Annual Review 2016

Highlights of Activities and Response





FAMILY REHABILITATION CENTER

"Helping Communities Heal"

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Chairman's message

At last it looks the pressure on the NON Government Organisations is relaxing. The top level administration has changed. However there is much work to be done towards the 'better change' being felt in the periphery. In the North and East the situation is showing only a slight change; the problems of war as in the past is still felt by the people, though the country is approaching a decade of post war situation. The counselling needs are felt more especially by those who have been badly affected. But a shift towards counselling of school children is felt to be needed more urgently by those responsible in the field of mental health.

In addition to the services that were carried out by FRC in the previous years, FRC responded to this need by doing pilot training of teacher counsellors in selected schools in the North. Most of the 'teacher counsellors' were not trained on counselling of students. This training was accepted with open hands by the service providers. The pilot capacity building projects with the Health Department on Reproductive Health to the field officers too showed the need for capacity building on a broader scale. There was a land slide at Aranayake in the central hill region and FRC extended its helping hands to the people. The junior Police Officers were given training on treating suspects and inmates in police custody in an acceptable manner respecting human dignity.

FRC thus was able to provide training and services to people in need and most affected following human made and natural disasters. This was made possible by many International Agencies responding to the requests made by FRC in terms of Financial and Capacity building assistance. This materialised into real assistance to the receiving communities by the trained staff of the FRC.

As Chairman I take this opportunity to thank the Board of Governors who supported me and the organisation in advising, approving and critically analysing FRC activities. I wish to convey my grateful appreciation to the staff in the Head Office and the field who had to work under pressure and carried out their functions in a way the receivers and the Government authorities appreciated their work. Of course my special thanks to the untiring Executive Director coming early to the office leaving late, and successfully steering, capacity building, and supervising the staff and in addition to networking with Government officials, other national and international NGOs and donors.

I wish you all well.

C.S.Nachinarkinian.

About FRC: Mission & Vision

FRC's Vision

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

FRC's 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.

FRC is focusing its work on three specific spheres in the psychosocial field:

- 1. Rehabilitation for trauma survivors
- 2. Prevention of trauma and (re)victimization of trauma survivors
- 3. Capacity building for relevant stakeholders

FRC in a nutshell

The Family Rehabilitation Center (FRC) is a humanitarian, non-profit, non-governmental organization, founded in August 1992. It is an independent organization with its own Memorandum and Articles of Association and is incorporated under Section 21 of the Companies Act No. 17 of 1982.

Through its work, FRC not only understands the importance of offering psychological, medical and physiotherapeutic care to those who have been affected by trauma, but also recognizes the importance of providing psychosocial support and advocacy (i.e., holistic care) to enable those affected by trauma to make a recovery, thereby achieving sustainable results. FRC is committed to actively engage with, and seek to persuade, influential individuals, organizations, and decision makers to take action to prevent the causes of trauma and to support and empower those individuals and communities in Sri Lanka that are most likely to be affected by trauma.

For the past 24 years FRC has worked with a broad range of survivors of violence related trauma. Essential rehabilitation services by FRC are provided according to a holistic approach which includes counselling, medical, physiotherapy, livelihood, referral services and capacity

building.

The approach to treatment of trauma survivors (TS) has to be a holistic they have experienced approach as multiple layers of traumatic incidents which have left them with various types of symptoms ranging from physical, psychological, social, spiritual and **FRC** economic problems.



addressing the different symptoms and unique needs of each individual to help reintegrate them into society.

The years following 2009, which marked Sri Lanka's end to a thirty-year war, showed an increasing need to rebuild the lives of those affected and establish sustainable peace. It was a period of heightened State control presence and scrutiny, particularly in the war-affected regions of the country. FRC's interest and determination to reach out to the trauma survivors in these war-affected regions created a lasting impact and resulted in the formation of key relationships with the State and State agencies working on Mental Health and Psychosocial Support services (MHPSS).

The Focus

- Survivors of trauma
- Widows and widowers affected by trauma
- Women and men with disabilities
- Internally displaced persons
- State and non-state ex-combatants affected by trauma
- Migrant workers affected by trauma
- Immediate family members of the individuals mentioned above
- Torture victims

FRC's Reach

Currently, FRC has regional centers located in Kilinochchi, Mannar, Mullaitivu, Point Pedro and Vavuniya Districts, through which long term programs are implemented and coordinated and holistic treatment and care is provided to trauma affected persons in each area. The activities of the regional centers are overseen by the FRC Head Office in Colombo.

5 DISTRICTS IN North



Key Events and Achievements

INTERNATIONAL DAY IN SUPPORT OF VICTIMS OF TOR TURE - 26TH JUNE 2016

An awareness seminar on the theme of "Support Life after Torture" was held in Jaffna, Mullaitivu and Kilinochchi districts targeting the community and local health officials. FRC invited the local government officials in Jaffna and Mullaitivu to the awareness programs and MOMH was the main resource person for the Kilinochchi health official's event to mark the UN International Day against Torture. The awareness program aimed to create Awareness among general population, key community members, People on Rehabilitating Torture / Trauma Survivors & preventing Torture. In general around 125 participants benefited from this awareness meeting and seminar held remarking the day.













FRC's Core Services

In fiscal year 2016, FRC worked in Jaffna, Mannar, Kilinochchi, Mullaitivu, Vavuniya, Trincomalee, Batticaloa, Ampara and Kagalle 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 **840** trauma survivors directly through our servicers.

The below table illustrates the details of clients who received FRC's services.

FRC	Gender		Age				Ethnicity			
District Centres	Total	Male	Female	18 years and below	19-32 years	33-55 years	55 years & over	Sinhala	Tamil	Muslim
Ampara	47	2	45	0	8	36	3	0	47	0
Batticaloa	73	18	55	0	12	46	15	0	73	0
Killinochchi	149	5	144	0	13	81	55	0	149	0
Mannar	54	18	36	0	13	27	14	0	54	0
Point Pedro	132	10	122	0	13	76	43	0	132	0
Trincomalee	68	14	54	0	7	41	20	0	63	5
Vavuniya	57	5	52	0	1	29	27	0	57	0
Mullaitivu	177	15	162	1	19	91	66	0	177	0
Kegalle	83	18	65	9	13	34	27	83	0	0
Total	840	105	735	10	99	461	270	83	752	5

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COMMENCEMENT OF NEW PROJECTS

Communities Gain Capacity for Recovery & Reconciliation in Northern Sri Lanka

FUNDED BY NEELAN TIRUCHELVAM TRUST

FRC initiated a project with the aim of improving capacity for recovery and reconciliation in communities in the Northern Province, with the funding and technical support from Neelan Tiruchelvam Trust. The project proposed to work in GN divisions, namely, in Kudathanai, Valikandi in Jaffna district and Konavil, Uruthirapuram GN Divisions in Kilinochchi District. The program provides rehabilitation (counselling) services and livelihood support to the survivors of conflict affected Trauma, FRC identified suitable GNs to work and established 6 Grass Root Level Action Committees (GRLAC), then they supported in the identification of 4 Community Volunteers (CVs). And trained them on various aspects of the work done by FRC, FRC's structure of counselling includes a holistic approach to understand the home environment of the client. Those clients who successfully completes the counselling sessions are considered to be given livelihood support. Also a needs assessment is conducting among these clients and the neediest are selecting for livelihood assistance. Each beneficiary's skills and resources are assessing to identify the most suitable form of livelihood to be provided. The beneficiaries are then training on basic livelihood skills such as book keeping and account management. The project commenced in September 2016.

THE ARANAYAKE PROJECT

FUNDEDBY USAID

FRC initiated work on this project with the objective of treating and rehabilitating affected population in Aranayake to overcome the acute stress and trauma experienced due to the severe landslide that occurred in their community, with the funding and technical support from USAID. FRC is working closely with the landslide survivors, community members, government officials, and members of the Community Development Center (CDC) in Ussapitiya. The program provides intervention under three levels. They are, assessment of mental health needs, degree of loss/impact of trauma and provision of individual/group crisis counseling; Education/awareness training and

training programs for the community and first responders in a crisis situation; Integration of the service providers that provide psychosocial care in crises and establish networking to support the referral system. The project commenced in June 2016.













WHERE WE MADE A DIFFERENCE

REHABILITATION FOR TRAUMA SURVIVORS

Over the past 20 years, FRC as an organization has developed a model of identifying communities at risk, screening of trauma survivors and engaging in individual counselling and group counselling. The counselling is often provided in conjunction with other support services and referrals such as psychiatric treatment, further medical support, legal aid, disability and livelihood support. This provides a holistic approach towards treatment and a supportive environment for recovery.

Rehabilitation process and achievements in 2016

A central element of the provision of FRC's psychosocial services is the establishment of Grass Root Level Action Committees (GRLAC) and recruitment of Community Volunteers (CV) within the Grama Niladari Divisions (GND). FRC established **39** GRLACs and recruited **30** CVs in 2016.

FRC field staff and CVs conducted 53 community awareness programs for **2,845.** Community members along with GRLACs as part of FRC's outreach activities to identify clients in each GND.

Potential clients were identified from the communities who attended screening clinics held by FRC. Mobile clinics were conducted to reach clients in remote locations and community members unable to travel due to disability and/or other reasons. FRC's psychosocial workers (PSW), Medical Officer of Mental Health (MOMH) doctors and physiotherapists screened clients who attended FRC's medical clinics. Identified clients were then referred to FRC's services based on their needs.

FRC centers were able to successfully organize monthly medical/therapeutic clinics, both center-based and in the field (mobile clinics), to provide continuous medical and physiotherapy services to its clients. The clients receiving regular counselling services were also given appointments to attend the clinic for medical and physiotherapy sessions. A total of **44** centre-based and mobile clinics conducted in 2016.

FRC's treatment framework takes a holistic approach, which encompasses mental, physical, and financial wellbeing. As such, FRC's clinics offer medical, basic pharmacological, and physiotherapy services in addition to its counselling services. Furthermore, livelihood support and referral to legal and specialized medical services is provided. Clients whose needs can be met by the psychosocial

and medical services available in FRC's District Offices will be registered and assigned to counselling and/or medical treatment programs accordingly.

DISTRIBUTION OF THERAPUETIC SERVICES IN 2016

Medical and Physiotherapy services

FRC District	Me	edical	Physiotherapy		
Centres	Clients	Sessions	Clients	Sessions	
Ampara	43	69	32	50	
Batticaloa	62	171	39	61	
Killinochchi	53	74	47	66	
Mannar	33	43	28	33	
Point Pedro	64	144	47	86	
Trincomalee	58	88	53	72	
Vavuniya	40	69	40	69	
Mullaitivu	77	111	27	30	
Kegalle	0	0	0	0	
Total	430	769	313	467	

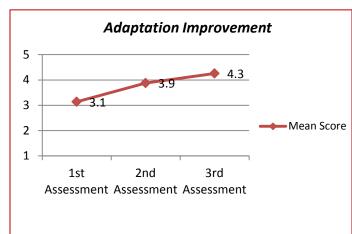
Counselling Services

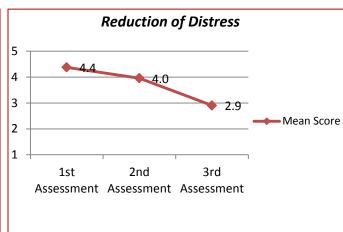
FRC District Centres	Cour	nselling	Group Counselling		
	Clients			Sessions	
Ampara	46	222	3	20	
Batticaloa	61	327	0	0	
Killinochchi	124	812	9	55	
Mannar	45	207	9	51	
Point Pedro	115	925	12	12	
Trincomalee	58	258	0	0	
Vavuniya	54	293	8	49	
Mullaitivu	147	1147	10	21	
Kegalle	83	425	0	0	
Total	733	4616	51	208	

Each counselling client's progress is assessed and monitored through the Client Intake Form (CIF). The CIF is an assessment tool developed locally, which captures the distress of a client due to trauma and enables FRC to assess the client's progress over the course of his/her treatment program. The CIF is used to document the client's personal details and history, assess the cause and effects of each client's

trauma, and to recommend further treatment. The CIF is a confidential record, which captures each client's psychosocial and medical rehabilitation process.

In terms of the services provided to communities, significant improvement was seen in trauma survivors during the year 2016. These trauma survivors were periodically assessed using the Client Intake Form (CIF). The summary of the adaptation and distress scores of the clients, obtained through counselling services, are shown below.





REACHING OUT TO COMMUNITIES AND FOLLOWING UP

COMMUNITY SUPPORT SERVICES

Community Volunteers (CV) and Grass Root Level Action Committees (GRLAC) play an important role in supporting and strengthening FRC's relationship with the community. With the support of GRLAC members, it was possible to conduct regular field, follow-up, and home visits in working locations. These visits are of vital importance in monitoring program activities and ensuring that the expected end results and impact of the program are achieved as planned.

Approximately 9,612 field visits, (home and follow up visits) were made by FRC's psychosocial workers, field officers, and community volunteers in 2016.

1. Rehabilitation Services for People Affected by Conflict Related Trauma (RESPECT Project) funded by USAID

The RESPECT Project was FRCs' key program towards the Rehabilitation for trauma survivors (TS) during the year. This Program aims at providing, and enabling government agencies and other NGOs to provide high quality, effective and holistic rehabilitation services to those affected by trauma in post-conflict areas in the Northern and Eastern Provinces of Sri Lanka.

The Program aims at assisting trauma survivors and their immediate family members to recover from their mental and physical distress and continue with their day-to-day lives by integrating counselling, medical treatment, physiotherapy and livelihood support. This project implemented in the Northern and Eastern Regions from March 2013 and concluded on the September 2016. A total of **5,350** vulnerable people (Male 1,213 and Female 4,137) from 77 DS Divisions benefited from FRC's psychosocial services.

2. Rehabilitation services for Trauma Survivors and their Immediate Family Members affected by the armed conflict funded by IRCT Centre Support (OAK Foundation)

The IRCT Centre Support Grants through the OAK Foundation supported FRC to carry out key activities towards the rehabilitation of torture survivors and their Immediate Family Members (IFM) to recover from their mental and physical distress and continue with their day-to-day lives.

PREVENTION OF TRAUMA AND (RE) VICTIMIZATION OF TRAUMA

FRC has designed this area of intervention specifically to focus on prevention of victimization/re-victimization of trauma survivors and promote those needing assistance to freely seek redress. FRC traditionally based its work on a responsive and service orientated approach while preventive measures were promoted through networking with other stakeholders. FRC will consolidate and effectively contribute to

this area of prevention, given the vast action based learning that FRC has acquired. Prevention-related work is targeted at two levels: the community and the State. At the community level, FRC aims to raise awareness in four main ways; (1) stigmatization of persons living with mental health and psychosocial issues, (2) cause and effects of trauma, (3) supportive mechanisms needed for trauma survivors, and lastly (4) understanding the symptoms of trauma, etc. At the level of the State, FRC aims to improve the capacity of State officials engaged and influence their attitudes towards providing services to trauma survivors, while addressing practices which lead to trauma.

PROJECTS - FRC'S PREVENTION WORK

Sri Lanka: A Society that Values Human Dignity (DIGNITY Project)

The DIGNITY Project is FRCs' key program towards the prevention of trauma and (re)victimization of trauma survivors. It aims to create awareness and capacitate local service providers, law enforcement authorities, medical and legal officers and the general public to take action in this respect. The project involves six main activities; the development of six publications containing useful information especially for medical and legal professionals as well as local service providers; information sharing and networking with other organizations; capacity building programs for police and prison officers, medical officers and lawyers; forum theatre performances and a national radio program to enhance awareness through lessons learnt; and finally, the provision of psychosocial rehabilitation services for trauma / torture victims and their Immediate Family Members (IFM). The Dignity Project aimed to prevent and advocate a society that values human dignity in three provinces consisting of the Anuradhapura, Kalutara, Colombo, Ampara, Batticaloa and Trincomalee districts. The project was implemented on the 1st November 2014 and successfully concluded on the 31st October 2016.

CAPACITY BUILDING FOR RELEVANT STAKEHOLDERS

FRC has vast experience and knowledge in terms of methodology for trauma counselling, counselling skills and stress management. FRC has developed its own dedicated system to monitor client intake, evaluate their psychosocial interventions and provide follow-ups. It has been identified that there is a vast need in the

psychosocial sector for capacity building on such systems and skills. FRC decided to apply its expertise to embark into this program area during the strategic planning process. With regard to systems for monitoring and evaluation, tailored programs can be developed to suit the specific requirements of institutions providing psychosocial services. FRC believes that providing assistance to institutions in understanding client intake trends and tracking client progress has the potential to generate both valid and reliable data, which in turn can make way for informed debate and advocacy for practical changes in the field. FRC aims to accomplish this through the FRC staff, other stakeholders, and internship programs.

CAPACITY BUILDING PROGRAMS FOR FRC STAFF

Working with trauma survivors and reintegrating them into society requires extensive expertise and skills. In order to provide optimal services to clients, it is essential for FRC's staff to have access to the latest knowledge in the field of psychosocial work. In order to meet this need, FRC arranged and conducted 4 training programs for its field staff in 2016.









CAPACITY BUILDING PROGRAMS FOR OTHER STAKEHOLDERS

The overall purpose of this program area is to share the learning gained by FRC in developing tools and methodologies to identify, track, analyze and read information in such a manner to inform the organizations' work. Building capacity on monitoring and evaluation on an organisation requires an assessment of the manner in which the target audiences work and an understanding of the process of the design, to ensure an



effective tool is developed. FRC has the expertise to build the capacities of psychosocial organizations in these areas. This will inculcate a culture of learning within such organizations and also contribute towards data analysis at an organizational level, which will lead to broader strategies and other collaborations when studying this sector. It will capacitate organizations to consider networking in the future to further understand national trends in identifying and addressing trauma.









SEXUAL AND REPRODUCTIVE HEALTH Project

SRH had been a sensitive issue in the North. Therefore with the support of MdM through the SRH project, FRC conducted SRH training activities to 158 Public Health Midwives (PHM) (98 PHMs in Jaffna district and 60 PHMs in Kilinochchi district). This training targeted the short comings and the PHMs appreciated the enhancement of their capacity. PHMs also provided support to conduct activities in the community organized by FRC community volunteers and field officers.

58 PHIs attached to the Jaffna division completed their two day training and involved more with community education and disease prevention (including STIs and AIDS). A discussion was held with the 13 MOHs of the Jaffna district following the PHM and PHI training programmes. 79 PHM students (42 in Jaffna College of Nursing and 37 in Vavuniya College of Nursing) were admitted during mid June 2016 to be trained and posted within North as PHMs. An awareness program was conducted to them regarding their training for their new work; its importance for Health Promotion – the training centred on building confidence among them. This program was to encourage them to gain insight into the course and their future work; with case histories and experiences and enabling them to go through the course with a better understanding of SRH. FRC significantly contributed to develop District Standard Operation Procedure on Gender Based Violence.

Training programs for teacher counsellors on counselling and an awareness programme on importance of counselling for principals in the Vadamaradchy DS division were conducted. (24 selected teacher counsellors for the four day session on counselling; and two one day awareness programme for 62 principals from Vadamaradchy zone). The training programs concluded with very favourable and encouraging remarks from the participants and Ministry of Education. A similar training program for teacher counsellors on counselling and an awareness

programme on importance of counselling for principals in the Kilinochchi Education Zone were conducted. (24 selected teacher counsellors for the four day session on counselling; and two one day awareness programme for 62 principals from Kilinochchi Education zone). 32 Science teachers from the schools in the pilot project areas, selected by the education department authorities were trained on how they could teach Reproductive Health in schools by senior science teacher and education consultant. 25 Counselling Assistants under the Ministry of Social Services and Ministry of Women and Child Development and attached to the different Divisional Secretariats in Jaffna and Kilinochchi participated in a seminar.

Based on the needs at the field level, with the consent of MdM, the GRLAC activity was extended to include the training of youths from the vocational Training and Teacher Training Courses. As a result, 249 youths constituting 142 males and 107 females were made aware of SRH issues. They were students in the Teacher Training College, Vocational Training centres in Jaffna and Kilinochchi. Interestingly 98 were teacher students undergoing training in the Teacher Training College Kopay, Jaffna and from different parts of the island.















Central to development of the sector's ability to evidence its work is the collection of appropriate, consistent and comparable clinical information. The DFI Project is a system-wide response to creating this ability. This project is based on building expertise through partners and ensuring that it is shared appropriately. The IRCT member centers piloting the project were selected on the basis of regional balance and their capacity to represent the full range of rehabilitation practices across the movement. Additionally, their ability to provide leadership and sustainability throughout development of the project into a longstanding program of work was also a decisive factor. In the course of three years, ending by 2017, the project will have put in place clinical record systems in 32 member centers around the world with plans to share it with the global movement and other human rights actors. The DFI data was successfully maintained and updated by FRC.

INTERNSHIPS AND FELLOWSHIP PROGRAMS

The Asia Foundation LankaCorps Fellowship Program

FRC offered a placement to LankaCorps Fellow Ms. Shaaranya Pillai from August to December 2016. LankaCorps is a fellowship program designed to provide young members of the expatriate Sri Lankan community to explore their roots while giving back to their country of origin. Shaaranya Pillai, during her 4 month work period at FRC, she contributed immensely in various ways towards the betterment of the organization. She was involved in training programs by assisting in the development of the training material and in the interpretations during the training. She also played a key role in organizing a seminar for the Prevention of Torture project and supported through reporting, interpretations and other means.





Internship Program Offered to Master of Arts International Disaster Psychology Students of University of Denver, USA

FRC provided an internship program for students from the MA in International disaster psychology course from University of Denver, Colorado. Two students Kristen McGeehon and Meghan Hogan from the program spent a period of 2 months from May to July 2016 in Sri Lanka assisting FRC in various aspects. The interns contributed towards 2 training programs for the FRC staff during their stay. One of these trainings were for field officers and psychosocial workers on working with trauma, trauma informed care, relaxation techniques, conducting needs assessments and community awareness programs. The other training program concentrated on clinical skills in working with victims of Gender Based Violence. They also had the opportunity to involve in the clinical supervision process, meet and have discussions with terminated clients of FRC and contribute towards proposal writing and reporting. Among the workload the interns were provided with opportunities to travel around Sri Lanka and enjoy their time.







INSTITUTIONAL DEVELOPMENT

REVISED ORGANIZATIONAL STRATEGIC PLAN

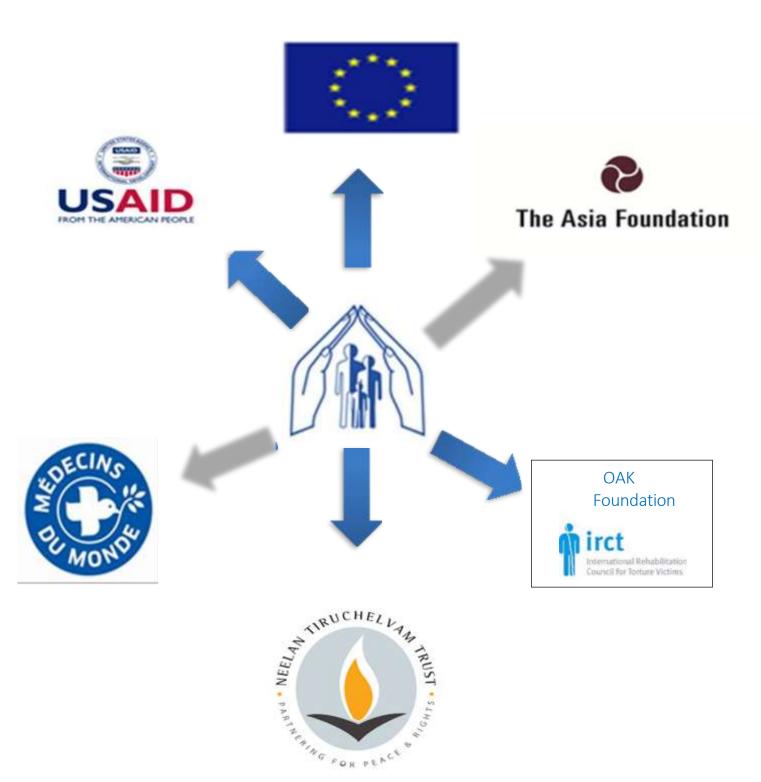
In 2013, one of FRC's key funders, USAID assisted in conducting an institutional evaluation of the organization. Within the next year, the focus of civil society made a marked change from post-conflict to development and reconciliation: a change which had translated into the interests of funding agencies as well. With the existing strategic plan drawing to a close in 2014, FRC was keen to re-envision the organization given the sweeping changes to the context. An opportunity for institutional capacity building under an initiative of the USAID- sponsored SPICE project also opened up for FRC. The Asia Foundation, yet another key sponsor of FRC, also extended its support to re-envision and reposition FRC to meet the new challenges of the changing context. FRC was at a crossroads in which future scope of work had to be assessed and there were also offers to support a transition. FRC seized the opportunity, amidst the turbulent changes to context and unreliable political environment, and commenced a process of exploring options for diversification and expansion. FRC has developed a broad programme framework to be in place for the next four years.

As per the Programme Framework, FRC works in two distinct areas of rehabilitation and prevention in the field of mental health/psychosocial intervention. By way of its programmes, FRC's goal is to have "Communities and systems strengthened to effectively address and prevent trauma in Sri Lanka".

To achieve this goal, FRC has decided to focus its resources in three specific programme areas – (1) rehabilitation for trauma survivors, (2) prevention of trauma and (re)victimization of survivors and (3) capacity building for the psychosocial sector. Within these three areas, FRC specifically focuses on Counseling, Awareness Raising, Networking and Referrals, Training and Capacity Building and Advocacy to deliver its programme. FRC's rehabilitation programme is community oriented. Within its rehabilitation programme, FRC will use the support of field data to

cultivate an advocacy practice. FRC's prevention programme has a community, district and national level focus, which addresses re-victimization and works with the identified root causes of severe trauma. The capacity building programme focuses on developing the psychosocial sector, individuals, and institutions at community and district levels. FRC must also recognize that institutional development will be key in ensuring the organization is adequately equipped and resourced to deliver its programme.

OUR DONORS



PARTNERSHIP

In order to address the psychosocial needs of the communities in the post conflict, resettled areas and adjoining regions, FRC implements projects in partnership with and significant support from the Ministry of Health (MoH), National Institute of Mental Health (NIMH), Provincial Ministries of Health, and many other Governmental and Non-Governmental Organisations. *To name some of them:*

- Centre for Environmental Justice (CEJ)
- Chrysalis Sri Lanka
- Consortium for Humanitarian Agencies
- District and Base Hospitals
- District NGO Consortiums
- European Union
- FOKUS Women
- HELVETAS
- Inge Genefke and Bent Sorensen ATS Foundation
- International Committee of the Red Cross (ICRC)
- Lanka Rain Water Harvesting Forum
- National Child Protection Authority
- National Universities
- Neelan Tiruchelvam Trust
- Psychosocial Forums
- Right to Life
- Samutthana
- Sarvodaya
- Sri Lanka Foundation (SLF)
- Survivor's Associated (SA)
- The Asia Foundation (TAF)
- UNFPA
- United States Agency for International Development (USAID)

FRC'S STRENGTH

THE BOARD OF DIRECTORS IN 2016

FRC is managed by a Board of Directors comprising 8 members who are responsible for its functions. The Board of Directors serves as the organisations 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 Programs. 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. Chelliah Surendran Nachinarkinian Chairman - FRC (Medical Doctor)

Dr. Thanabalasingam Gadambanathan District Psychiatrist, Teaching Hospital, Batticaloa

Ms. Shikanthini Varma Attanayake Company Director/ Project Manager, Bishops College

Ms. Manouri Kokila Muttetuwegama Attorney-at-Law

Dr. Upul Ajith Kumara Tennakoon Chief Consultant Judicial Medical Officer, Institute of Forensic Medicine & Toxicology

Ms. Dilkie Liyanage Fernando Finance Consultant

Prof. Sivagurunathan Sivayogan Professor - Department of Community Medicine, Faculty of Medical Science, University of Sri Jayawardanapura

Dr. Visvanathar Jeganathan Medical Doctor – Former Director General of MoH

MEMBERS OF FRC IN 2016

In addition to the Board, there are 7 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.

The following are Members of FRC in 2016:

Ms. Shanti Arulampalam

Ms. Amara Hapuarachchi (Resigned)

Dr. Deepika Udagama

Mr. Tuan lyne

Mr. Sunil Bastian

Ms. Indulekha Karunaratne

Dr. Palitha Bandara

SENIOR MANAGEMENT COMMITTEE (SMC) IN 2016

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. Amalka Edirisinghe

Director Programs

Mr. Nixon Lawrence Finance & Admin Manager

Ms. Mizly Nizar Project Coordinator

Ms. Kanchana Sanhari

Quality and Learning Manager

Mr. S. Sathieshkumar

Regional Coordinator — Aranayaka

Mr. Emilianspillai

Regional Program Coordinator — North

HEAD OFFICE

Ms. Tharshini Nanthakumar

Accountant

Harshini Thennakoon

Accountant

Ms. Niranjala Somasundaram

Quality and Learning Officer

Mr. Lakmal Ponnapperuma

Clinical Psychologist

Mr. S. Michael

Multi Duty Clerk

Mr. Sarathchandra

Driver

Ms. Induja Yogarajah

Accounts Assistant

Mr. Prasanna Kodithuwakku

Accounts Assistant

Mrs. Charmaine Kelaart

Secretary

Ms. Meena Logini

Office Aide

FRC Regional Staff

Kilinochchi

Ms. A . Sheriel Pamila

Mr. Charles Navarathnam Anton Punitharasa

Mr. George Jesu Jujeniyan Mr. Gopalapillai Kunanithy

Mr. Chandirakumar

Mr. S. Sivasthan

Mr. Mullan Gethera Ananda Vijeratna Thayanity - Field Officer

- Psychosocial Worker

- Psychosocial Worker

- Field Officer

- Driver

- Project Coordinator

- Regional Finance & Admin Assistant

Mullaitivu

Ms. Ushananthini Raveendranathan

Ms. Elangomannan Sasikala

Ms. Viththiya Thirukkumarar

Ms. S.R.Dhamayanthi

Mr.S.Jevatharan

Mr Antony Remigius Mr Makenthiran Sasikugan - Psychosocial Worker

- Psychosocial Worker

- Field Officer

- Psychosocial Worker

- Field Officer

- Psychosocial Worker

- Psychosocial Worker

Point Pedro

Mr. Jesuthasan Partheepan

Ms. Lourgini Amalathasan

Ms. Pushpalatha Ravikumar

Mr Rajalingam Jeyaharan

- Psychosocial Worker

- Field Officer

- Psychosocial Worker

- Field Officer

Mannar

Ms. Surenthini Jesubalan

Mr. R. M. R. Sara Vimal Raj

Mr. Balachandran Premachandran

- Psychosocial Worker

- Field Officer

- Field Officer

Aranayaka

Ms. Damayanthi Godamulla

Ms. W. A. Podihamine Thilakawardene Ms. B. V. Nipuni Thamara Dharmasena

Ms. Ishara Piyumi Weerawardane Ms. M. G. Visaka Kumari Wijesinghe Ms. M. M. Nadeeka Kumari Rathmale

Mr. B. R. Wasantha Nihal Rupasinghe

- Consultant

- Psychosocial Worker

- Psychosocial Worker

- Psychosocial Worker

- Field Officer

- Field Officer

- Field Officer

Vavuniya

Mr. N. Ragunanthanan

Ms. N. Geyaneethan

Ms. Sivachanthiran Mythily

- Psychosocial Worker

- Field Officer

- Psychosocial Worker

Trincomalee

Ms. Mathivathani Puththisigamani

Mr. Vijayarajah Kantharupan

Ms. R. Puspakanthi

Psychosocial Worker

- Field Officer

- Field Officer

Mr. Krishnapilla Mathiyalagan Psychosocial Worker

Ampara

Mr. Sothinathan Puvanantherraja Psychosocial Worker

Mr. S. Paskaran Field Officer

Batticaloa

Ms. A. Jeyaseely Psychosocial Worker

Mr. M. Suresh Field Officer

FRC'S REGIONAL CENTERS

Kilinochchi No 481, A9 Road (Kandy Road, Near the Court Complex), Kilinochchi, Tel: 024 324 8711

Email: frc-kilinochchi@frcsl.org

Point Pedro
Thiraveharam Station View,
Kadavatpulam Lane
Chunnakam, Jaffna.
Email: frc-point.p@frcsl.org

Tel: 021-226-1122

Mannar

No. 57/5, 2nd Cross Street, Pettah, Mannar

Tel: 0232251858

Email: frc-mannar@frcsl.org

Mullaitivu Temple Road, Karachchikudieru ppu, Mullaitivu. Tel: 021-229 0188

Email: frc-mullaitivu@frcsl.org

Vavuniya No.9 Anne's Home, 7th Lane Vairavapuliyankulam Vavuniya

Tel: 0242052144 Email: frc-avu@frcsl.org



Address: No. 296/14, Park Road Colombo 5, Sri Lanka

> Email: <u>frcsl@slt.lk</u> Phone: 011 2580166 Fax: 011 2580092