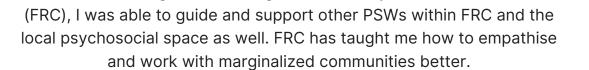


පවුල් පුනරුත්ථාපන කේන්දුය குடும்ப புனர்வாழ்வு நிலையம் FAMILY REHABILITATION CENTRE





Psychosocial Worker - FRC (Batticaloa)

With the knowledge and skills I gained at Family Rehabilitation Centre

FRC taught us the importance of being aware of the services existing within the districts. This is useful as some community members do not like to go for counselling due to various reasons. Because of the awareness FRC has given us at the GRLAC meetings, I was able to refer a client who had many issues to appropriate services within the district. I found this approach to be very useful. I see FRC as an organization that prioritizes maximizing the existing mechanisms and services within the area for the benefit of the community members.

Grassroot Level Action Committee Member - Jaffna District

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# **MESSAGE FROM CHAIRMAN**

The year 2018 /2019 was year of stabilization, strengthening and expansion. We were able to expand geographical regions of service provision, thematic areas of our work, the human resources and the use of social media.

We have continued our psychosocial support, capacity building and awareness programmes and completed the phase two of path of healing walk successfully. We were able to update few of the tools we have used and introduced new tools of measurement to measure our quality of work. The momentum gathered and the continuity was disturbed by the situational changes in the aftermath of Easter Sunday bomb disaster. We were able to respond this national disaster at its emergency phase as well as in the follow up phases. Our staff were key members of the team providing psychosocial support and assistances at district and local levels. at local levels in providing psychosocial support and assistances. The dedicated work of our staff in responding to this emergency has certainly improved the image of our organization and invited for national forums in relation to plan post-disaster psychosocial response. By using our reputation earned over the years for transparency and accountability we were provide essential medical equipment within a short period by collaborating with donors.

Provision of psychosocial services in the context of changing scenarios and everincreasing demands is not easy and it involves a team effort. Our organization is privileged to have an efficient team - board of directors, executive director, members of senior management committee and the regional staff. The dedicated staff ensure continuity our services at a higher level through their hard work and innovative thinking. The leadership given by our executive director, capable of blending patience and brevity appropriately helped our organization to navigate our work with the support of members of senior management committee amidst challenges. The board of directors with years of experiences in their respective field were there to provide their expertise despite their busy schedules and work commitments.

I take this opportunity to thank all who have helped us-government departments, nongovernmental organizations, donors, members of AGM, well-wishers and thus contributed to the growth and progress of our beneficiaries. I fervently hope that we have been able to fulfill the expectations of donors and the service needs of the country. Lastly but not the least I extend my gratitude to our beneficiaries who has been having faith on our services.

Dr.T. Gadambanathan Chairman, Board of Directors

# MESSAGE FROM EXECUTIVE DIRECTOR

The Family Rehabilitation Centre (FRC) is an organisation that takes pride in the work it accomplishes through holistic psychosocial service provision. Since its inception in 1992, FRC has helped rehabilitate communities through counselling services, increased awareness, and prevention of trauma/re-traumatisation. We attribute our success to our unwavering commitment to transparency and accountability to the communities we serve.

FRC provides psychosocial services in the Northern, North-Western, Western and Eastern Provinces of Sri Lanka. In 2019 we saw this presence grow, with another new centre in the Uva Province where we saw an increased demand for psychological support. FRC has also grown in staff size, which is no great feat given the challenges that were faced over the course of the year.

During times of crisis, FRC and its staff had managed to pull together and provide services where necessary, as was seen after the Easter Sunday attack. Besides providing the usual psychosocial services to marginalised communities, we were able to establish ourselves in the community as trusted professionals and were given the privilege of providing critical support during that time. FRC has shown great adaptability and flexibility, which I believe is one of our greatest strengths. We have extended our services to capacity building and provision of training, internally to staff, and externally to governmental stakeholders alike.

As in any organisation, development and sustainability is essential, our 2020 to 2025 strategic plan serves as a detailed road map for the organization. With decades of experience in the psychosocial space, we are confident that widening our scope of work will ensure continued services in the established areas while also taking steps to shed light on emerging issues that can and will impact communities negatively. Our holistic approach to care demands that we take prompt, necessary action as prevention is of utmost importance to us. As the executive director of FRC, I pledge to continue to do right by our clients, provide better programmes, and enhance capacitation on behalf of the communities we serve. The accomplishments over the past year and the work ahead, are solely dependent on the support and contributions of our donors, partners and dedicated staff. I am immensely grateful to those whose energy and support; financial and otherwise, sustain us. We could not have achieved this without you! I hope that the same support and commitment will be extended in the coming year.

"No one is useless in this world who lightens the burdens of another." - Charles Dickens

Lahiru Perera

# **EXECUTIVE SUMMARY**

In line with the organisation's mission and vision, the year 2019 has seen FRC maintain the provision of counselling and holistic services, capacity building of stakeholders and strengthening of communities. These services support the rehabilitation of trauma survivors through addressing and preventing further trauma. From a geographical context, FRC has grown. FRC opened a center in Monaragala on top of its already existing centres (Kurunegala, Tricomalee, Batticoloa Jaffna, Kilinochchi, Mannar, Mullaitivu, Vavuniya, and Colombo) in 2019. In addition to this, FRC branched out into creating awareness on Human Trafficking while also providing necessary support to its survivors, to assist their reintegration into society. This initiative is funded by the International Organization for Migration (IOM).

The dedicated FRC team continues to support communities and their immediate family members (IFM) affected by violence related trauma through the three core pillars; rehabilitation, prevention of trauma and retraumatisation of survivors and capacity building of stakeholders. Looking ahead, FRC hopes to expand into developing specialized therapeutic techniques for survivors of gender-based violence and extending services to other geographical areas.

With the success FRC has already witnessed, FRC will continue to have a presence in the Northern, North-Western, Western, Uva and Eastern Provinces of Sri Lanka. FRC will continue to address recovery, reconciliation, and implementation of mechanisms for accountability, while also aiming to improve the capacity of state officials engaged in service provision to trauma survivors. This will be accomplished through training, capacity building workshops and implementation of manuals for state and FRC service providers in Sri Lanka. As an institution, FRC hopes to gain development through resource and network strategies which will help FRC make strides in service provision.

# FRC VISION AND MISSION

#### MISSION:

To serve as one of the leading national organizations in rehabilitation of trauma survivors by engaging in counselling and holistic psychosocial services, and build capacity of relevant stakeholders to effectively address and prevent trauma in Sri Lanka.

## VISION:

Communities and systems strengthened to effectively address and prevent trauma and retraumatisation in Sri Lanka.

# **ACRONYMS KEY**

The following acronyms are used throughout this report. Please use this helpful key to best understand specific programmes, individuals, and staff titles throughout this report.

CV - Community Volunteer

FRC - Family Rehabilitation Centre

GRLAC - Grass Root Level Action Committee

GN - Grama Niladari

GND - Grama Niladari Division

DSD - Divisional Secretary Division

HRC - Human Rights Commission

IFM - Immediate Family Members

MHPSS - Mental Health and Psychosocial Support Services
 MoHIMS - Ministry of Health & Indigenous Medical Services

MOMH - Medical Officer Mental Health

MoSEWKH - Ministry of Social Empowerment, Welfare and Kandyan Heritage

MWCA - Ministry of Women & Child Affairs and Social Security

NIMH - National Institute of Mental Health

PCMHC - Primary Community Mental Health Centers

PDHS - Provincial Director Health Services

PHM - Public Health Midwives

RDHS - Regional Director Health Services

TS - Trauma Survivors

WDO - Women Development Officer

# **OUR STRATEGY**

Using the vision and broad framework, FRC is focusing its work on three specific spheres in the psychosocial field:

- 1. Rehabilitation for trauma survivors
- 2. Prevention of trauma and retraumatisation of trauma survivors
- 3. Capacity building for relevant stakeholders



## REHABILITATION

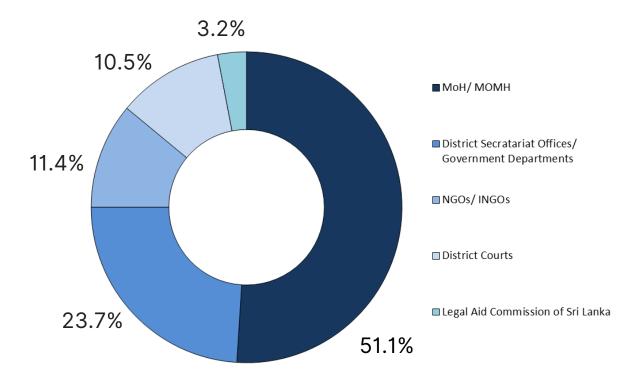
FRC works with survivors of violence related trauma, including systemic and structural violence and conflict-related trauma. Rehabilitation services are provided according to a holistic approach which includes counselling, medical, physiotherapy, livelihood, capacity building and referral services. FRC provides individual and group counselling within a counselling framework that comprises three stages of treatment: (1) Safety & Security, (2) Remembering & Sharing and finally (3) Reconnecting with the Community and Termination. Within this framework FRC uses culturally validated alternative methods, which increase resilience and integration of clients within the community.

#### **Our clients include:**

- 1. Widows and widowers of the war
- 2. Women and men with disabilities
- 3. State and non-state ex-combatants
- 4. Women Headed Households
- 5. Primary and Secondary Torture Survivors
- 6. Families of the disappeared or missing
- 7. Individuals who have experienced a death of a loved one due to violence
- 8. Survivors of Bomb blast or shelling
- 9. Survivors of domestic violence and sexual gender based violence
- 10. Immediate family members of the individuals mentioned above

## Reaching out to the target group

Potential clients are screened through a comprehensive screening process with the support of the Medical Officer Mental Health (MOMH), Physiotherapist and FRC's Psychosocial workers (PSWs). In addition, clients are referred to FRC through other government and non-governmental institutions as shown in the diagram.



## **PREVENTION**

Along with treating survivors of trauma, FRC works to increase awareness within communities on issues surrounding trauma. Evidence shows that an increased level of awareness will help individuals be more mindful of their actions and will help reduce the stigma associated with survivors of trauma. This awareness is aimed at two sectors, the Community and the State. At the community level, awareness is raised to minimise the stigmatization surrounding mental health, psychosocial issues and services for individuals. Within the State sector, FRC hopes to influence officials to help improve service provision, as well as, address negative practices that can lead to trauma and/or re-traumatisation.

#### Who we work with:

- 1. Community members in the operational areas
- 2. Stakeholders from the government and non government sectors





Path to Healing was a walk conducted by FRC in the Northern Province to raise awareness on mental health

## **CAPACITY BUILDING**

FRC believes that in order for effective service provision they must also equip the relevant parties and contributors with the knowledge and skills to be able to operate in an informed manner when working with potential survivors of trauma. This includes collaboration with government and non-government entities. In addition, FRC works with Teacher Counselors, Counselling Assistants and Primary Health Care Officials on topics such as providing competent psychosocial support, effective communication skills, how to more effectively counsel someone affected by violence related trauma, the differences in various types of trauma, psychological first aid, and self-care. FRC's capacity-building also includes facilitating training with other stakeholders, such as police, prison officials, and lawyers.

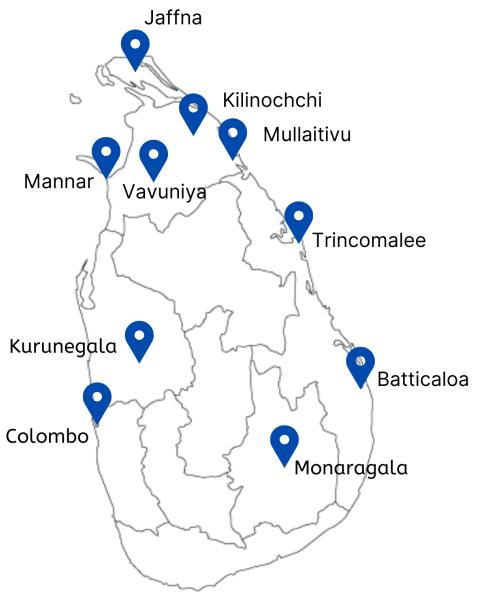
## **Collaborators and Participants:**

- 1. Psychosocial service providers
- 2. Other relevant stakeholders who serve the trauma survivors



A capacity building training on mental health and providing psychosocial support was conducted for Women Development Officers

# **OUR REACH**



18% of women experience domestic violence during pregnancy in Sri Lanka.

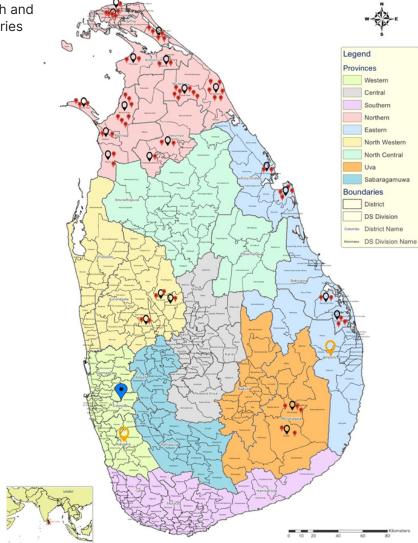
(Jayasuriya et al. 2011)

# **REALISING OUR VISION IN 2019**

Geographic coverage to reach and serve **13,788** direct beneficiaries

12 Districts 22 DSDs 65 GNDs

\*Expanded to Monaragala



DSD

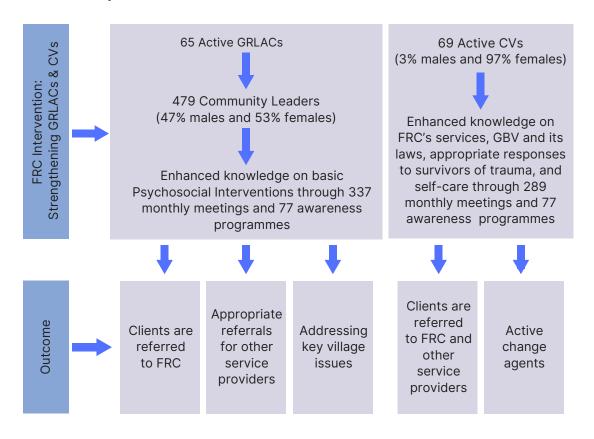
GND

Short Term Working Areas

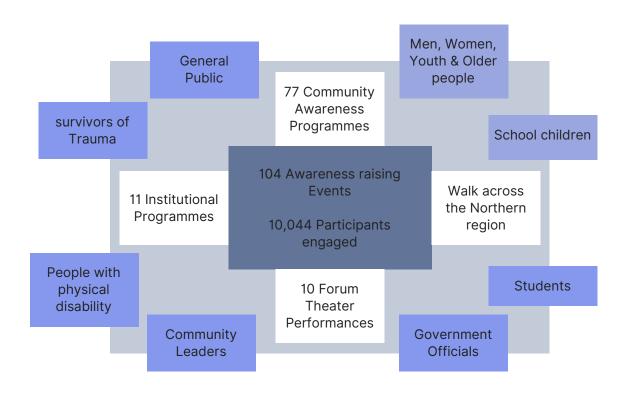
Head Office

## SUSTAINABILITY THROUGH STRENGTHENED COMMUNITIES

- Grass Root Level Action Committee (GRLAC) A group created by FRC that plays a supporting role in strengthening links and relationships within communities (usually includes community leaders).
- Community Volunteer (CV) FRC and GRLAC identified individuals that show interest in the work FRC does and have shown initiative to further FRCs work through community level assistance.



## RAISING AWARENESS AT REGIONAL AND NATIONAL LEVEL



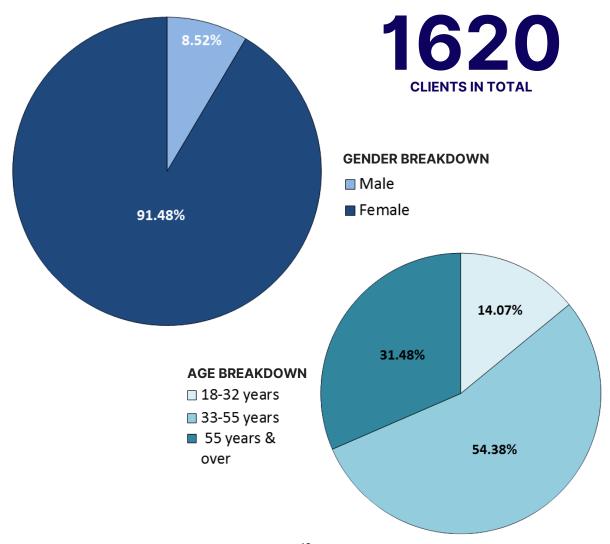
- Number of participants & events
- Types of events
- Audience/ stakeholders

Outcome: Greater number of individuals seeking support as a result of increased awareness of mental health and psychosocial issues.

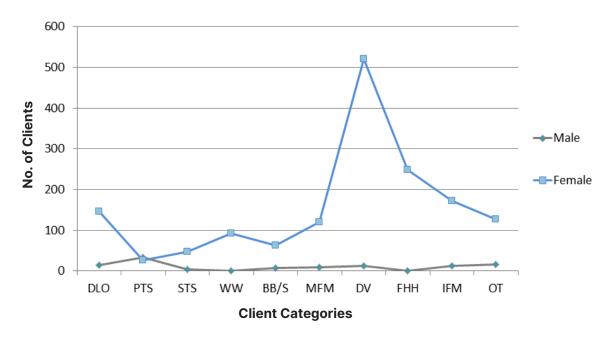
# **DIRECT PSYCHOSOCIAL SUPPORT SERVICES**

Identification	Key Activities	Output	Outcome	
	82 Client Detection Events	12,402 Individual Counselling Sessions (avg 7 sessions per person)	26% increase in adaptation & 40% reduction in distress scores	
0.475	60 Client Consultation		9 groups are active as self support groups even after service termination	
2,175 clients	Events	4,068 Medical Sessions		
	189 Clinical		Decrease in	
	Supervision Sessions		physiological complaints	
	142 Technical Committee Meetings	442 referrals	65% received relevant services	

## **COUNSELLING CLIENTS SERVED IN 2019**

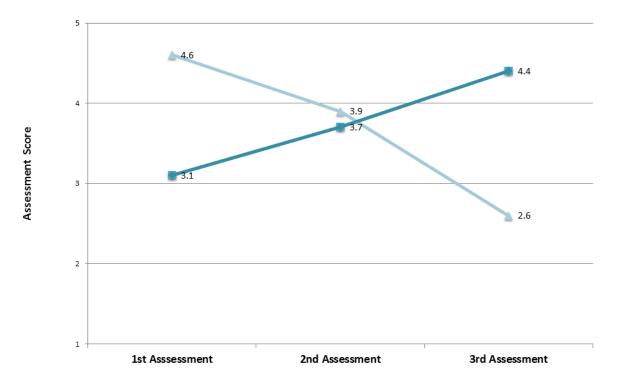


# FRC CLIENT CATEGORISATION



Types of Categories	Abbreviation
Death of a Loved One Primary Torture Survivor Secondary Torture Survivor War Widows/Widowers Bomb Blast/Shelling Missing Family Member Domestic Violence Female Headed Household Immediate Family Member Other Trauma	DLO PTS STS WW BB/S MFM DV FHH IFM OT

## **CLIENT WELL-BEING ANALYSIS**



Client well-being is monitored throughout the counselling period through assessments administered periodically. The assessments measure levels of adaptation and distress through a validated tool. The graph above shows the average scores for clients who have completed three assessments. It indicates increased levels of adaptation (26%) and simultaneously, reduced levels of distress (40%)from intake to termination of counselling services).

## LIVELIHOOD SUPPORT SERVICES

As part of the services we provide, FRC has also identified 90 clients through counselling to receive livelihood support grants and relevant skill trainings. These beneficiaries have demonstrated improved business skills and an increased level in confidence which have resulted in positive changes in their life.

#### STORIES OF HOPE

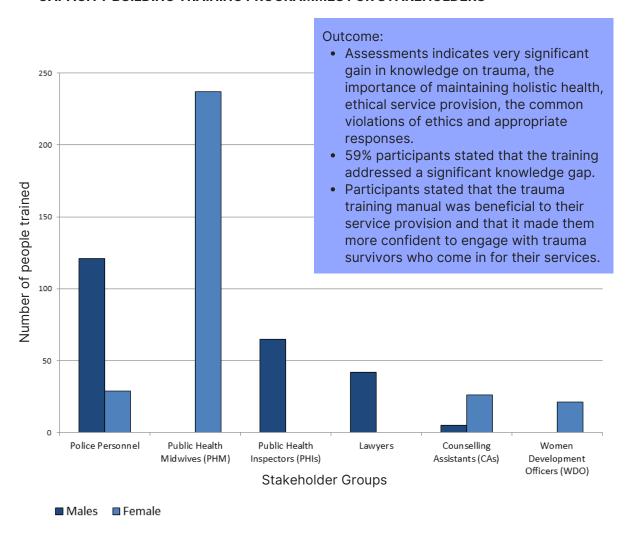
\* Kamini is pseudonym name for the client.

Kamini is a 54 years old female from the Northern Region. She was registered as an FRC client as she was feeling sad, hopeless and was weary of other people. Her husband had disappeared during the time of conflict and she still has no information about him. She has 3 children who are schooling and the family has no support other than her father who also struggles to fulfill his own needs. Due to her situation, she attended 13 counselling sessions and 7 medical sessions. The services helped her physical and mental health which gave her the confidence to engage and be reintegrated into the community.

In February 2019, she was terminated as an FRC client and ventured into small scale business activities. Kamini's circumstances made her a prime candidate to receive livelihood support from FRC. As a beneficiary, she was provided with inventory worth Rs. 45,000.00 to support her business. With the skills and support provided, she is now happily engaged in her work and earning around Rs. 3000.00 per day out of which Rs. 600.00 is her profit.

## **CAPACITY BUILDING**

#### CAPACITY BUILDING TRAINING PROGRAMMES FOR STAKEHOLDERS

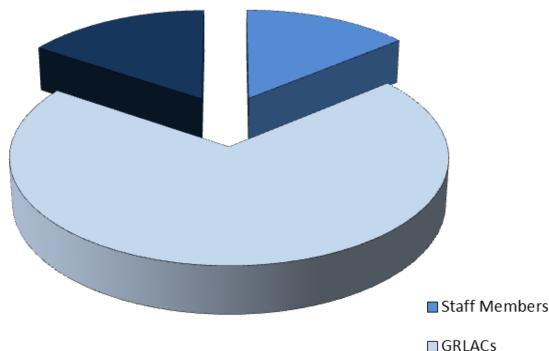


# CAPACITY BUILDING TRAINING PROGRAMMES FOR CVS AND GRLACS

69 CVs were strengthened through 10 training sessions and 2 regional training programmes

# CAPACITY BUILDING TRAINING PROGRAMMES FOR FRC STAFF

54 FRC staff members capacitated and engage in provision of direct psychosocial service provision



270 GRLAC members were trained through 4 training programmes

CVs

# **KEY ACHIEVEMENTS IN 2019**

- 13,788 individuals were directly benefited by FRC services and programmes
- Expanded services to Monaragala district
- FRC started counselling services in Colombo district
- Short term project activities were carried out and completed in Kaluthara and Ampara Districts
- Moved to 20 new GNDs in the existing locations
- FRC branched out to provide psychosocial services for survivors of human trafficking
- Implementation of the revised Client Intake Form (CIF). The CIF utilized the concept
  of 'adaptive functioning' as a model to determine the most effective treatments in
  the rehabilitation of trauma survivors.
- The ENACT(Enhancing Assessment of Common Therapeutic Factors in Sri Lanka) tool was validated and translated into local languages and will be disseminated for use in institutions in Sri Lanka
- Received an invitation from the Directorate of Mental Health to present at the Mental Health Review of 2019
- Conducted and promoted a social media campaign to promote mental health wellbeing



Executive Director at the Monaragala Centre on a feild visit.



An awareness programme on mental health and wellbeing conducted in Mannar

I felt lonely, isolated and had negative thoughts about society. Now I am more connected with society and associate with community members. I feel like I got another chance at life with the help of counselling.

\_\_\_\_

Client - Monaragala District

## **EASTER SUNDAY RESPONSE**

- The FRC Clinical team made themselves available at the JMO office to support family members who have arrived to identify the remains of their loved ones
- A Community of Practice Meeting was carried out to discuss the concept of "Do No Harm" in the context of providing services in an emergency
- The Clinical team, along with another Psychologist conducted group sessions for the staff of Kingsbury who experienced distress following the attacks
- The FRC team of Batticaloa joined in with the initiatives led by the RDHS in Batticaloa to support the survivors and the family members who faced the bomb-blast – 144 Home visits were conducted to support family members and survivors
- FRC supported a Mission by MSF to identify the needs of the Negombo and Batticaloa hospitals, and provide the materials that are required following the attacks





# **KEY EVENTS AND HIGHLIGHTS**

#### **ANNUAL GENERAL MEETING 2019**

The Annual General Meeting for the year 2019 was held at the FRC Head Office.







### MARKING THE UN INTERNATIONAL DAY IN SUPPORT OF VICTIMS OF TORTURE

- FRC, together with the Human Rights Commission of Sri Lanka (HRCSL) commemorated the International Day in Support of Victims of Torture on the 26th of June at the Kaluthara Police Training Centre. The HRCSL conducted a full day event with about 800 police students in their third year of police training. FRC participated in a panel discussion and provided relevant information on the psychosocial impact on torture.
- Conversely, FRC was featured in an article on Daily News on the 26th of June 2019, related to the "International Day in Support of Victims of Torture".
- In Jaffna, FRC handed out books on dealing with torture at a discussion with police officials on the 29th of June 2019. The event was hosted by the Human Rights Commission of Sri Lanka.

#### COMMEMORATING ANTI-TRAFFICKING DAY ON THE 30TH JULY 2019

An awareness programme was conducted in Vavuniya to honour the international day against trafficking in persons. There were 46 Community Members in attendance. The programme covered Human Trafficking and introduced a hotline for reporting instances of Human trafficking as well.





#### **EMOTIONAL FREEDOM TECHNIQUES WORKSHOP**

A workshop on Emotional Freedom Techniques took place at the International Centre for Ethnic Studies (ICES) Auditorium on the 15th of August 2019. Mr. Tuan lyne, a Member of FRC, conducted the workshop to demonstrate the effectiveness of EFT a useful therapeutic technique in the psychosocial sector.







#### CARE FOR CAREGIVERS PROGRAMME

FRC's annual Care for Care Givers outing took place in early December 2019 at the National Holiday Resort, Nuwara Eliya. There were 38 attendees (from all 10 FRC centres) in total. The three day excursion included numerous activities such as a pleasant stroll around Lake Gregory, a visit to the Pedro Tea Estate and Factory and the Sen Horti Strawberry Farm, an afternoon of games, and on the last night, a BBQ and Karaoke night.







## AWARD OF APPRECIATION FOR THE CONTRIBUTION OF PSYCHOSOCIAL WORK

The Awarding Ceremony was organised by the District Secretariat of Batticaloa to appreciate the members of the Psychosocial Forum for their active involvement, in the work carried out by the Regional Director of Health Services Office, in the aftermath of the Easter Sunday attack in the district.



#### REGIONAL REVIEW FOR THE NORTHERN REGION

The Regional Review for the Northern Province for the year 2019 was held to review the programmatic activities and services provided by FRC during the year and the impact of these services on the communities in need.







### THE ASIA FOUNDATION'S OUTSTANDING PERFORMANCE AWARD

Through an Outstanding Performance Award organized by The Asia Foundation, Anagi Gunasekara (Clinical Psychologist) and Nithila Theivendran (PSW) went on an exposure visit to Timor Leste to learn and exchange best practices in MHPSS.





#### **PATH TO HEALING WALK - PHASE II**

The second phase of the walk titled "Path to Healing – Phase II" was held from the 21st to 26th of February in 2019. The second phase of the walk took place from the district of Vavuniya to the district of Mullaitivu in the NP of Sri Lanka. The objective of the walk was to create awareness on mental health and to educate the communities about the relevant services available within the region.



I feel happy, proud and satisfied when I see the positive impact and hear the constructive feedback from terminated clients who have attended counselling services. This motivates me to make bigger contributions to needy people.

Psychosocial Workers - FRC (Mannar)

## PROJECTS CONCLUDED

Programme name: Provision of Livelihood as an integral part of psychosocial

healing for people affected by conflict.

Funded by: Neelan Tiruchelvam Trust (NTT)

Project description: This project was implemented in the five districts in the Northern

Region, working to bring psychosocial support and livelihood

services to people affected by conflict

Strategic aim: Promoting socio-economic empowerment in post war rebuilding

and rehabilitation initiatives

Strategic Approaches: • Psychosocial and mental health interventions

Strengthening Capacities of Community Leaders

• Provision of Livelihood Support as an Integral Part of

Psychosocial Healing and skill development

Key Achievements:

• 90 individuals received grant to enhance or start an income generating activity.

 The selected grant recipients were capacitated on preparing a Business Plan, maintaining a livestock and book keeping and

provided with book keeping materials.

 Grant recipients engaging in livelihood activities have displayed signs of reduction of distress as result of engaging in a livelihood activity which enables them their financial contribution to family and acceptance from family and community. They have also displayed more confidence in interacting with others. Programme name: **Promoting shared values, shared spaces and building local** capacities for dispute resolution

Funded by: The Asia Foundation (TAF)

Project description: This project was implemented in Mannar, Vavuniya, Trincomalee, Ampara, Kalutara, and Kurunegala districts, working to create conducive space for marginalized groups to come forward to share stories and to build the shared capacities and resources that would

at a local level.

Strategic aim: Promoting Shared Values, Shared Spaces and Building Local

Capacities for Dispute Resolution

Strategic Approaches: • Psychosocial sensitive story telling sessions

Develop grassroots toolkit for practitioners and organizations
 involved in T. I world

be essential to address conflict and build credible TJ mechanisms.

involved in TJ work

Key Achievements:

• 388 sessions were conducted with 168 elders (45 males and 123 females) in all six locations. As a result of these sessions a total of 110 stories were obtained.

- The group sharing process was designed around the themes emerged from the individual stories as identified through the Grassroots Toolkit and 31 groups have been formed to create a group dialogue.
- A toolkit has been developed for practitioners and organizations engaged in TJ work in Sri Lanka serving as a set of guidelines of how to engage people in storytelling and memoralization, through the use of group meetings with elder Sri Lankans, in a psychosocially sensitive manner.
- The FRC Project Officers/Psychosocial Workers ware trained on the toolkit which acted as a guide for the group sessions.

## **CURRENT PROJECTS**

Programme name: Victims of Trauma Treatment Programme Modification (VTTPM)

Funded by: The Asia Foundation (TAF)

Project description: This project is implemented in Mullaitivu, Vavuniya, Mannar and

Kurunegala districts, working to enhance the overall well-being and resilience of individuals, families and communities affected by

conflict through holistic rehabilitation services and care.

Strategic aim: Enhance the overall wellbeing and resilience of individuals, families

and communities affected by conflict through holistic rehabilitation

services and care

Strategic Approaches: • Enhanced mental health and psychosocial support services for

vulnerable populations

Strengthening MHPSS service outcomes

Building capacity to monitor and evaluate service delivery

Key Achievements:

 459 survivors of trauma and their immediate family members (IFM) are provided with counselling, medical support and physiotherapy services.

- Strengthened the capacities of 47 existing and new FRC staff and 5 CVs through 04 training programmes on specialised health and psychosocial assessment and intervention for those affected by trauma.
- FRC (along with TAF and external consultants) revised the implementation methodology for CIF to include propose changes including of new Client categories.
- Explored the organizational development and sustainability plan with the support of the foundation.

Programme name: Rehabilitation services for people affected by trauma

Funded by: European Union (EU)

Project description: This project is implemented in the Northern Region; contribute to the restoration of individual, family and community well-being by

reducing the vulnerabilities as well as the residual & on-going trauma

among communities in the Northern Province of Sri Lanka

Strategic aim: Restoration and increase of individual, family & community wellbeing

Strategic Approaches: • Psychosocial and mental health interventions

 Strengthening capacity of Community Volunteers(CV) & Grass Root Level Action Committees (GRLAC)

· Strengthening Psychosocial Foras

Strengthening capacity of government and NGO key stakeholders

Conduct Forum Theatre Performances

 Strengthening Champions and Mobiliser groups to take ownership of social change in their community

Key Achievements:

1,031 direct psychosocial service receivers.

 Path to Healing Walk (PHASE II) was carried out as a prevention based initiative.

10 Forum Theatre Performances were conducted in 10 GNDs.

 A one month Social Media Campaign was carried out and more than 60 posts were shared on mental health wellbeing and gender based violence.

 5 short video series called "One Minute for Mental Health" are produced. 1 video clip covers about GBV and it has reached to 19,817 viewers.

• Identified and capacitated 117 Champion and Mobilisers to conduct social change projects within their villages.

• Development of a Trauma Training Manual and carrying out stakeholder training programmes.

Programme name: INcreasing and Improving access to Trauma-Informed care,
Aiding efforts Towards rEconciliation

Funded by: The Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ)

Project description: This project is implemented in Batticaloa and Trincomalee districts; working to improve the availability and accessibility of psychosocial services and support to people affected by trauma in

two districts and enhance the effectiveness of psycho-social practitioners at the national level.

Strategic aim: To improve the availability and accessibility of psycho-social

services and support to people affected by trauma and enhance the effectiveness of psycho-social practitioners at the national

level

Strategic Approaches: • Psychosocial and mental health interventions

Research to measure Therapist Competences

• Revision of ENACT Tool and pilot with students /therapists

Key Achievements: • The ENACT tool was validated and translated into local languages.

 Community Outreach through establishment of 11 GRLACs, recruitment of 8 CVs and 8 awareness programmes.

 Provide Psycho-social support services to 296 Survivors of Trauma. Programme name: Strengthening Counter Trafficking Efforts (SCOUT) in Sri Lanka

Funded by: International Organization for Migration (IOM)

Project description: This project is implemented in Vavuniya district, working to

effectively contribute to combat trafficking in persons (TIP) in Sri Lanka through the strengthened collaborative efforts of all

stakeholders.

Strategic aim: To empower civil society organizations (including the NGOs and

the CBOs) to support Government efforts to address trafficking in

persons (TIP) at local levels.

Strategic Approaches: • Trainers (TOT) programme

Workshops for local government officers

Awareness programmes

• Discussion Forums and regular discussions

Public information campaign

· Identify and refer Victims of Trafficking

Key Achievements:

 FRC key staff members from Colombo, Vavuniya and Jaffna were trained as Training of Trainers (ToTs) on Human Trafficking.

 Trained Government Officers are organizing and conducting awareness sessions in community level.

• Publicized a proper referral system for Victim of Trafficking.

• Enhanced Police officers knowledge to legally move cases of trafficking victims.

 Capacitation of Government Officers and Community Leaders on how to identify trafficking victims and refer victims correctly where necessary. Programme name: Rehabilitation Services for People Affected By Violence Related
Trauma

Funded by: Global Communities via USAID

Project description: This project is implemented in Trincomalee and Monaragala

districts, working to contribute to the restoration of individual, family and community wellbeing through the provision of psychosocial care for survivors of violence related trauma caused by conflict and/or gender-based violence, and the promotion of active participation of community members and stakeholders in

reconciliation.

Strategic aim: Contribute to the restoration of individual, family and community

wellbeing

Strategic Approaches: • Rehabilitation support inclusive of counselling, physiotherapy and basic medical consultation

 Capacity development and training programmes for Community Based Organizations (CBOs), Psychosocial Service Providers, Government Officials (GOs) and, Developmental

Staff

Key Achievements:

• 576 direct psychosocial support service receivers.

• 775 community members are engaged and strengthened to participate in the process of psychosocial rehabilitation.

 FRC staff members , CVs and GRLAC members are strengthened.

## CHALLENGES FACED AND MEANS OF COPING

#### LIFE EXPERIENCE THROUGH AN ELDER'S PERSPECTIVE

\* Names have been changed to protect identities.

Janaki\* from Mannar is a 66 year old mother who had gone through a great deal of hardship as a child. She and her mother were constantly hit by her father who came home drunk. She also suffered through the long conflict, being displaced often, even walking all the way to Mullivaikkal from Pallimunai, and witnessing death while trying to ensure the safety of her family members. Despite being protective of her children, her 20 year old son went missing amidst this crisis and she went on to do funeral rituals (despite not believing the son to be dead). Despite her own personal battles, she reached out to help people in several ways including providing people with rice and necessities. She prays that another war will never happen again and it is in our hands to make the country a peaceful place to live in.

Kumari\* is a mother of three. She has lived quite a happy childhood and the first few years of her married life had also been happy ones. Breifly after, her husband started falling ill frequently and was hospitalized for a long period of time. She started travelling from Kalutara to Colombo and back again daily to visit her husband who had been hospitalized in a Colombo hospital. She sold all her jewellery to cover the expenses for her husband's medicine and during this time she and her children went through a lot of financial difficulties. The advice that she gives to the younger generations is that everybody should make it a point to save money for their future. She also suggests that nobody should expect anything from their children as every grown up child has to deal with their own troubles. She is ill at the moment and according to her she lives with whatever help her children can provide.



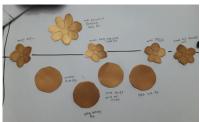


#### LIFE EXPERIENCE THROUGH AN ELDER'S PERSPECTIVE

The elder group reflected on the impact of war and how the loss can never be recovered. They assert that if there were good employment opportunities and people were guided in the right direction, this war would not have happened. During the war, they shared that doing odd jobs had helped them survive instead of only solely depending on the government allocated resources. Also, the relationships they had maintained with their previous employers had reaped many benefits such as providing them with resources and job opportunities. They advice the youth to eat meals together with their family and give care and affection to people. They insist that the relationships that they build will help them when needed.

Another group of elders encourage people of all ethnicities to live together without rivalry and be role model for the next generation. People of all ethnicities should participate in all religious events to promote unity. The urge the Government should collaborate with the communities to resolve issues and distribute resources/aid equally regardless of ethnicity or race. They insist that people should punish those who create violence and also educate children on the impact of this violence. Their message to parents is to support elders when they are sharing their learning to the youth instead of taking offense that the elders are telling off their children. Also, they advise the youth to be independent.







#### LIFE EXPERIENCES

\* Names have been changed to protect identities.

Thamilini\* (35yrs), residing in Mullaitivu, was present amongst the audience when FRC conducted an orientation programme in her village and identified that FRC's services might help. After contacting FRC's Community Volunteer, she attended the Client Detection Event and was registered for counselling, medical and physiotherapy services. She has lost an arm and complained of constant headaches, dizziness, chest pains, backache and had fear, sadness, difficulty in making decisions, sleeping problems and uncertainty of her future.

At the beginning of her counselling process, a home-visit was conducted, and it was observed that she lives with her father in a small house that is not surrounded by fences, making her feel uneasy on the lack of security.

Through the sessions, she revealed that she was forcibly recruited into a paramilitary group which cost Thamilini her arm during a shelling attack. After the conflict, she would get frustrated over the difficulties in doing things that once was easy, and this frustration would worsen when someone tries to help her carry things. She also would get annoyed by the sympathetic looks cast over her by her community as she walks past which she interprets as pity for her being 35, disabled and an unmarried woman. She is also angered that some people have used her name to attain benefits from aid projects.

Furthermore, as she had complained of sleeping problems, which were monitored. It was identified that she had difficulty in remaining asleep and would sit in the hall contemplating the uncertainty of her future. Therefore, a psychoeducation on sleep including the impact of poor sleep and sleep hygiene techniques was provided. She was also taught a simple breathing technique, for her to feel relaxed and was encouraged to do this before she sleeps. As she feels that she is incapable of doing things, a discussion was held on identifying activities that she would enjoy such as gardening and raising chickens and goats.

#### LIFE EXPERIENCES

Cont.

By the time her twelve counselling sessions drew to an end, she had become aware of the importance of interacting with the community and would sometimes pay a visit to some of them when she has the time and this has made her feel more connected to the community.

Whilst the counselling sessions at FRC had been going on, she also attended the Case Consultation Events at FRC that involve monthly medical and physiotherapy sessions for her somatic problems. She was referred to a hospital to undergo a procedure to acquire a prosthetic arm.

After termination, a follow up visit to Thamilini's house was conducted, where it was observed that she appears to be happy and relaxed and has begun raising chickens and goats. She also happily revealed that she has got married to a man who is caring and supportive when it comes to doing chores.

\* Names have been changed to protect identities.

Komaleshwary\* (60yrs) from Vavuniya, is a single mother of three young children. Her husband passed away due to an illness in 1991 when her youngest son was only 5 years old.FRC conducted a Community Awareness Programme in her village where she was able to identify that FRC's services may help her. At the assessment it was identified that she was feeling sad, irritated and angry towards her missing son, trouble sleeping and suffering from headaches and body aches. Thus, she was registered for counselling and medical sessions at FRC.

During counselling, she revealed that her 18 year old son had left to join a paramilitary group (PMG) and that she struggled to locate him. Once she found out where he was residing, he revealed that he had gone to join them only because he was afraid that they would capture his elder brothers. Her search for him began again when he didn't return with the other combatants. She believes that he is alive but lost.

#### LIFE EXPERIENCES

Cont.

Before drawing out a treatment plan, a home-visit was conducted to understand the dynamics in her environment and incorporate those observations into the plan. The PSW observed that her house is barely maintained and that she rarely communicates with her neighbors. Through the Client Intake Form assessment it was identified that she has feelings of sadness and anger towards her missing son, sleep problems and low self care.

She reasons that her anger towards her missing son is due to his decision to join the PMG without confiding in her. Moreover, when she spoke about her other sons, she acknowledged that she has been very distant with them despite their many attempts to care for her. Her missing son would mostly stay at home and was very attentive towards her and now that he is gone missing, she feels both angry and sad of what happened and these feelings are usually displaced on the other sons and her neighbors.

As the counselling process began, she has made attempts to repair the strained relationship by visiting their homes often; spending time with their respective families and by letting them take care of her. In addition to psychoeducation on the impact of self-care, activities such as combing her hair often, eating and sleeping on time and putting more effort into dressing up were explored. Moreover, education on sleep was provided including sleep hygiene techniques and a simple breathing exercise that she could do before going to bed.

Towards the end of the counselling sessions, Komaleshwary's sleep had improved. She was found to be visibly relaxed having improved her relationships with her sons. When a follow up visit was done, the PSW found her appearance well maintained including the house with a tended garden surrounding. Komaleshwary acknowledges that her missing son would want her to be healthy with a well kept appearance when he returns home.

More than 60 percent of married women in the country experienced domestic violence.

(AHRC, 2010)

## INTERNSHIP PROGRAMMES

Since 2015, FRC has been opening its doors to students doing masters in International Disaster Psychology at the University of Denver, Colorado. These students are equipped with skills in clinical psychology. In 2019, Charles Floyd and Susan Mertz spent approximately two and half months working with FRC staff, and learning about psychosocial service provision in the Sri Lankan Context.





Adelina Hess, an International Student and Emma Fernando, a student from University of Manitoba, Canada joined FRC as Interns and learned about FRC programmes as well as the Monitoring and Evaluation process of FRC.

## STRATEGIES FOR FUTURE GROWTH

#### **REHABILITATION**

FRCs strengths lie firmly in its 28 years' of experience supporting trauma survivors which has cultivated a strong and stable credibility in the rehabilitation space. Support mechanisms are delivered through a wellbeing approach that has been adopted in collaboration with the MoHNIM, helping to provide physiotherapy and basic medical services, which are offered to all clients.

FRC will continue its counseling services regular assessments and follow-up, while also maintaining its established method of identifying communities in need of MHPSS services.

FRC has identified the following areas for future growth:

- Develop specialised therapeutic techniques for survivors of GBV.
- Expand scope of work within the counselling framework to serve more clients.
- Expand services to other geographical areas.

#### **PREVENTION**

FRC will continue to advocate for prevention of trauma and re-victimization of trauma survivors through work at two levels, the Community and the State by raising awareness an improving the overall response to trauma-related issues within the country. This work will continue in order to facilitate an increase in communities appropriately identifying and working with trauma-related issues while also actively attempting to curtail practices that may lead to trauma.

- Utilize unique engagement activities for community members.
- Create and implement relevant trainings for service providers (i.e. MoMHs, lawyers, midwives, police, etc.) on trauma and prevention.

#### **CAPACITY-BUILDING**

FRC engages in building capacity of stakeholders to prevent torture, trauma and revictimizing of trauma survivors through increasing knowledge and methodologies of trauma counseling, stress management, and psychosocial work. FRC aids many stakeholders within this sector (i.e. MoMHs, Primary Health Care Officials, Lawyers, Police and Prison Officials, ect.) by implementing and facilitating trainings, assessment tools, and evaluations.

FRC continues to progress in its capacity-building abilities, and has established the following for future growth:

- Facilitate development of assessment tools and provide training on tools for counsellors of government and non-government institutions
- Develop an appropriate data management system together with governmental and nongovernment institutions

#### INSTITUTIONAL DEVELOPMENT

Following a systematic review of the programmes and the scope of work, FRC developed the institutional development plan for 2020-2025, aimed at better delivering the three programme areas (rehabilitation, prevention, and capacity-building) over the coming years.

FRC is continuing to implement a resource and networking strategy for the future, which is outlined below.

#### Resource Strategy

- Invest in in-house proposal development capacity and implementation
- Create funding pipeline management system
- Revisit and implement sustainability strategy

#### **Networking Strategy**

- Increase participation at regional, national and international conferences related to mental health, mental health policy and the National Action Plan for Human Rights
- Continued Networking with academic institutions to aid in the implementation of new trends in the field

## **DONORS AND PARTNERS**

#### **DONORS**

- · The Asia Foundation
- European Union
- Neelan Tiruchelvam Trust
- Global Communities Sri Lanka
- The Deutsche Gesellschaft für Internationale Zusammenarbeit
- The International Organization for Migration

#### **PARTNERSHIP**

Notably, FRC implements programmes in partnership with significant support from:

- Consortium of Humanitarian Agencies
- · District and Base Hospitals
- District and Divisional Secretariats
- District NGO Consortiums
- Good Practice Group
- · Human Rights Commission
- International Committee of the Red Cross
- · International Rehabilitation Council for Torture Victims
- Legal Aid Commission
- Ministry of Health & Indigenous Medical Services
- Ministry of Law and Order & Prison Reforms
- · Ministry of Social Empowerment, Welfare and Kandyan Heritage
- · Ministry of Women and Child Affairs
- Mental Health Psycho Social group
- · National Child Protection Authority
- · National Institute of Mental Health
- National Universities
- Northern Provincial Council
- · Psychosocial Forums
- · Right to Life
- Samutthana
- Sarvodaya
- United Nations Population Fund
- · University of Denver

# INSTITUTIONAL DEVELOPMENT INITIATIVES & NETWORKING EVENTS FOR 2019

- Enhanced collaboration and networking with the MHPSS group and Good Practice Group of Sri Lanka
- Established a Technical Advisory Committee and engaged facilitating meetings on different topics related to MHPSS
- Continued engagement with psychosocial fora in the Northern region as a part of FRC's initiatives
- Contributed to the recruitment of Family Support Officers for the OMP by the FRC's Clinical Psychologist, and discussions about possibilities of FRC providing Clinical Supervision
- Staff attended multiple trainings workshops conducted by donors and partners over the year which enhanced skills in areas of project management and digital documentation etc.
- Developed an organisational sustainability plan under the guidance of a consultant who conducted a feasibility study.
- · Continued member of the GBV forum



Through FRC I have come to see that the world as I pictured or imagined in my head is vastly different to the actual reality that people face daily. This new perspective has really helped me reframe my thinking.

Field Officer - FRC (Monaragala)

## STRUCTURE, GOVERNANCE & MANAGEMENT

FRC is managed by a Board of Directors comprising 8 members who are responsible for its functions. The Board of Directors serves as the organisation's main policy making body and is responsible for its overall governance. It also determines all of FRC's functions including long term strategic plans; the budgetary and financial decisions; as well as the directions of programmes. The Honorary Chairman of the Board is responsible for the management, development, and effective performance of the Board of Directors and provides leadership in all aspects of work. Additionally, the board members support fundraising as well as the monitoring of the integrity of FRC's internal controls, procedures, and management information systems.

- Dr. T. Gadambanathan Chairman FRC (Consultant Psychiatrist, Teaching Hospital, Batticaloa)
- Dr. Upul Ajith Kumara Tennakoon Chief Consultant Judicial Medical Officer
- Ms. Shikanthini Varma Attanayake -Company Director
- Ms. Manouri Kokila Muttetuwegama Attorney-at-Law
- Dr. C.S.Nachinarkinian Medical Doctor
- Ms. Dilkie Liyanage Fernando Finance Consultant
- Prof. Sivagurunathan Sivayogan Emeritus Professor
- Dr. Visvanathar Jeganathan Medical Doctor Former Director General of MoH

In addition to the Board, there are 5 FRC Members who are professionals and experts in different fields. Their key function is to appoint the Board of Directors, approve financial records such as end of year accounts, balance sheets, and reports by the directors and auditors. These formalities are adhered to and conducted once a year at the Annual General Meeting.

- Ms. Shanti Arulampalam
- Mr. Tuan lyne
- Mr. Sunil Bastian
- Ms. Indulekha Karunaratne
- · Dr. Palitha Bandara

# STRUCTURE, GOVERNANCE & MANAGEMENT

The Senior Management Committee (SMC) ensures the proper strategic direction of the organisation. Through good governance practices, motivation and financial diligence, it works towards enabling the organisation to reach the highest levels of excellence. It is also responsible for introducing the processes of cost reduction, put in place new policies and procedures, including making necessary decisions on Human Resource matters. The SMC is chaired by the Executive Director.

- Mr. Lahiru Perera Executive Director (Chair Person)
- Ms. Samanthi Perera Finance & Admin Manager
- Ms. Sathiyabama Sathivel Programme Manager
- Ms. Niranjala Somasundaram Quality and Learning Manager
- Ms. Anagi Sarala Gunasekera Clinical Psychologist
- Ms. Harithra Chandrasehar Project Coordinator/ psychologist
- Mr. Emilianspillai Regional Programme Coordinator
- Mr. Dinesh Chandru Regional Programme Coordinator
- Mr. Shawkky Hakkani Regional Programme Coordinator

## **REGIONAL STAFF**

#### Kilinochchi

Mr. S. Emilianspillai

Mr. Dinesh Chandru

Mrs. K. Sayanthini

Mrs. Sherile Pamila

Mr. G. Jesu Jujeniyan

Ms. M. Easwarapriya

Ms. Jasvika Varatharasa

Mr. S. Uthayakanthan

Ms. K. Rishanthiny

Mr. Kamalathas K J

Ms. V. Sajanthini

#### Mullaitivu

Mr. Sivaruban N

Mr. Mathiyalagan K

Ms. Sinthuya Jeyatheeswaran

Ms. Rajaratnam Kayathiry

Ms. Sukitha Kanapathippilai

Mr. Balasupramaniam Mohanraj

Mr. Soosaipemarasa Jenistan

Ms. Mekala Vikneswaran

Ms. F. Vithusha Ms. Iruthayarasa Sophia

#### Jaffna

Mr. Jesuthasan Partheepan

Mr. Rio S M

Ms. Sivarany N

Ms. Selvanayagam Kithursana

Ms. Tharsika Kunarathnam

#### Mannar

Ms. Ranjith Lionel Surenthini

Mr. Mariyaregino S

Ms. S. Coonghe Mary Aswini

Ms. K. Jokina Anne Mary

Ms. Rasasekaram Sugirtha

Mr. Balachadran Premachandran

Mr. Arulpirakasam Arun

Mr. Umakaran Daniyel

#### Vavuniya

Ms. A. Jesitha

Ms. Ushananthini Ravendranathan

Mr. Nagalingam Ragunanthanan

Mr. Mariya Sengol Mariya Shalsantani

Ms. Mithunna Gunasekaram

Mr. Kuhathasan Sajeevan

#### Monaragala

Mr. N. Ishara Hemawansha

Mr. S. Pethumsri

Ms. D. Samurdhi Perera Wijesekara

Mr. K. A. H. W. Nandasena

#### Kaluthara/Kurunegala

Ms. W. A. P. Thilakawardene

Ms. E. A. Lakshika Rajini Athukorala

Mr. Mohamed Ibrahim Mohamed Ifash

Ms. H. M. Anushika D. Herath

## **REGIONAL STAFF**

**Ampara** 

Mr. Nisry Ahamed

Kaluthara

Ms. S. H. Malki Lakshani Silva

**Trincomalee** 

Mr. A. A Shawkky Hakkani

Ms. Mohommad Marzook Nurool Ismiya

Mr. Sothinathan Puvanentherrajah

Ms. Anuja Ravi

Mr. Vijayaraja Kantharupan

Ms. Jananthan Jeyarani

Ms. Ramalingam Satheeswary

Ms. P. Velani Senevirathne Mailvakanam

**Batticaloa** 

Mr. Mahalingam Suresh

Ms. Ramachanthiran Pushpakanthi

Ms. S. Rosalind Dhamayanthi

Ms. Antaneeta Chrishanthini Rajeshwaran

Ms. Archana Balasingam

**Colombo - Head Office** 

Mr. Lahiru Perera

Ms. Samanthi Perera

Ms. S.Sathiyabama

Ms. Niranjala Somasundaram

Ms. Anagi Gunasekara

Ms. Harithra Chandrasehar

Ms. Nithila Theivendran

Ms. T. Ranmalie Abeyesekere

Ms. Yureshya Perera

Ms. Priyadharshini Phillip

Mr. K. ReenJeeroy

Ms. S. Ravindra Kumar

Mr. S. Michael

Ms. Meena Logini

Ms. Safiya Riyaz

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FRC - Jaffna Thiruverakam Station View,

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FRC - Kurunegala No. 32, Sudharshana Avenue, Kurunegala. 037-222-6063 frc-kurunegala@frcsl.org

FRC - Mannar No 9, 2nd Cross Street, Pettah, Mannar. 023-225-1858 frc-mannar@frscl.org

FRC - Monaragala No 28, Thissa Road, Monaragala. 055-227-6054 frc-monaragala@frscl.org Through counselling, I was able to sort out the conflicts I faced within my family. I am happier and more confident that I can face any challenge now. I have more of a will to live.

\_\_\_\_

Client - Vavuniya District



පවුල් පුනරුත්වාපන කේන්දුය குடும்ப புனர்வாழ்வு நிலையம் FAMILY REHABILITATION CENTRE

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