grenada, Guadeloupe, Guyana, Haiti, Jamaica, Martinique, Montserrat, Netherlands Antilles, Puerto Rico, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, Turks and Caicos Islands and U. S. Virgin Islands.

(5). This number represents almost 3% of the nation's population. This is without doubt one of the highest death tolls in a modern disaster.

The impact of a disaster, whether human-generated or natural, on the mental health of any population is both vast and deep in its ramifications. Caribbean culture, social norms, and patterns of stress response are likely to contribute to differing reactions to disaster among the people of the region. Research has demonstrated that perceptions of stress, resilience, and coping in response to disasters vary among different cultural groups and this is evident from differences in mental health outcomes following disasters (7). The severe personal stress associated with disasters may result in the onset of new mental health problems or in the worsening of pre-existing ones. It is therefore important to have a profile of the Caribbean in terms of frequently encountered mental health issues, which are present on an ongoing basis. Information on the most commonly encountered psychiatric conditions is presented below.

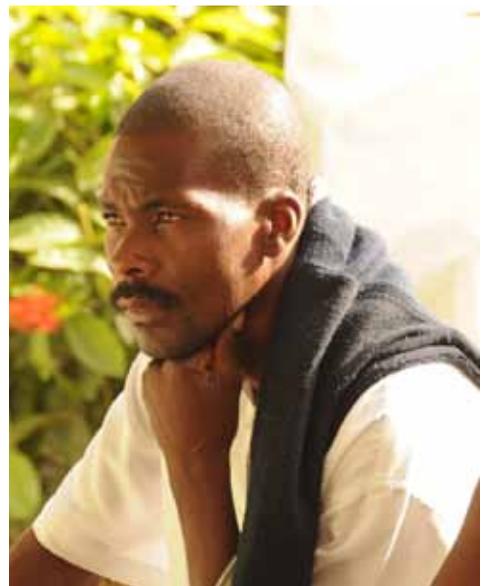
Psychiatric conditions

Psychotic disorders

These conditions are characterized by alterations in a person's perception of reality. This is manifested in the form of delusions (fixed, false beliefs out of keeping with one's social and cultural background), hallucinations (hearing, seeing, smelling, tasting, or feeling things which are not really there), difficulties in organizing and expressing thoughts, and displays of behavior that are unusual in the context of individual and cultural norms. The most long lasting of these disorders is schizophrenia, which has been shown to have an incidence (annual rate of the occurrence of new cases) of 2–3 per 10,000 persons in the general population. This rate has been fairly consistent across a number of Caribbean countries (Jamaica, Barbados, Trinidad and Tobago, and Suriname) (8-11). Rates are higher in very small islands, perhaps as a result of selective migration (persons with mental illness are less likely to emigrate and more likely to return home if living abroad). This is exemplified by the rate in Dominica, which has been calculated as 11.8/10,000 (12). In general, persons with psychiatric conditions are at risk for decompensation (decreased ability to carry on with activities of daily living) in the face of stressful circumstances. The severe stress associated with disasters can be expected to be associated with a worsening of features of mental illness, including psychotic symptoms.

Mood disorders

These conditions affect emotional experiences to the extent that a person may have prolonged periods of feeling sad with low interest, low energy, poor concentration, a sense of hopelessness,



and sometimes suicidal thoughts, which constitute depression. The opposite may also occur and individuals may experience unexplainable euphoria associated with increased energy, impulsiveness, and racing thoughts, which constitutes mania. Mania is part of a condition known as bipolar disorder, in which persons may have episodes of depression on some occasions and mania on others.

In a lifestyle survey in Jamaica, as many as one in five respondents between the ages of 15 and 74 years reported significant features of depression in the past month (13). Other evidence for a high rate of occurrence includes the finding that 25%–45% of all persons receiving treatment for physical illnesses in Trinidad and Tobago also have features of depression (14).

Data on bipolar disorder indicate an admission rate of 0.8 per 1,000 hospital admissions in Trinidad and Tobago and 12/100,000 in Jamaica (15, 16).

The low energy, loss of interest, and impaired concentration may reduce one's ability to react rapidly and appropriately in the face of an emergency. The stress of a disaster can also be expected to be associated with a worsening of depressive as well as bipolar symptoms.

Suicide

Suicide is associated with a psychiatric illness in 70% of cases, with depression being the most frequently occurring psychiatric diagnosis (60%). Rates vary across the Caribbean with 2.0–2.7/100,000 in Jamaica (17), 4.0/100,000 in Barbados (18) and 12.3/100,000 in Trinidad and Tobago (19). There appear to be cultural differences, with particularly high rates among persons of East Indian descent. Completed suicide (an attempt resulting in death) is more common in males, who tend to use more lethal methods than females. Suicidal behavior is often carried out with a sense of ambivalence and in an environment of frustration. The devastation, displacement, and hopelessness, which may occur in the aftermath of a disaster, may heighten the risk of suicide.

Dementia

Dementia is marked by memory impairment and difficulty with processing thoughts and information; it primarily affects older persons. As life expectancy continues to increase in the Caribbean, it can be expected that the prevalence of this condition will increase. Data from Cuba (20) indicate that roughly 10% of persons over the age of 65 suffer from dementia. The risk for dementia is increased with advanced age, poor education, and a positive family history. The impact of dementia is far-reaching and may cause both emotional and financial strain on caregivers. To have a disaster superimposed on such a situation could prove overwhelming.

Anxiety disorders

Anxiety disorders are conditions in which there are inner experiences of fear and tension as well as outward manifestations of anxiety (e.g., rapid heart rate, trembling) to the extent that they are excessive, distressing, or impair the ability of the affected individual to function.

As of July 2010, epidemiological data on this condition is lacking for the Caribbean region. However, the disruption and displacement caused by disasters can be expected to increase the propensity for anxiety disorders and reactions.

Persons with mental disorders as a vulnerable group

The stress and upheaval that invariably result from disasters increase not only the risk of the development of new mental disorders, but also the exacerbation of pre-existing ones. Persons with psychiatric illnesses are therefore a vulnerable group in the face of a disaster. Many community mental health services have psychiatric registers, which may assist with identifying persons at risk in order to prevent adverse mental health outcomes. Strategies such as ensuring continued access to medication and therapeutic and emotional support are crucial for achieving that goal (see Chapters 9 and 12).

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