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VISION & MISSION

Vision

To be respected as one of the leading organizations for the rehabilitation of trauma survivors and for the prevention of trauma in Sri Lanka

Mission

To provide holistic treatment and care to those who have been affected by trauma, whilst lobbying and advocating to prevent trauma in Sri Lanka



FOREWORDS

Chairman's Message

One more year has passed with successful outcomes. The Chairman's message last year highlighted the difficulties NGOs faced in Sri Lanka, especially for those dealing in the field of psychological rehabilitation, to survive and provide services. Despite the uncertainties that were floating around about the withdrawal of non-government organizations, after several reviews with the Ministry of Health, FRC was able to increase its network with government officials at the Provincial level. In addition, we have continued working in coordination with the respective Ministries in the National Government, Provincial Councils and the Secretariats. This has been a great recognition for us and an encouragement to provide necessary and possible services within the scope of FRC, assisting those in need of our services better.



The year 2013 saw FRC providing livelihood assistance, in addition to the counseling services, to selected terminated clients as a form of holistic assistance. This assistance

was provided to clients in the areas in which FRC continued working in, in order to support these clients to successfully restore their roles in their respective families and communities, and increase the daily involvement with their family and community. It was also satisfying to see some of the trained Persons with Disabilities (PWDs) taking a very active role in community activities through the "Strengthening of Physical Rehabilitation Services for Children and Adults with Disability/Injury in Sri Lanka" programme.

FRC is also looking into the possibilities of assisting the Ministry of Health to enhance the Maternal and Child Health services in the worst affected areas of the North during 2014/2015. The successful implementation of projects in the challenging areas in which it works, speaks for FRC's organizational and capacity for service provision. I wish the Ministry of Health will look to FRC again, to work in collaboration with on this new endeavor.

In performing our functions at FRC, let us believe in the country, her peoples, their long traditions of great religions and what those great religious teachers and sages have unfolded to us for centuries. Basically, let us be truthful and help those in need to lead their lives in harmony, for a better Sri Lanka. I thank the Ministry of Health, District and Divisional Secretariats, Ministry of Social Services, Board of Governors and the staff of FRC for another successful year.

Dr.C.S.Nachinarkinian.(CHAIRMAN)

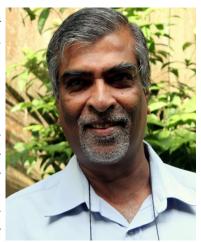
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FOREWORDS

Chief Executive Director's Message

This annual report provides a snap shot of important FRC accomplishments for the year 2013. It also reflects our commitment to transparency and accountability to the communities we serve. With a vision of serving the trauma survivors in Sri Lanka by providing holistic care targeting their psychosocial needs, the year 2013 has been significant in achieving our targets.

With the post war situation in the North and the East our main objective was not to duplicate activities carried out by other organizations. Holistic care is provided in two major thematic components: rehabilitation and prevention. We have achieved a total number of 1524 beneficiaries, assisted through counselling psychological care, training, medical care and the provision of livelihood. Further an attempt was made through advocacy and training targeting state and non-state actors, general public to influence the attitudes on negative consequences of trauma.



Organizational activities expanded with the opening of the new field office in Mullaitivu where we felt that there is a vast demand for psychological support. Through the establishment, FRC is in a position to provide sustainable support to communities with Counselling or over all psychosocial assistance. As the four-year strategic period is coming to an end in 2015, we are now in the process of strategizing ourselves for the next four to five years. Moving out of the post-war scenario we hope to expand our servicers to the North Central and Western province to concentrate on immerging issues that leads to trauma in these areas.

The current ongoing project in partnership with Sri Lanka Foundation has provided us with an opportunity to work closely with relevant officials targeting the Istanbul protocol, where trainings and publications will be done to introduce alternative mechanisms available for trauma prevention in the country.

A special word of thanks to FRC's board of Directors, our partners, donors, stakeholders and staff for their huge commitment and support. We could not have achieved this without you! And I hope that the same support and commitment will be extended in the coming year.

Mr. M.A.L. Perera (Executive Director)

HUMAN INTEREST STORY

Vidya* is a 59 year old, female. She was referred to FRC by another client who was also receiving treatment from FRC.

Vidya is a widow and lives with her only daughter. She was engaged in agricultural activities with her husband prior to the conflict. In 2008, her husband and two sons died due to a shell attack. She and her second son were injured due to a bomb blast and were taken to hospital, where her son's right leg was amputated.

When Vidya came to FRC she presented several physiological symptoms, coupled with psychological symptoms. Even though she received medical treatment from the hospital she failed to show any improvement. During the first assessment using the Client Intake Form (CIF), the Psychosocial Worker (PSW) identified physical symptoms such as swollen knees, joint pains, headaches, and back pain. Vidya was also assessed for psychological symptoms, and she reported that she was constantly feeling anxiety, sadness and grief, fear inducing nightmares, flashbacks, and helplessness. Even though she didn't have active suicidal thoughts, she also reported of feeling that life is worthless and it was better if she wasn't alive. Behaviorally, she was avoiding going to places like the Kovil, marriage ceremonies, and crowded places. All the above symptoms have been affecting Vidya's capacity to function productively in her life, as she is unable to continue with her livelihood, create and maintain social relationships, family relationships and her own general welfare.

After assessing her physical and psychological problems, the PSW concluded that Vidya suffered from symptoms of PTSD and prolonged grief reaction, as a consequence of the multiple traumas that she faced. At FRC, Vidya was provided with both medical as well as counselling services. The main objective of these sessions was to enable the client to speak about the various traumatic experiences that she had faced in order to enable her to lead a normal life.

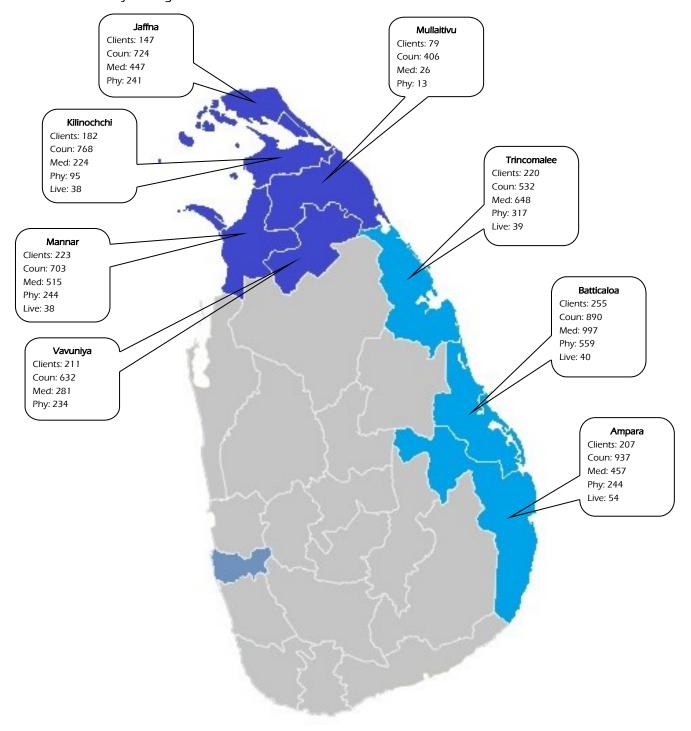
By giving Vidya psycho-education, and by emphasising the role of the PSW in enabling her to overcome her problem, the PSW instilled a sense of confidence in her. During the counselling sessions, Vidya discussed her family life prior to the death of her husband and sons. She also spoke in detail about the traumatic experiences. During these sessions, the client was taught to perform certain breathing exercises and was instructed to carry out the same at home. She was also trained on coping skills to help her be resilient during future difficulties.

Vidya received counselling sessions, according to the FRC counselling framework, for a continuous period of 03 months where she attended sessions regularly. After 13 counselling sessions, 5 medical sessions, and 5 sessions of physiotherapy, her condition showed a remarkable improvement. The PSW held discussions with the client's family members. The PSW also paid home visits and observed the daily routines, family environment, and the overall improvement of the client was also assessed. The PSW also observed that the client engaged in social and spiritual activities which further aided in improving her condition. Her relations with her family members as well as her neighbors had also improved. After the conclusion of her counselling sessions, Vidya resumed working in the fields. She also started visiting places that she had avoided for several years. Vidya also shared her improvements with the other FRC clients.

^{*} The clients name has been altered in order to maintain confidentiality.

WHERE WE MADE A DIFFERENCE

In fiscal year 2013, FRC worked in Jaffna, Mannar, Kilinochchi, Mullaitivu, Vavuniya, Trincomalee, Batticaloa and Ampara Districts in Sri Lanka, implementing long-term programmes to provide holistic treatment and care for those who have been affected by trauma and prevent trauma in Sri Lanka through advocating for policy change. We supported 1524 trauma survivors directly through our servicers.



 $Client-Clients\ treated\ in\ 2013,\ Coun-Counselling\ Sessions,\ Med-Medical\ Sessions,\ Phy-Physiotherapy\ Sessions,\ Live-Livelihood\ clients$

WHO WE TARGET

FRC's clients include some or all of the following and their families:

- Survivors of war trauma
- Widows and widowers affected by trauma
- Women and men who have been disabled as a result of the trauma
- Internally displaced persons affected by trauma
- Migrant workers affected by trauma

During the year 2013, FRC focused on the above categories in all eight Districts. Following are the clients treated during the year 2013 according to client categorization. Due to the complexity and the prevalence of multiple traumas at the locations, there are possibilities of clients falling under more than one category. This may cause a discrepancy in the total number of clients reported.

No.	District	TS	IFM	EX-C	WW	DA	BBV	IDP	ОТ
1	Jaffna	144	8	17	38	10	20	19	18
1								17	
2	Kilinochchi	171	33	19	53	15	85	16	11
3	Mannar	150	16	32	23	10	54	2	12
4	Mullaitivu	62	32	10	25	7	35	0	1
5	Vavuniya	165	131	15	60	17	96	77	15
6	Ampara	171	49	9	11	2	8	6	14
7	Batticaloa	133	11	24	15	0	105	0	0
8	Trincomalee	133	28	23	18	13	56	6	2
	Total	1129	308	149	243	74	459	126	73

TS — Trauma survivors

IFM — Immediate family member of trauma survivors/victim

EX-C — State and non-state ex-combatants

WW — War widows and widowers

DA — Person with disability

BBV— Bomb blast victim/survivor

IDP — Internally displaced person

 $\mathsf{OT}-\mathsf{Other}$

HOW WE MADE A DIFFERENCE

FRC's Highlights in 2013

Monitoring & Evaluation (M&E) Training for Survivors Associated Field Staff

FRC developed and is maintaining a M&E database system with the help of TAF. FRC is now in a position to provide training on the development and maintenance of M&E database systems to other organizations in the psychosocial field. The first training was conducted on the 21st and 22nd January, 2013 to Survivors Associated.





Voluntary Service Overseas (VSO) Exhibition

FRC participated at the VSO Exhibition held on the 28th February 2013 at the BMICH. The stall displayed posters about FRC and its work. The Chief Executive Director, Clinical Psychologist, and M&E officer also participated in the "Closing of Project" ceremony with The Asia Foundation (TAF) at the BMICH conference hall on the same day.





Concluded Projects

FRC concluded the provision of livelihood support to 209 clients, via Canada Fund for Local Initiatives (CFLI) supported project, in the Ampara, Batticaloa, Trincomalee, Mannar and Kilinochchi Districts by end of February. FRC also concluded a programme based on Psychosocial Interventions for a 149 former combatants who were rehabilitated through government rehabilitation process and referred to International Organization for Migration (IOM) in the Kilinochchi District in March.

HOW WE MADE A DIFFERENCE

FRC's Highlights in 2013 Cont..

FRC Review North— Ministry of Health (MoH)

The Directorate of Mental Health, with the guidance of the Secretary of the MoH, conducted a review meeting of FRC on 7th March 2013 at the main MoH auditorium. The Chief Executive Director, Clinical Psychologist, M&E Officer, and Regional Coordinator - North represented FRC; Dr. T.L.C. Somathunga, Dr. R. Hettiarachchi (DD/Mental Health), PDHS Northern province, and RDHS Kilinochchi represented the MoH.

RESPECT Project Started

In the last decade, services on rehabilitation of Trauma survivors were carried out through partnering with different local as well as international organizations. With the succession FRC gained in psychosocial support, FRC received direct funds from USAID to continue the rehabilitation services. Programme commenced with the opening of FRC office in Mullaitivu District and the recruitment of new project staff.





Care for Care Givers

In July 2013, the entire staff went to Hambantota on a four day get-together called "Care for Caregiver". The get-together was from 24th July to 27th July 2013 at the Bandagiri Hotel. During the stay, an Outward Bound Training programme was organized and conducted by Business Creations (Pvt) Ltd to enhance team building and leadership qualities of FRC staff. It was a great opportunity to share their talents and interact with each other. FRC staff put on a talent show, and had an outing to Yala National Park as well to relax, enjoy, and improve their own psychological wellbeing.

Conclusion of Victims of Trauma Treatment Project Outline (VTTP)

Since 2005, TAF has partnered with FRC in providing sensitive and effective support for trauma affected people, and in reducing incidences of trauma. This partnership started with the Reducing the Effects and Incidences of Trauma (RESIST) 1 programme, and continued through RESIST 2 and VTT programmes until September 2013. TAF organized conclusion ceremony "In Retrospect: Sharing experiences and lesson learnt psychosocial programme of The Asia Foundation" on the 5th December 2013 at the BMICH. FRC shared its experiences and lessons we learnt from this partnership at this ceremony.

HOW WE MADE A DIFFERENCE

FRC's Highlights in 2013 Cont..

Extended approval from the MoH and Presidential Task Force (PTF)

A review meeting on the services FRC offers in the Northern Province was held on the 17th October 2013, and concluded with the confirmation that FRC should continue working in all five districts of the Northern Province. The MoH also extended its Memorandum of Understanding (MoU) with FRC for another year. In addition, PTF approval was extended for another year on 28th October 2013 within the terms of the MoU with the MoH.





Commenced work with Handicap International (HI) and the Disability Organization Joint Front (DOJF)

In partnership with HI, the Strengthening of Physical Rehabilitation Services for people with Disability/Injury began in September in the Kilinochchi District. FRC also partnered with DOJF on Towards Disability Inclusive Development Through a Strengthened Rehabilitation Sector in South Asia, which began work in August.

The project titled "Sri Lanka: A Society that Values Human Dignity" commenced

FRC partnered with SLF to implement a new project from November 2013, and is FRCs' key programme on prevention. The project is funded by a grant from the European Union.

FRC currently implements two core programmes. The Trauma Rehabilitation Programme delivers services and implements activities, with the purpose of providing holistic treatment and care to those who have been affected by trauma. Under the Trauma Prevention Programme, FRC lobbies, decision makers, and decision making institutions and organizations, and conducts advocacy campaigns aimed at preventing trauma in Sri Lanka.

Trauma Rehabilitation Programmes

Victims of Trauma Treatment Project (VTTP)

VTTP is a continuation of a prior programmes named RESIST I and RESIST II, all three of which were implemented in the Northern (except Mullaitivu) and Eastern Provinces. The main objective of this project was to provide psychosocial support and medical assistance to the survivors of trauma and their families. Focus was also on working towards reducing the use of substances that create trauma, and in general to make the public and the stakeholders aware of the survivor's needs in order to address the problems they are faced with. The objectives below were achieved through the conclusion of all three of the above mentioned programmes.

The 3 objectives:

- 1. Treatment and Healing To rehabilitate survivors of trauma and their families, along with facilitating their reintegration into the community, to be self-reliant and self-supportive
- 2. Organizational Development To build the capacity of trauma treatment centres to facilitate the enhancement of the organization's effectiveness and sustainability in delivering healing services
- 3. Monitoring and Evaluation To strengthen and expand the existing M&E system to measure effectiveness and improve services and contribute to the most effective interventions for support to trauma treatment services

Psychological Intervention for Former Combatants (PIFC) via IOM

The Project focused on the psychosocial intervention and medical needs of government rehabilitated former combatants and their families who are working with IOM, in the Northern Province of Sri Lanka. This intervention was designed to instill a sense of confidence in the clients and ensure their well-being and behaviour in society. Activities for this programme commenced on May 2012 spanning for a period of an year, and were implemented in the Kilinochchi District.

Objectives:

- ◆ To provide psychosocial support services to the clients to resume their roles within family and community
- ♦ To train and enhance the knowledge and professional skills of IOM and FRC staff
- To increase the capacity of FRC to support an integrated and holistic approach for clients and access through strengthened linkages and partnerships with other essential service providers in mental health, economic support, and other community-based services

Trauma Rehabilitation Programmes Cont..

Rehabilitation Services for People Affected by Conflict Related Trauma (RESPECT Programme)

Programme's goal is for FRC, government agencies, and other NGOs to offer high quality, effective, holistic rehabilitation services by integrating counselling, medical treatment, physiotherapy and livelihoods assistance, to Trauma Survivors (TS) and Immediate Family Members (IFM) of TS/Victim of Trauma (VoT) and Assessing Psychosocial Needs in Post-Conflict Sri Lanka while understanding causes and prevalence of trauma. This programme commenced on March 2013 and activities will continue for three years in the Northern and Eastern Provinces of Sri Lanka.

Three programme Objectives will contribute towards the realisation of the proposed programme's Goal:

- 1. To expand the geographic scope and further improve the effectiveness of FRC's provision of psychosocial and medical services
- 2. To improve and sustain the provision of psychosocial services to vulnerable communities by both government and NGO in eight districts
- 3. FRC, government agencies and other NGO increase the provision of livelihoods assistance and training to TS and IFM of TS/VoT as part of the holistic treatment of trauma

Livelihood Support via Canada Fund for Local Initiatives (CFLI)

The objective of this project was to increase income generating opportunities for FRC's terminated clients, thereby improving their quality of life, and that of their families, by reintegrating them successfully into society as respectable individuals and families. This livelihood support programme commenced activities in October 2012 and continued through March 2013. FRC was provided livelihood assistance to 209 clients from the districts of Kilinochchi, Mannar, Trincomalee, Batticaloa, and Ampara who had been successfully terminated from FRC's services.

Beneficiaries were provided with awareness on the importance of psychosocial wellbeing for livelihood development, basic livelihood activities, and how to select appropriate livelihood sector for the client. Technical training was provided on life skills related to agriculture, fishing, wood crafts, cattle breeding, goat rearing, home gardening, rain water harvesting etc. with the support of the relevant government Development Officers. This institutional support has enhanced their opportunities to undertake income earning ventures through groups with access to finance from MFIs/Banks, and to establish production with necessary market linkages.





Trauma Rehabilitation Programmes Cont..

Expand and improve FRC's provision of psychosocial services, medical care and livelihood support to survivors of trauma (TS), people with disabilities and their Immediate Family Members (IFM) via CFLI

This project 5-month project commenced in November 2012. The immediate objective of this project was to offer high quality, effective, holistic rehabilitation services by integrating counselling, medical treatment, physiotherapy and livelihoods assistance to TS, people with disabilities and IFM of them and thereby improving their and their family members' quality of life by reintegrating them successfully to the society as respectable individuals and families. In addition, the project built community level sustainability on proactive of mental health issues through Grass Root Level Action Committees, Community Volunteers and Peer Support Groups.

Strengthening of Physical Rehabilitation Services for people with Disability/ Injury in Kilinochchi in partnership with Handicap International (HI)

The main objective of this year long project, which began in September 2013, is to improve access and optimize quality physical rehabilitation services (especially with prosthetics & orthotics services) for people with physical disabilities/injuries in the conflict- affected Kilinochchi district, through the service deliverables related to the Decentralised Resource Centre on Disability (DRCD) and based on locally capacitated actors.

This resulted in:

- ♦ 300 persons with disabilities living in rural parts of Kilinochchi district benefiting from a better access to rehabilitation services
- ♦ 20 selected Community volunteers trained as Community Base Rehabilitation (CBR) workers
- Supporting and providing further training for 11 persons with disabilities who have trained as Disability Equality Training (DET) trainers
- ♦ 400 people benefiting from awareness raising activities

Towards Disability Inclusive Development through a Strengthened Rehabilitation Sector in South Asia via DOJF

The objective of this project was to expand CBR activities, strengthen the physical rehabilitation sector through implementing relevant continuing education and linking these actions with formation, strengthening or increased awareness of rehabilitation policy in Afghanistan, Bangladesh, State of Orissa - India and Sri Lanka. The project commenced in August 2013.

OAK Foundation via IRCT

FRC worked in partnership with relevant government offices, NGOs, and INGOs to address the psychosocial needs of the population affected by trauma. Through this initiative which began in April 2013, FRC reaches those persons affected by conflict and resettled, as well as those living in adjoining regions; assisting them to resume their roles within the family and community, and providing holistic psychosocial rehabilitation. The primary objective of this programme is to treat and rehabilitate survivors of trauma following the recent conflict, by ensuring that the FRC projects reach them. Partnership with OAK Foundation helped to: extend FRC's capacity in the provision of psychosocial services; increase access to medical and physiotherapy services; develop community based psychosocial services; and increase awareness of mental health issues.

Trauma Prevention Programmes

Sri Lanka: A Society that Values Human Dignity

FRC partnered with Sri Lanka Foundation (SLF) are implementing a new project from November 2013 which comes under one of FRCs' key programme on prevention. Geographically programme will cover Anuradhapura, Ampara, Batticaloa, Trincomalee, Colombo, and Kalutara.

The overall objective of the project is to advocate the enforcement of the rule of law that protects an accused or convicted individual's right to freedom from torture, including cruel, inhuman or degrading punishment in custody, detention or imprisonment in Sri Lanka. Specifically, the project objectives include support to civil society and state institutions to be accountable to achieve a comprehensive understanding of the prevalence of torture in Sri Lanka; to unify and foster support to prevent torture and introduce alternative questioning techniques, forensic psychology and other techniques; to further enhance the capacity of local service providers to identify, counsel and care for Torture Survivors (TS) and their Immediate Family Members (IFM); and to ensure the marginalised TS and IFM are given equal opportunities to participate in developing their communities.

Above objectives will be achieved through five activities of the project which contains:

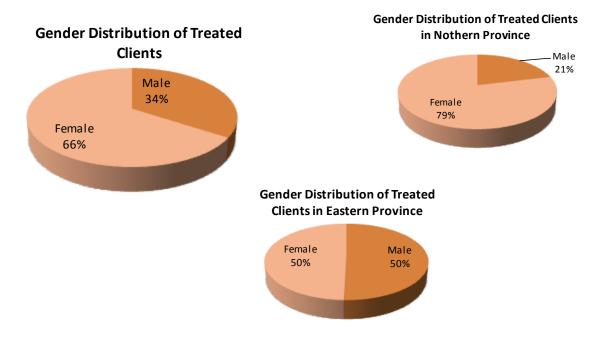
- Research based six publications to increase knowledge, locally and internationally about prevention of torture in Sri Lanka.
- Information sharing and networking on the prevention of torture with the civil society organisations and state institutions in six districts and at the national level.
- The Provision of trainings to local service providers; police officers, prison officers, medical officers and lawyers.
- Forum theatre performances to raise awareness on the form and prevalence of torture and challenge the established perceptions of grass root level communities in respect to use of torture.



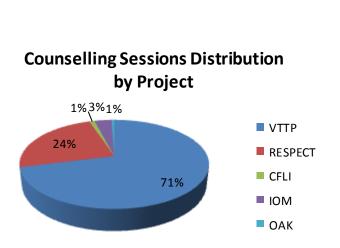


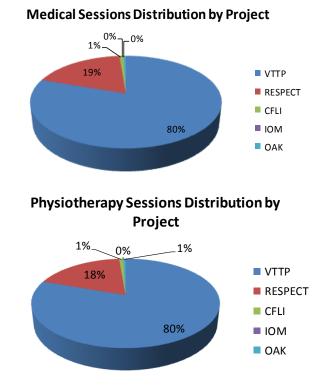
Results of FRC's Programmes

A total of 1524 people were treated through counselling, medical and physiotherapy services.



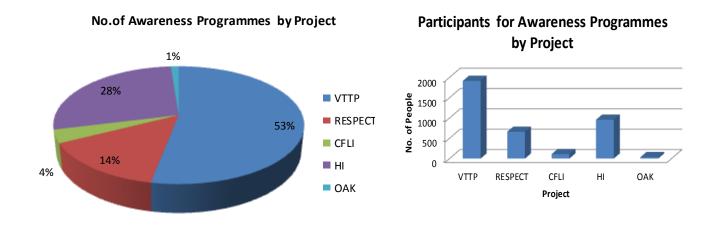
During the year 2013, FRC's districts PSWs were able to provide **5592** counselling sessions for **1090** clients. A total of **1224** clients were provided with **3595** medical treatment sessions and **918** clients were provided with **1947** physiotherapy treatment sessions.





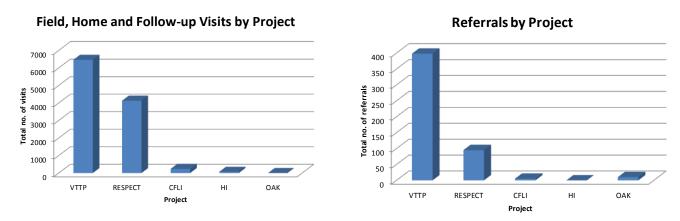
Results of FRC's Pogrammes Cont..

Community Volunteers (CVs) and Grass Root Level Action Committees (GRLACs) play an important supporting role in strengthening FRC's links and relationships with the community. A total number of **3675** persons which included villagers, village leaders, district government officers, and other organization's members in respective GNs participated in these awareness programmes. The awareness programmes covered areas such as: introducing FRC, services of FRC, mental health and mental wellbeing, psychosocial issues in the villages and other social issues.



Regular field, follow up and home visits in the field are of vital importance to monitor the activities that are being implemented. It could also help to ensure that the expected end results and impact of the project are achieved as projected. During the reporting period approximately **10,906** field visits, home, and follow up visits have been done by PSWs, FOs, and CVs. Approximately **508** clients whose treatment needs could not be met by FRC, were referred to other service providers. FRC follows up the progress of these referrals.

Working with trauma survivors and reintegrating them into society requires extensive expertise and skills. In order to



serve the clients in a professional way, it is essential for the field and head office staff to have access to the latest knowledge. During the year 2013, FRC arranged and conducted regular training programmes for field staff to develop their skills in their field of expertise. A total of 13 training programmes were conducted for FRC staff during year 2013 and total of 201 training sessions were covered during the training programmes.

Board of Directors

FRC is managed by the Board and which is the main policy making body of the organization and responsible for its governance. There are currently 9 Directors and they determine in principle all of FRC's functioning including long term strategic plans; the budgetary and financial decisions; as well as the thrust 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 to the Board on all aspects of the Board's work. The members support in fundraising, monitoring the integrity of FRC's internal and disclosure controls, procedures and management information systems.

The Board is responsible for the Strategic Direction of the organization and adopts a strategic planning process and annually approves the strategic plan which takes into account, among other things, the opportunities and risks of FRC.

The Board ensures the integrity and quality of the FRC's financial reporting, systems of internal control, risk management, compliance with legal and regulatory requirements, and the qualifications and independence of the FRC's external auditors.

Dr. C. S. Nachinarkinian - Chairman

Former Health Consultant, Terre des homes

Dr. T. Gadambanathan - Director

Psychiatrist, Teaching Hospital, Batticaloa

Ms. Shikanthini Varma Attanayake - Director

Company Director/ Project Manager, Bishops College

Ms. Manouri Kokila Muttetuwegama - Director

Attorney-at-Law

Dr. Upul Ajith Kumara Tennakoon - Director

Consultant – JMO Institute of Legal Medicine and Toxicology

Ms. Dilkie Fernando - Director

Financial Consultant

Ms. Sithie Subahaniya Tiruchelvam - Director

Senior Partner/ Attorney-at-Law Tiruchelvam Associates

Prof. Sivagurunathan Sivayogan - Director

Community Medicine, faculty of Medical Science, University of Sri Jayawardanapura

Dr. Visvanathar Jeganathan

Former Director General Ministry of Health

Company Secretaries to the Board:

Corporate Affairs (Pvt.) Limited

In addition to the Board, the following are Members of FRC:

Ms. Shanti Arulampalam

Ms. Amara Hapuarachchi

Dr. Deepika Udagama

Mr. Tuan lyne

Mr. Sunil Bastian

Ms. Indulekha Karunaratne

Dr Palitha Bandara



Senior Management Committee 2013

It is the function of this committee to ensure the proper Strategic Direction of the organization to reach its highest levels of excellence through good governance practices, motivation and financial diligence. It is also this committee which is responsible to introduce processes of cost reduction, put in place new policies and procedures, including making necessary decisions on Human Resource matters. This committee is chaired by Chief Executive Director (CED).

Mr. Lahiru Perera

Chief Executive Director (Chair Person)

Ms. Amalka Edirisinghe

Clinical Psychologist

Mr. Nadarajah Satheesh Accountant

Mr. Anjula Jayasundara Monitoring and Evaluation Officer

Mr. S. Sathieshkumar Regional Coordinator — East

Mr. Vivekananda Premkumar

Regional Coordinator - North



FRC Team 2013

Head Office

Mr. Lahiru Perera - Chief Executive Director

Ms. Amalka Edirisinghe - Clinical Psychologist

Mr. Nadarajah Satheesh - Accountant

Mr. Anjula Jayasundara - Monitoring & Evaluation Officer

Ms. Niranjala Somasundaram - Assistant Monitoring & Evaluation Officer

Ms. Tharshini Nanthakumar - Assistant Accountant
Ms. Vinodya Thewarapperuma - Assistant Psychologist

Ms. Keshya Kumaranayagam - Information & Administration Officer

Ms. Nelum Uttamadasa - Project Assistant

Ms. Rumy Bavanather - Accounts Assistant

Ms. Hema Pallage - Book Keeper Mrs. Charmaine Kelaart - Secretary

Mr. S. Michael - Multi Duty Clerk

Mr. M. P. B. Sarathchandra - Driver

Ms. Meena Logini - Office Aide

FRC Team 2013 Cont..

Staff in the Districts

Ampara

Ms. A. Nawsna - Psychosocial Worker
Mr. M. Thirumal - Psychosocial Worker
Mr. K. Mathiyalagan - Psychosocial Worker

Ms. N. Ragunanthanan - Field Officer
Mr. S. Paskaran - Field Officer

Batticaloa

Ms. A. Jayaseeli - Psychosocial Worker
Mr. A. Selvakumar - Psychosocial Worker

Ms. K. Queen Mary - Field Officer
Mr. M. Suresh - Field Officer

Kilinochchi

Mr. V. Premkumar
 Regional Coordinator
 Mr. Anton Punitharasa
 Psychosocial Worker
 Ms. A. Sheriel Famila
 Psychosocial Worker

Ms. Nadarajah Kajanika - Field Officer
Mr. A.V. Mary Jebojini - Field Officer
Mr. J. Sinthujah - Field Officer

Mannar

Ms. S. Sebanayaki - Psychosocial Worker
Ms. Surenthini Jesubalan - Psychosocial Worker

Mr. R. M. R. Sara Vimal Raj - Field Officer
Mr. G. Penusta Mary - Field Officer

Mullaitivu

Ms. Jeevasharmila - Psychosocial Worker
Ms. Kamaleshwary Thambirajah - Psychosocial Worker

Mr. Sivasupramaniyam Sivagnanasegaran - Field Officer
Mr. R. Kalaichchelvan - Field Officer

FRC Team 2013 Cont..

Point Pedro

Mr. C. Ragan - Psychosocial Worker
Ms. Pushpalatha Ravikumar - Psychosocial Worker

Ms. Vanathy Mahadeva - Field Officer Mr. Sangarapillai Gowryshankar - Field Officer

Trincomalee

Mr. S. Sathieshkumar
 Ms. Praba V.S. Mailvahanam
 Psychosocial Worker
 Ms. Jananthan Jeyarani
 Psychosocial Worker

Ms. Meganathan Manjulanchali - Field Officer
Mr. Manokaran Mathikaran - Field Officer

Vavuniya

Mr. Anton Paul Rajesh - Psychosocial Worker
Ms. C. Anparasi - Psychosocial Worker

Ms. Jeevarani Rajikumar - Field Officer Mr. S. Kandeepan - Field Officer

PARTNERSHIPS

In order to address the rehabilitative and preventative needs of the communities FRC implements programmes in partnership with and significant support from the Ministry of Health (MoH), National Institute of Mental Health (NIMH), Provincial Ministry of Health and Indigenous Medicine, Sri Lanka Foundation, The Asia Foundation, Handicap International, Disability Organisations Joint Front and many other Governmental and Non-Governmental Organisations, To name some of them:

USAID

European Union

Canada Fund for Local Initiative

Inge Genefke and Bent Sorensen ATS Foundation

Ministry of Social Services

District and Divisional Secretaries (GAs & AGAs)

District NGO Consortiums

Samutthana

Survivor's Associated

Consortium for Humanitarian Agencies

Psychosocial Forum

National Universities

District and Base Hospitals

IRCT

IOM

Human Rights Commission

CARITAS

Legal Aid Commission

Group for Helping Hand

Berendina - Micro Credit Organization

Norwegian Refugee Council

Sewalanka Foundation

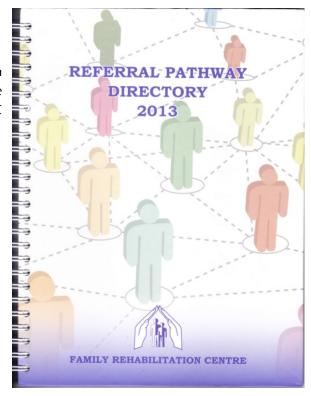
Lanka Rain Water Harvesting Forum

PUBLICATIONS

During 2013 following were added to the Family Rehabilitation Centre's list of publications:

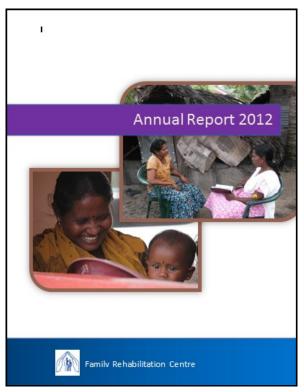
Referral Pathway

Referral pathway directory focuses on the service provision provided by FRC, it details the referral pathways available for clients in seven districts (except Mullaitivu) where FRC field offices are located.



Annual report 2012

The Annual Report provides details of FRC's Programmes, their mandates and how much FRC has achieved during the year, together with the financial performance of the institution in 2012.



FINANCIAL REPORT

Kreston MNS & Co

INDEPENDENT AUDITOR'S REPORT TO THE

MANAGEMENT OF FAMILY REHABILITATION CENTRE

Report on the Financial Statements

P.O. Box 210 50/2, Sir James Peiris Mawatha Colombo 02, Sri Lanka T +94 (0) 11 2323571 F +94 (0) 11 2433388 www: webasia.com/kreston

- 1. We have audited the accompanying Financial Statements of FAMILY REHABILITATION CENTRE which comprise the Statement of Financial Position as at 31st December 2013, and the Statement of Comprehensive Income, Statement of Changes in Reserves and Statement of Cash Flows for the year then ended, and a Summary of Significant Accounting Policies and other explanatory Notes, exhibited on pages 2 to 20.
- 2. Administrators' Responsibility for the Financial Statements

Administrators are responsible for the preparation and fair presentation of these Financial Statements in accordance with Sri Lanka Statement of Recommended Practice for Not-for-Profit Organisations - Including Non-Governmental Organisations (SL SoRP - NPOs). This responsibility includes: designing, implementing and maintaining internal control relevant to the preparation and fair presentation of Financial Statements that are free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

3. Scope of Audit and Basis of Opinion

> Our responsibility is to express an opinion on these Financial Statements based on our audit. We conducted our audit in accordance with Sri Lanka Auditing Standards. Those Standards require that we plan and perform the audit to obtain reasonable assurance whether the Financial Statements are free from material misstatement.

> An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the Financial Statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall Financial Statement presentation.

> We have obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purposes of our audit. We therefore believe that our audit provides a reasonable basis for our opinion.

4. Opinion

In our opinion, so far as appears from our examination, the Organisation maintained proper accounting records for the year ended 31st December 2013 and the Financial Statements give a true and fair view of the financial position of the Organisation as at 31st December 2013 and of its financial results for the year and cash flows for the year then ended in accordance with Sri Lanka Statement of Recommended Practice for Not for Profit Organisations (including Non-Governmental Organisations).

Kresten MNS & (0

CHARTERED ACCOUNTANTS COLOMBO 13TH JUNE 2014 SR/ST/bn

SR-Family Rehab.IFRS-cd2c8

Partners
Ms Y Shirani de Silva, FCA, FCMA
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FINANCIAL REPORT

FAMILY REHABILITATION CENTRE			Page 2
STATEMENT OF COMPREHENSIVE INCOME			
FOR THE YEAR ENDED 31ST DECEMBER		2013	2012
	Note	Rs.	Rs.
Operating Income Incoming Resources	18	56,607,973.95	58,374,927.86
Operating Expenditure Project Related Expenses Administrative Expenses	19	(61,564,489.13) (2,856,698.36)	(38,658,035.77) (826,266.79)
Net Surplus / (Deficit) on operating activities		(7,813,213.54)	18,890,625.30
Revenue Earned from Other Activities Net Surplus / (Deficit) before Taxation	20	4,384,840.54 (3,428,373.00)	3,680,515.10 22,571,140.40
Income Tax Expense Net Surplus / (Deficit) after Tax	21	(607,678.28) (4,036,051.28)	(514,698.22)

The Accounting Policies and Notes on pages 6 to 20 form an integral part of these Financial Statements.

Figures in brackets indicate deductions.



FINANCIAL REPORT

FAMILY REHABILITATION CENTRE			Page 3
STATEMENT OF FINANCIAL POSITION AS AT		31.12.2013 Rs.	31.12.2012 Rs.
ASSETS	Note		
Non-Current Assets			
Property, Plant and Equipment	4	5,760,312.07	5,319,635.03
		5,760,312.07	5,319,635.03
Current Assets			
Short Term Investments	5	5,707,127.09	18,924,345.27
Advances and Other Receivables Cash at Bank & in Hand	6	3,184,097.43	525,000.00
Cash at Bank & III Hand	8	18,330,430.80	8,724,970.51
		27,221,655.32	28,174,315.78
Total Assets		32,981,967.39	33,493,950.81
FUNDS AND LIABILITIES			
Accumulated Funds			
Restricted Funds	9	15,021,190.24	21,651,403.42
Unrestricted Funds	10	2,815,354.04	1,894,890.14
Donation Reserve	11	8,014,778.00	6,290,478.00
		25,851,322.28	29,836,771.56
Non-Current Liabilities			
Retirement Benefit Obligation	12	1,821,855.50	1,831,947.00
		1,821,855.50	1,831,947.00
Current Liabilities			
Accrued & Other Liabilities	13	3,771,560.94	843,396.22
Provision for Taxation	14	967,458.78	901,944.18
Bank Overdraft	8	569,769.89	79,891.85
		5,308,789.61	1,825,232.25
Total Funds and Liabilities		32,981,967.39	33,493,950.81

The Accounting Policies and Notes on pages 6 to 20 form an integral part of these Financial Statements.

I certify that the Financial Statements are in compliance with the requirements of the Companies Act No.7 of 2007.

Accountant

Administrators are responsible for the preparation & presentation of these Financial Statements.

Approved & Signed for and on behalf of the Management.

Directors:

1. Sile

2.

Alennour

13th June 2014.





FRC Centres

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Trincomalee

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Mullaitivu

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Pulloly South,

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