

Bermuda



Bermuda is an Overseas Territory of the United Kingdom. The territory consists of more than 100 small islands in the Atlantic Ocean, 943 km from North Carolina in the United States of America. The total land area is 53 km², and the seven largest islands are connected by bridges. The government is a parliamentary system based on the Westminster model. The head of state is the monarch of the United Kingdom, who is represented by a governor. The capital is Hamilton, and the territory is divided into nine parishes plus two incorporated municipalities.

Bermuda is the oldest autonomous Overseas Territory of the United Kingdom. It is characterized by a high level of economic development, which was reflected in its per capita gross domestic product (GDP) of US\$ 86,875 in 2009. Between 2000 and 2008, real GDP increased 33%, but the worldwide recession caused per capita GDP to decline 6.3% between 2008 and 2009.

Tourism used to account for approximately 28% of GDP, but in the last decade there has been a shift toward international finance.

The population of Bermuda has a high level of health. During 2006–2010, the birth rate remained low and stable; there was only one maternal death; infant mortality declined steadily, reaching 1.2 deaths per 1,000 live births in 2009; and life expectancy at birth rose to 80.6 years in 2010.

MAIN ACHIEVEMENTS

HEALTH DETERMINANTS AND INEQUALITIES

Education is compulsory up to 17 years of age, and public schools are free. The literacy rate was 98.5% (98% for men and 99% for women) in 2006, and enrollment in primary school was 92% in 2010.

THE ENVIRONMENT AND HUMAN SECURITY

Access to drinking water and sanitation in Bermuda is universal. Nevertheless, by law, all private dwelling units and apartment complexes are required to collect and store rainwater in water tanks.

Since Bermuda has a limestone base, drinking water cannot be distributed through piped networks, and there is no centralized system for collecting residential wastewater. Thus, all dwellings are required to have deep cesspits, which are cleaned periodically by private companies.

Even though Bermuda was in the path of several Category 1 hurricanes—Hurricane Florence in September 2006, Hurricane Bill in August 2009, and Hurricane Igor in September 2010, as well as Tropical Storm Bertha in July 2008—no injuries or damage to key infrastructure were reported as a result of these events.

HEALTH CONDITIONS AND TRENDS

Between 2006 and 2010 there was only one maternal death. Coverage with prenatal care and births attended by

Selected basic indicators, Bermuda, 2006–2010.

Indicator	Value
Population 2010 (thousands)	64.3
Poverty rate (%)	...
Literacy rate (%) (2006)	98.5
Life expectancy at birth (years) (2010)	80.6
General mortality rate (per 1,000 population) (2009)	7.14
Infant mortality rate (per 1,000 live births) (2009)	1.2
Maternal mortality rate (per 100,000 live births) (2010)	0.0
Physicians per 1,000 population	...
Hospital beds per 1,000 population (2008)	6.7
DPT3 immunization coverage (%) (2009)	96.0
Births attended by trained personnel (%) (2008)	100.0

trained personnel are estimated at more than 99%. Between 2006 and 2009, the number of prenatal deaths remained steady, at an average of 2.5 per year.

The five leading causes of infant death over the 2006–2010 period were certain respiratory and cardiovascular conditions of the perinatal period (26%), disorders related to length of gestation and fetal growth (20%), sudden infant death syndrome (13%), congenital anomalies (13%), and maternal complications of pregnancy (7%).

The incidence of vaccine-preventable diseases is zero or very low. No confirmed cases of tetanus, neonatal tetanus, or diphtheria were reported during 2006–2010. Measles has not been reported since 1991, and there have been no cases of poliomyelitis for more than 25 years. However, during 2006–2010 there were two cases of mumps, two cases of rubella, and two cases of whooping cough; all were confirmed, and some involved travelers.

Between 2006 and 2010 there were five imported cases of malaria and four imported cases of dengue. Tuberculosis is not endemic in Bermuda. Also during the same period, there were eight imported smear-positive tuberculosis cases.

HEALTH POLICIES, THE HEALTH SYSTEM, AND SOCIAL PROTECTION

During fiscal year 2009, public and private spending on health was US\$ 557.7 million, which was 9.2% of the 2008 gross domestic product, equivalent to US\$ 8,661 per person. In 2009, public-sector expenditure on health came to 27.9% (US\$ 155.8 million) of all health expenditure

“Well Bermuda”: A Health Promotion Strategy

Launched in November 2006, the “Well Bermuda” health promotion strategy is conceived as a step toward increased intersectoral coordination. Its objective is to provide a unified vision and a set of targets for a healthier country. This national health promotion strategy focuses on both current problematic health issues and also areas in which public health is already producing positive results.

In this way, the strategy focuses on those areas in which the population’s good health must be ensured, both in areas where there has been progress and in those that still need work.

The strategy is organized into three main areas: healthy people, healthy families, and healthy communities. Targets, goals, and reference points have been identified for each of them. The intention is that, by building consensus around the priority areas and their corresponding objectives, detailed action plans can be developed for addressing each objective on a timely basis. To that end, the strategy does not include mechanisms for action; rather, it sets guidelines for the health promotion measures that are going to be taken.

and 14% (US\$ 1.1 billion) of total disbursements by the Government of Bermuda. Public funds were used to finance primary health care, health promotion, health administration, and operation of the Bermuda hospital system.

Private expenditure for health care rose to US\$ 401.9 million (72.1% of total spending in this area), of which 74% corresponded to health insurance expenditure. Household spending on health, such as health insurance premiums, copayments, fees paid to health care providers,

and other health expenditures in cash, came to US\$ 81.3 million (14.6% of all health expenditure).

In 2009, the Hospitals Board opened the Lamb-Foggo Urgent Care Center, with four rooms, for the treatment of diseases and mild injuries.

During 2006–2010, Bermuda had sufficient human resources to meet its health needs. The number of physicians increased during this period, as did the number of visiting specialized physicians.

KNOWLEDGE, TECHNOLOGY, AND INFORMATION

The Ministry of Health maintains a website that includes a guide to the health services available in the territory and that provides public information on such subjects as health promotion activities.

During 2006–2010, the Bermuda Hospitals Board Diabetes Centre participated in several international research projects, including an epidemiological evaluation of the reduction of diabetes using ramipril and rosiglitazone; a study of insulin resistance with slow-release trandolapril and verapamil; tests to study outcomes from initial interventions using insulin glargine; and testing for the Global Registry of Acute Coronary Events (GRACE).

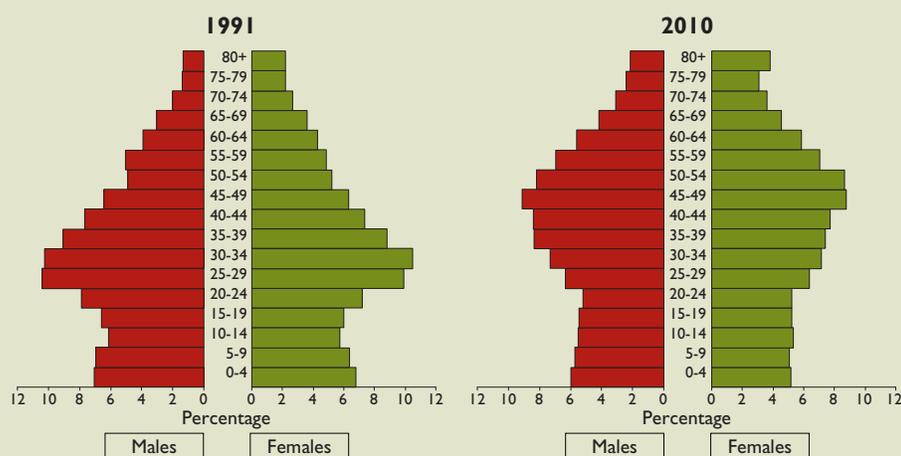
MAIN CHALLENGES AND PROSPECTS

In 2007, approximately 11% of all households earned less than the low-income threshold, which was US\$ 36,605 per year.

In 2009, Bermuda produced 11 tons of carbon emissions per capita, which is higher than levels produced by some industrialized nations. Spending on electric power is also very high. The vehicle density is estimated at 2,300 per square mile, and there are few incentives to use fuel-efficient cars.

Between 1982 and the end of 2010, a cumulative total of 733 cases of HIV infection had been recorded. At the end of 2010, the prevalence of HIV/AIDS was calculated at 0.46%, and the number of persons living with HIV/AIDS was 295.

Population structure, by age and sex, Bermuda, 1991 and 2010.



Cardiovascular diseases are the leading cause of death for both women and men in Bermuda, and with persons over 65 years of age suffering much higher rates. Between 2006 and 2008, 39% of all male deaths and 38% of those in women were due to these diseases. The main specific causes were ischemic heart disease and cerebrovascular and cardiovascular disease.

Cardiovascular diseases are the cause of 10% of all hospitalizations (9% in women and 12% in men), and they account for a large number of hospital days (surpassed only by mental and behavioral disorders). Malignant neoplasms also pose an important health challenge. Between 2006 and 2008, malignant neoplasms represented 23.0% of all deaths. In men, the malignant neoplasms that caused the largest number of deaths were those of the respiratory tract and intrathoracic organs, digestive system, and genital organs. For women, the malignant neoplasms that were the main causes of death were those of the digestive system, breast, and respiratory tract and intrathoracic organs.

The leading causes of death in Bermuda are associated with lifestyle-related risk factors such as a sedentary lifestyle and poor diet. There is particular concern about increased cases of obesity, diabetes, hypertension, and other cardiovascular risk factors. In light of this trend, the national health promotion strategy known as “Well Bermuda” was launched in 2006.

Since then, the Department of Health has collaborated with a broad range of government and community

entities to foster health promotion in Bermuda. The strategy addresses chronic, noncommunicable diseases and some other health problems, and it presents a vision for improving the health of the people of Bermuda, with clear targets and goals to be achieved as a community. In coordination with a group of public-health-related entities, measures are being adopted to successfully implement this concept through ongoing surveillance of the population’s health and the execution of coordinated interventions.

In 2009, there were 86.8 nurses available per 10,000 population. From a high of more than 800 registered nurses working in Bermuda in 1999, the number has declined significantly. It has been a challenge to retain nurses, which means that the number of countries from which nurses are hired has continued to expand, and the options for receiving nursing training in Bermuda have been increased.

Modernizing to be able to meet current needs is one of the health system’s challenges. Accordingly, in 2011 work began on the preparation of a background document for the long-awaited national health plan. Its objective is to take advantage of existing strengths, set new goals for the health system, lay the groundwork for the reforms needed in order to modernize the health sector, correct existing gaps, and develop a detailed plan for achieving a more equitable and sustainable health care system for Bermuda.