

Mobile clinics bring care to the community

FPA Sri Lanka promotes family planning as a basic human right, providing sexual and reproductive healthcare through, Static, Mobile, and Associated Clinics. These health centres are geared towards providing information, education, and counselling on SRH, contraceptive methods, sexuality, along with diagnostic services to those societies who are unreached and underserved.

The mobile clinics take these services to where the need is the greatest - to urban slums, rural communities, special occupational groups, including workers on tea plantations and in factories.

Many women working in the Zones cannot benefit from traditional home visits made by Health Assistants. Due to their inability to visit the government clinics due to work commitments, many women needing services cannot access regular clinics during working hours. Most of the employees are also living away from their homes, in boarded facilities. FPA Sri Lanka's Workplace Service Delivery programme, particularly in the Industrial Zones, is designed to address the needs of this key group of young men and women engaged in work, at their convenience.

We appreciate the employers who prioritize the health of their employees and enable such clinics to take place.



Mobile clinic at BT/Sathuliya Vidyalyam, Brinthuraichenai



At Brandix - Wathupitiwela EPZ



Mobile clinic at Kothmale Punduloya and Delta Health Centre



At VT Manufacturing (Pvt) Ltd - Kotmale

An Associated Clinic was established in partnership with East Lanka Polysack (Pvt) Ltd, Valaichchenai, and the FPA Service Delivery Point (SDP) in Batticaloa. This activity is conducted under the DFAT - RESPOND Project. Contraceptive products and leaflets containing vital sexual and reproductive health (SRH) information were handed over to the factory's health unit.

The SDP will thereafter conduct regular health clinics for the employees at the factory location. Employees can also visit the SDP for SRH and counselling care.



An Associated Clinic was also established in partnership with Baddegama Jo Lanka Apparel (Pvt) Ltd and the FPA Service Delivery Point (SDP) in Koggala.

Volunteer Health Assistants (VHAs) - strengthening links

VHAs are respected community health workers who have a close understanding of the community they serve. This trusting relationship enables them to serve as a link between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.

Under the RESPOND project, a two-day training was held for Health Assistants attached to the Batticaloa and Nuwara - Eliya Service Delivery Point.

Key topics discussed: SRH education and services, human sexuality, reproductive health systems, functions, reproduction issues and myths, family planning methods, the importance of counselling, referral systems, hotline services, Tele counselling, communication skills, barriers to effective communication, Maternal health - ANC and PNC, subfertility, unplanned pregnancies, STI, HIV/Aids testing and privacy.



I am a VHA at the Koggala Service Delivery Point (SDP). I work in the area of Thithagalla. I provided health services to the community when our village was isolated during the lockdown.

For those who required contraceptive products, I delivered them to their homes. I visited new mothers who did not want to become pregnant after having a baby. I advised them of the available options and referred them to the SDP. I was open to being contacted on the phone for any reproductive health emergency.

Deepa Priyanthi

CSE enables children and youth to make conscious, healthy, and respectful choices about relationships and sexuality!

Comprehensive Sexuality Education is essential for better preparing children and young people for their future. To be better citizens and, ultimately, happier and more caring human beings.

They learn about respect, consent, gender equality, and how to accept and celebrate differences in others rather than fear them.

Accurate, age-appropriate information, knowledge, and skills are key to avoiding teenage pregnancies or sexually transmitted infections.

Our Batticaloa Service Delivery Point conducted a two-day programme for BT/KK/Karuvakkeny Vigneswara College students.

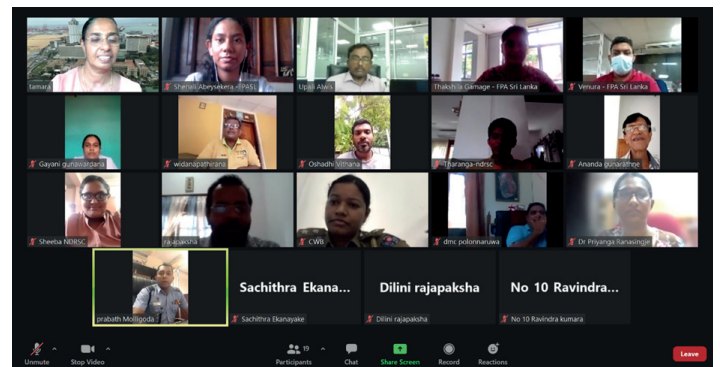


Mental Health Care Goes Online: Psychosocial Support during the COVID-19 pandemic - Two-day training programme for counsellors

FPA's Australian Government Department of Foreign Affairs and Trade supported RESPOND project's target beneficiaries include people living with a disability, adolescents and young persons, women/girls of reproductive age, poor, marginalized, underserved people, garment factory workers, LGBTQI+, and key populations, estate workforce, and urban and slum dwellers.

The seven FPA clinics involved in this Project are located in six Districts; Colombo, Gampaha, Galle, Batticaloa, Ampara, and Nuwara-Eliya, spanning four provinces.

One of the Project's key activities is to expand and increase the capacity of telemedicine and tele-counselling services as well as strengthen FPA's counselling hotlines. To this end, a two-day capacity-building session for ten counsellors on providing age-specific and gender-sensitive SRH counselling services to ensure privacy and confidentiality was carried out.



Incorporating SRH services into Disaster Management Policy - Respecting rights and saving lives is key in any emergency.



A consultative meeting took place with Dr. Tamara Wickramasekara (FPA SPRINT III Project Consultant), Dr. Neelamani Hewageegana, Mr. Chathura Liyanarachige (Assistant Director, Disaster Management Centre, - DMC) and Dr. Lakshman Senanayaka. Staff, representatives from the Family Health Bureau, DMC, National Disaster Relief Service Centre and FPASL were present.

Emergencies have a disproportionate effect on the poorest and most vulnerable. These include women, children, adolescents, those expressing non-binary gender identity or sexual orientation, and persons with disabilities.

A proactive approach that strengthens health systems and builds national, sub-national, and community capacity can reduce lives lost and mitigate the impact of disasters, especially for marginalized and vulnerable communities.

Gender Assessment Guidelines - Presentation to the National Forum Against Gender-Based Violence by Dr Thiloma Munasinghe.

SKPA-AFAO-FPASL

Responding to Gender Based Violence affecting Key Population & PLHIV communities

Presentation to the NATIONAL GBV FORUM
20/10/2021



The National Forum against GBV is a collective of over 50 agencies comprising the Government, United Nations, national and international non-governmental organizations, community-based organizations, and individual experts in the field.

The presentation included the following points:

- The HIV related Key Population/PLHIV background of the activity /request from the target communities to address this issue, aka Gender Review 2019
- Objective of the draft guideline
- Concept and role of the proposed community-based peer counsellor
- Overview of the guideline content

Feedback from the target communities will be used to finalize the Guideline following its presentation in the upcoming training workshop.

To view the presentation, [click here](#).



Public Health Services, Ministry of Health. Other speakers at the event were Thushara Agus, The Executive Director, FPASL, Dr. Sashiprabha Nawaratne, Senior Registrar in Community Medicine (Principal Investigator), Mrs. Nadika Fernandopulle - Coordinator GFATM, FPASL, Dr. Sathya Herath - Consultant Community Physician, National Programme Officer, NSACP, Dr. Rasanjalee Hettiarachchi, Director, NSACP, Dr. Rohan Rathnayake, Director / Directorate of Mental Health, Ministry of Health, Mr. Niluka Perera - Communications and Coordination Officer at The Global Fund. The workshop concluded with a panel discussion with the participation of Dr. Janaki Vidanapathirana, the Principal Investigator, Consultant Psychiatrist, individuals representing Community groups, and FPASL representatives.

HIV Community based testing roll-out in Gampaha, Kandy, and Ratnapura

Community-based HIV testing (CBT) happens in a non-clinical setting but under the supervision of medical staff. This is an effective approach to reach people at risk of HIV who have never been tested in the clinic setting.

FPA Sri Lanka and NSACP conducted the training for the Gampaha, Kandy and Ratnapura district-based Sub Recipients who are working under FPA for The Global Fund supported National HIV Prevention programme.

SARD (Gampaha), YMMA (Kandy), ECDIC (Ratnapura) commenced CBT under the direct supervision of STD clinics in the relevant districts.



A study was conducted among psychoactive drug users in the Western province, supported by FPA Sri Lanka. and a evidence dissemination workshop of the study took place on the 14th of December 2021 at the Waters Edge Hotel.

Dr Janaki Vidanapathirana - Director, National Cancer Control Programme, Ministry of Health presented the Introduction and welcome address. The Chief Guest was Dr. Lakshmi Somatunga, Additional Secretary,



Tarangee Mutucumarana
LL.B (Hons)(Lon.), LL.M (Lon) Attorney
at Law, Barrister at Law of
England and Wales
FPA Sri Lanka Youth Technical Advisory
Committee Member

The Importance of giving Boys and Young Men Sexual and Reproductive Health awareness.

Our society's attention is highly gendered and focused on controlling the sexual behaviour among girls and women. We live in a country where some men refuse to use condoms and disallow their wives to purchase other methods of contraception, where men decide the family size, when to have kids and when to adopt family planning, where a woman cannot get herself sterilized without the permission of a man, where conversations on family planning do not occur and where abortion laws are so restricted that a woman cannot decide what to do with an unwanted pregnancy even if she was raped!

“Who do our bodies belong to? Our governments, our families, our country? If our bodies do indeed belong to our own selves, then we are the only ones who should decide what to do with them. Whether it is who we choose to love or have sex with or whether we choose to continue a pregnancy or not. That is what bodily autonomy means!” - Dr. Suchitra Dalvie.

The attitude of patriarchal men must change. To do so, they must be made aware to sexual and reproductive health rights (SRHR) of both men and women and the existing constructions of masculinity that shape their sexual behaviour.

While progress has been made in the health sector, challenges exist in SRH services as SRH remains controversial and contested. Thus, adolescents are ill-prepared to protect themselves from the unwanted consequences of sexual activity. They lack access to information and have no-one to discuss sexual matters with. Indifference, ignorance, prejudices, poor communication and the inability to make informed choices, because they have been excluded from SRH services and education, contribute towards the lack of progress in the SRH sector.

Comprehensive age appropriate SRH education using scientifically accurate, realistic, and non-judgmental information, to provide adolescents with the ability to make informed sexual decisions, and to avoid unwanted sexual encounters, extensive SRH services including counselling on family planning, STI clinics, access to contraceptives without stigmatization and, sexual violence support services must be provided. It is also important to research on SRHR of boys and young men as, missing them in research, leads to missing them in health care practices and policies. All this will require systematic, co-ordinated programmes and evaluation to determine effectiveness by the government and other stakeholders, as well as the support of the community.

For women to enjoy rights, an environment where men actively support those rights and challenge the patriarchy must be created. Simple steps of respecting women's autonomy when they say yes or no to sex, contraception and abortion is a start. Male behaviour impacts women, children and society as a whole. While we encourage men to be more supportive of women's choices and rights, men's own SRH needs must be addressed. A good understanding of family planning, sexual rights and reproductive health will make them understand that they do not have a right to control women's bodies.

“Family planning is a lifetime return for people and it is very important to involve everyone in this mission.” - International expert and activist, Ms. Tanzila Khan.

The importance of men's involvement in promoting SRHR is universally agreed upon and a lack of understanding about adolescent SRH needs is a matter of national concern. Notions of patriarchy enable men's entitlement and sexual domination over women. Thus, in order to address underlying power and gender imbalances, and their effects on health, it is essential to work with men in promoting gender equity. It's time equal, accessible, acceptable, affordable, and convenient access to quality SRH services is made part of our health coverage and awareness that deliberately challenges common stereotypes about sexual health issues is provided for the improvement of SRHR of women and men.

WHAT IS MORE EXPENSIVE THAN CIVIL WAR? SEXUAL VIOLENCE.



Violence against women and girls is an extreme violation of the human rights of women and girls, and it generates huge economic expenditure for women and families, as well as for communities and societies. This article aims to shed light on the economic cost of sexual and gender based violence against women and girls (SGBV), as well as encourage the general public / society to reconstruct certain cultural beliefs that hinder the elimination of SGBV in Sri Lanka.

Lakshmi Puri (UN Assistant Secretary-General and Deputy Executive Director of UN Women) mentioned, the economic cost and deaths caused by intimate partner violence is much higher than that of civil war or homicide. Economic costs include indirect costs such as lost productivity, wages and potential, as well as direct costs such as health care, counselling, and other mental health services, the justice system, child and welfare support, and more. These costs take up a large percentage of the monthly income of women; those facing SGB-violence also earn 60% less than those who do not face it (keep in mind one in three women face abuse in their lifetime).

UN Women Asia recently shared their research findings which mentioned, 16% of surveyed women who experienced intimate partner violence in Sri Lanka, reported they had to take days off work; 32% reported they had to seek medical attention for injuries, and their children also had to miss school. Furthermore, Renuka Jayasundara (DIG in charge of the Children and Women's Bureau) mentioned there were 10-15 cases of rape committed daily in Sri Lanka - keep in mind, not all incidents are reported. She also stated the most frequent complaints of rape was among children between the ages of 10-15 years old.

We cannot even dream of eliminating poverty or developing economically, if violence against women and girls in Sri Lanka is so prevalent that it negatively affects their participation in education and employment. Responding to these unacceptable issues consume resources (from social service organisations, the justice system, health care agencies and employers) that could otherwise be utilised for national economic gain. For example, it takes less to educate

a generation, and implement policies to prevent sexual violence, in comparison to the work and resources needed to completely restore and heal the trauma of a generation, and those they produce.

As a community and society, if we can reframe some of our beliefs that still uphold rape culture and glorify the patriarchy, we can effectively eliminate violence against women and work on closing resource / social / economic gaps, and support empowerment of women and girls. We can start with identifying and rectifying myths, stereotypes and misconceptions that are present within our community and hinder the elimination of SGBV. These include victim blaming ('it is her fault for being out late'), undervaluing the concept of consent ('women say no when they mean yes as they are playing hard to get'), overly generalising the meaning of sexual violence ('light touching is not sexual violence'), invalidating a survivors experience ('she is exaggerating for attention') and being unwilling to stand up for survivors ('it is a women's issue alone').

SGBV is not a women's issue alone as we all bear the cost either directly or indirectly. We must all actively do our part to help eliminate it completely.



Nikita Shuhumar

UN Women - WEPs Corporate Partner
Humanitarian Services Head - Seven Seas Holdings Ceylon (Pvt) Ltd
FPA Sri Lanka Youth Technical Advisory Committee Member
Media Personality - India / Sri Lanka

'Fatalities': A Publication on Accidents, Suicides and Femicides of Women & Girls in Sri Lanka

UNFPA recently commissioned a study, which is the first of its kind in Sri Lanka, to understand the contributory factors of unnatural deaths that women and girls by analyzing accidents, suicides and femicides in Sri Lanka from 2013-2015.

Conducted by the University of Kelaniya, the study focused on unnatural female deaths in five provinces in the country.

[Click to view.](#)

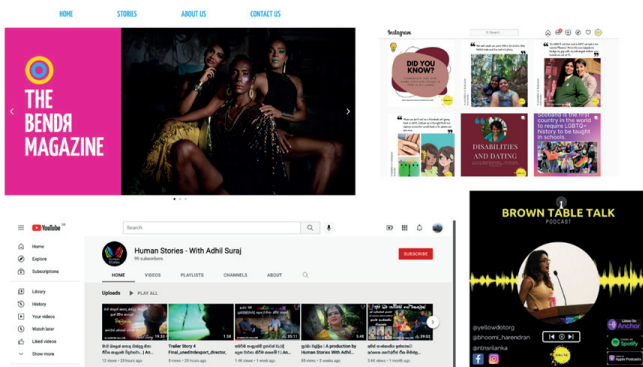


Advocacy - Reported by Sonali Gunasekara, Director

Media and Advocacy project

The Advocacy Unit under SARO IPPF and RFSU projects conducted a Media Fellowship Programme with 20 young people on developing, and posting LGBTIQ friendly information on social media and the general media. The young people have launched books, websites, magazines music videos, documentaries, art and platforms on media channels this year. Their deliverables will be spilling over to the first quarter of 2022. This extension was taken up as lockdowns and curfews delayed a lot of deliverables. Our digital transformation during this project has been both a source of challenge and strength with our reach going far beyond what we could impact but also constraining us with COVID challenges.

With 2022 coming, we will be witnessing the scaling of this project and it will physically be going into districts and regions to carry out nationwide programmes of this nature. The plethora of colourful deliverables are a testament to the success and impact of the project.



Civil Society strengthening project UNFPA

Under the UNFPA FP2020 Project, FPASL held five, two-day residential youth camps and ten online Youth Camps, targeting youth as the most in-need subpopulation in the country. The youth were contacted through the CSOs working in the area, universities, and youth clubs operating in each district. The subject areas covered in the Youth Camp are Sexual and Reproductive Health and Rights, Anatomy and puberty, Contraception, Pregnancy and Termination, Gender and GBV, Relationships and Services and referrals.

Sixty, grass-root level trainings were conducted by the Public Health Midwives with community members to enhance the population's knowledge of family planning and modern contraception method.

Six Training of Trainer programmes (TOT's) were held with civil society activists in Trincomalee, Vavuniya and Matala districts.



Youth Camp at the Sarvodaya Training Centre, Uppuveli, Trincomalee

Plans for 2022

- Conducting four Sensitization programmes with women in the private sector in Gampaha and Kalutara Districts.
- Conducting six Sensitization programmes with women in the urban setting in Gampaha and Kalutara Districts.
- Holding six Advocacy Road Maps in each Province

Abortion study

An attitudes and perceptions study on abortion was completed during this year. Some of the key findings from the study are: **Young people would like the law on abortion to change under certain circumstances such as rape, incest and fetal deformities; the estate community members are more knowledgeable about abortion than the other communities; needing an abortion because of pregnancy resulting from consensual sex is not looked on favourably since contraception is freely available in the country; abortion is highly stigmatized as it is seen as promoting extra marital relationships; legalizing abortion for health reasons is approved but legalizing abortion for rights based thinking is disapproved.** An abortion communication strategy will be developed in 2022 following the completion of the abortion study.

Sustainability of HIV Services for Key Populations in Asia Programme (SKPA)

The main activities were: Organisational strengthening for CSOs providing HIV Services, Development of Guidelines for Peer Educators on Gender-Based Violence and Suicide Ideation, Demand Generation for PrEP and HIVST, Provincial Community Consultations for the Transgender Protection Bill, Setting up a Community-led Transgender Health Centre, and Introducing a Community Based Monitoring system to counter stigma and discrimination. COVID related restrictions and lockdowns posed a significant challenge in hosting physical events; almost all training and workshops were conducted virtually.

Australian Federation for AIDS Organisations and FPA Sri Lanka applied for the SKYPA2 grant and was awarded the second grant for the next three years. Currently, we are carrying out foundation activities during the grant closeout period to strengthen the implementation of the SKPA 2 programme ahead of its implementation. The next grant will concentrate on HIV financing, stigma and discrimination, and strengthening government systems.

After ending the most challenging year (2020) in the history of SMP, we started 2021 with lots of hope and vitality. The year began well, and we were well set for achieving our regular targets. But we had to face a few unexpected challenges.

Two of the severest were:

Oral Contraceptive Pills supplier Bayer Pharma, Germany backing out, saying that they cannot supply directly and for us to procure through IPPF at a much higher price.

Our main supplier for Depo Provera contraceptive injections suddenly ceased supply due to a global shortage of the product as the manufacturer Pfizer transferring their plant which produced Depo Provera to manufacture COVID vaccines.

Though we had to face short term setbacks, we were able to find long term, firm solutions for these two issues.

We registered our own Oral Contraceptive Pill from Renata Bangladesh under 'Mithuri' brand (previously though we were selling Oral Contraceptives under 'Mithuri' the product we sold was registered in Sri Lanka by Hemas Pharmaceuticals).



We were also able to sign an agreement with Mylan Pharmaceuticals to import Medroxy Progesterone Injection under our own branding. These initiatives will definitely help us further establish our Social Marketing Programme in the years ahead.

We also faced issues related to the distribution of our products due to constant lockdowns. Therefore, we listed our products on most online platforms such as Daraz, Kapruka etc. We also developed our own e-commerce site 'Planet 361' with the support of SEAP for fast and reliable delivery of our contraceptives. In addition to that, customers in Colombo and suburbs can order contraceptives through Pickme and Uber.

Due to the second wave of COVID-19 after Avurdu and resulting lockdowns in May/June, there was a considerable dip in our sales which we are still struggling to recover from. As of end November, SMP had achieved 87% of the annual target. Achieving the balance 13% in one month will be a daunting task, but our goal is to minimize the gap in revenue and increase the surplus generated at year-end.

Due to most of the suppliers increasing their prices, devaluation of the Sri Lankan Rupee, increased freight charges and limitations, we have had to increase our retail prices arbitrarily and this has squeezed our margins. However, due to the prudent management of our finances, we are positive that we will exceed the promised surplus at the year-end.

Another challenge we face currently is opening L/Cs for imports. Previously most of our products were imported on D/A terms with a credit facility where we did not have to block our capital for imports. But presently, due to the country's shortage of US Dollars, we have to wait for months in the queue to get an L/C done even after blocking our capital. This has resulted in certain shipments getting delayed, and managing stocks has become a nightmare.

We are happy that we were able to mitigate most of the challenges and move forward with the support and advice from the senior management team headed by Executive Director Ms. Thushara Agus and the National Council led by Mr. Chandima Gunawardena, SMP TAC headed by Ms. Dawn Austin and all support staff of FPA Sri Lanka including finance, stores and packing, transport etc.

Lastly, I must thank my Marketing/Sales and Credit Control team for doing a wonderful job under very trying conditions to bring the year-end to a satisfactory level. Though we could not achieve all our set goals for the year, the most important ones, such as helping the organization with cash flow to pay salaries and providing every client with a good quality contraceptive of their choice at an affordable price, were fulfilled by us during the year 2021.

I am looking forward to a great year ahead!



Looking back at a year that changed the world.

We all have come to the last month of what's been an unusual but interesting year. The year 2021 shifted the world from offline to online on every aspect of our lives. Despite the challenges we faced due to the COVID-19 pandemic, 2021 ends with many achievements and developments in the Monitoring and Evaluation system at FPA Sri Lanka.

We developed and implemented a TABLET application to collect client feedback and suggestions to improve our efforts. The newly developed client feedback application was integrated with the service delivery module of the Monitoring and Evaluation Information Management System (MEIMS) of FPA and facilitated the calculation of Net Promoter Score (NPS) with many data disaggregation levels.



Click to download the application from Google Play Store (Device-Tablets only)

Username :- CFBMONM
Password :- Mon@123m

We started designing a mobile application to automate the service delivery process of Community Based Service Providers which is expected to be fully implemented in 2022. Once it is operationalized, the mobile application will support the overall client management in Community Based Service Provision which includes real-time reporting, stock management, performance based incentives, etc. The existing paper based formats including daily record books, bi-weekly reports are expected to be fully converted into the electronic form.

Data has no value unless you convert those into meaningful messages.

In 2021, we developed a TV application to visualize and share real-time data among our clients and visitors. The paper-based Performance at a Glance billboard which we used to develop over the years, will be entirely replaced with the newly developed TV application. We integrated MEIMS

with Microsoft PowerBI to develop various dashboards including, [1] **SRH Country Profile**, [2] **Our Performance at a Glance 2020**, [3] **Work in Progress 2021**. (Click to view) The general public can access the newly developed dashboards with real-time data through our corporate website and MEIMS homepage. A management dashboard with a more comprehensive analysis and visualization of our performance data is expected to be developed in 2022.



We believe the generation of strategic information for universal access to Sexual and Reproductive Health is a key responsibility of FPA. In 2021, we started designing a research study on unintended pregnancies and unsafe abortions among female factory workers of the Koggala Export Processing Zone. We received ethical approval from the Ethical Review Committee of Sri Lanka Medical Association (SLMA – ERC) to carry out the research in line with national and international guidelines. The study will be finalized in 2022.

As pioneers in reproductive health, we are always committed to learning from our achievements and mistakes. We conducted two programme reviews in 2021 namely; [1] Review of HIV and STIs services provided through static and mobile clinics (2015-2020), [2] Review of the FP2020 intervention funded by UNFPA. We continue to work on improving our Monitoring and Evaluation Processes and Procedures. A guidance note on Assessment, Recording and Reporting of Gender Based Violence (GBV) Services was developed and implemented in 2021. We are excited to see the change that we have initiated in recording and reporting GBV services through a comprehensive review to be conducted in 2022.

We expect a better year ahead and are excited to apply our learnings from past years and continue to accelerate the OFFLINE-to-ONLINE shift in 2022 and beyond. We intend to automate the processes of online training programmes and develop an online programme and event module in 2022.

FPA Sri Lanka as Principal Recipient 2 (PR2) worked directly with 13 implementing entities in four districts, implementing the High Intense Model in the two main Districts and rolling out the Peer-led targeted interventions in the others. Main activities included; training, expanding Community Based Testing, implementing HIV self-testing, training outreach workers on PrEP, linking clients for PrEP and continuing online outreach approaches to reach clients in Colombo and Gampaha during the COVID-19 related lockdowns.

Due to the pandemic, the 'Hotspot' based clinics were not possible. However, FPA with NSACP and other Community Organizations in Colombo; Community Strength Development Foundation and Mithuru Mithuro Movement implemented a series of Hotspot based testing clinics for World AIDS day activities during November/December.



HIV testing clinic at Samadhi Madhura, Badowita

NSACP launched the HIV Self-Test during a very crucial period when the clinics were not in operation. The self-test was very successful in reaching high risk groups who will generally not access the STD clinics. This strategy was very effective in Colombo and Gampaha. It was surprising that many clients prefer an oral HIV test to a finger prick Rapid Test. In a short period of four months, around nine reactive clients were identified and linked to clinics.

The Global health crisis was a continuous challenge and especially affecting all our HIV related work with high risk key populations (KP). KP groups, especially Drug Users were seen as COVID spreaders and thus had limited access to health services.

The High Intense Model in Colombo and Gampaha, was able to identify more than 20 new HIV positive cases. This was a great achievement with the pandemic, lockdown measures and travel restrictions. With the Men who have Sex with Men (MSM) driven epidemic, the Gampaha Sub Recipient (SR) organization, SARD was very successful in finding more HIV reactive clients. The newly joined Colombo SR, Heart to Heart also performed extremely well during the short period. Real time mapping, night time mapping and physical Hotspot based outreach was a challenge with restrictions but Dr. Scott Berry and the national coaches continued to work daily

and coach teams on case finding through online outreach approaches, etc.

Night clinics targeted at transgender (TG) night parties were not possible even during 2021 due to the pandemic. The stigmatizing pandemic created more challenges in reaching TG groups who wanted to be disconnected from other groups. They had to face more challenges at home and in their own communities with the delayed gender transition process due to COVID.

Lanka Plus leading the process and coordinating with Positive Women's Network and Positive Hopes Alliance, the PLHIV organizations continued to deliver ART during lockdowns. This was an excellent initiative for PLHIV members who found it difficult to access clinics.

Routine data recording, reporting in MEIMS, verification continued but physical spot checks by the M&E team could not be conducted due to with travel restrictions. The pandemic affected our overall financial performance as most physical programmes were held virtually and the allocated activity costs were unspent.

PPE kits funded by The Global Fund were provided to all partners under the guidance of the Additional Secretary, Ministry of Health. UNFPA also provided PPE kits for clients reached by the KP organizations.

The Female Sex Workers (FSW), Drug Users (DU) and MSM DICs were able to complete most of their planned activities. Community Based Testing was done regularly for clients who do not wish to visit Government testing sites.

On the direction of NSACP, FPA with Dr. Scott Berry, trained all outreach workers working in the peer led model implemented in 13 districts. The training had to be done virtually to enhance the peer outreach services and support teams to identify high-risk/ HIV positive groups, etc.

Plans for 2022

FPA Sri Lanka will be the Sub Recipient of the upcoming National HIV prevention new grant (2022-2024) funded by The Global Fund. The Principal Recipient will be the National STD/AIDS Control Programme. After working as Principal Recipient 2 for nine years, FPA will take on a new role as the Sub Recipient for Colombo and Gampaha districts (Epicentre). FPA will continue to implement the High Intense Model in these two districts with more focus on Community Based Testing, Self-testing and Hotspot based testing to reach key populations who have never tested in facility based testing sites. Under the guidance and supervision of the PR, the service delivery of PrEP will also be included in the package for MSM and TG components. FPA will continue to provide its Head Office clinic as a weekend KP Clinic site for clients who are reluctant to visit Government clinics on working days.

Medical Unit -

Reported by Dr. Nuzrath Nasoordeen, Deputy Director

The Medical Unit was fully operational and offered services to visiting clients on an appointment basis in the first quarter of 2021, in addition to hotline services provided by all service providers attached to the unit. However, the clinic was closed at times due to on and off lockdowns imposed by the state to contain the COVID-19 spread. The expected target was not met, and only one Mobile Clinic was conducted during the year.

Responding with Essential SRHR Provision and New Delivery Mechanisms (RESPOND), a DFAT (Department of Foreign Affairs and Trade - Australia) funded programme, was implemented at all seven FPASL service delivery points to support SRH service delivery during the pandemic. A capacity building training for staff on infection control and counselling skills training was conducted under this programme in 2021, and four more were scheduled for 2022.



Training session on standard precautions for infection control at the Batticaloa SDP

Weekly clinics supported by RESPOND are held on Saturdays at the Centre for Family Health (CFH), where all SRH services are provided free of charge to the general public.

In 2021, CFH offered approximately 2391 services to 665 clients through the Static Clinic at the HO.

Alokaya Counselling Centre

Alokaya provides counselling support to people with sexual reproductive health issues and psychosocial problems through its static clinic. It has recently expanded its scope to include other areas of personal concern. The Centre offers visiting counselling to employees of corporations registered with FPASL through the Associated Clinic. The majority of service provision in 2021 was done over the phone and through social media with limited visiting counselling services due to COVID-19 pandemic health measures.

There was a significant drop in the use of counselling services due to the unavailability of visiting services for most parts of the year. Clinic services resumed for visiting clients in November, resulting in approximately 150 clients receiving services in 2021.

Happy Life Contact Centre

The Happy Life Call Centre is a project aimed at providing accurate SRH information and advice to the public through a variety of channels, including a hotline (0112 588 488) and 0765 884 881 (SMS,WhatsApp), e-mail (happy@happy-life.lk), and a website (www.happy-life.lk). Approximately 2000 services were offered in 2021. There were gaps in service delivery due to the retirement of the Happy Life staff. A youth call instructor was hired for the next two years, supported by the RESPOND programme.

In October 2021, the Happy Life FB page supported a Facebook live session on cyber violence awareness as part of the RESPOND programme, with sign language interpretation. In addition, as part of the same project, a series of FB live sessions will be held over the next two years via the Happy Life FB page.

[Click to view](#) a client testimonial.

SRH Institute

The SRH Institute is the Medical Unit's income generation arm and provides comprehensive SRH knowledge on demand. For a fee, the SRH institute provides a variety of training programmes, workshops, internships, and other opportunities.

In 2021, one batch of eleven students completed a Counselling Skill Development Programme, and another batch of thirteen students commenced the programme in December 2021.

On online platforms, a series of workshops were held for workers of the registered corporations, including a parenting programme, two stress management programmes, and a relaxation programme. Furthermore, during 2021, Alokaya presented a session for the Family Health Bureau's (FHB) counsellors and medical doctors at the GBV training programme hosted and organized by the FHB. Badra Udawatte (Deputy Director Alokaya) held a virtual session for the Deaf Women's Association, Seeduwa on SRH and relationship issues, which over seventy people attended.

For the first quarter of 2022, a sex therapy and a neurolinguistics programme for counsellors is planned.

The Outreach Unit's (OU) primary responsibility is ensuring access to quality right based sexual and reproductive health knowledge and services for poor, marginalized, underserved and socially excluded people through its six service delivery points. The usual activities are conducting awareness sessions on SRHR and holding health clinics.

Due to the COVID 19 pandemic situation and the guidelines issued by the government, curfew, lockdown and travel restrictions, the (ORU) could not implement project activities, conduct clinics and awareness sessions as planned. Targets were not met. The SDPs were periodically closed during the year. Staff worked from home, the number of clinic days had to be reduced, and the number of clients had to be limited to adhere to the health guidelines.

Education programmes on COVID 19 and training programmes on Infection Control for SDP staff and service providers were conducted via online platforms. All SDP's were upgraded as per the Ministry of Health guidelines to protect staff and clients from COVID 19.

With some normalcy returning in the third quarter of the year, all SDPs reopened and began SRH service provision, with staff working on a roster basis to maintain a safe working environment.

Few CSE programmes were completed as online sessions. The RESPOND project grant was received, and SRH service provision commenced, introducing new strategies and approaches.

The SPRINT III project focusing on SRH service provision during emergencies will conclude in 2021. Most of the sessions during the year were on knowledge sharing and

capacity building, developing materials and resources, the inclusion of marginalized communities in preparedness planning and service provision etc. and were carried out through online platforms.

In 2022, the ORU projects intends to address a range of SRH issues of the PMSU community, apparel sector workers, and the estate sector community.

Under the CORE grant, Levi Strauss and RESPOND project, 576 Static Clinics, 150 Mobile Health Clinics, 25 Associated Clinics are planned to be conducted through our six service delivery points.

36 dedicated health assistants will be utilized to disseminate SRHR messages and provide referrals to clients to service delivery points.

A 24-hour hotline counselling service, telemedicine, tele-counselling and home visits and home delivery service models will be followed to offer more SRH services. We intend to deliver nearly 200,000 SRHR services.

With the continuing uncertainty of the COVID 19 situation, planning for 2022 is quite a big challenge.



CSE workshop for nursing students at H&D Nursing School (Pvt) Ltd, Arayampathy

A team from IPPF, South Asia Region, Ms. Garima Sharma, Technical Advisor, Humanitarian, Harjot Khosa, Senior Technical Advisor, Business Development & Resource Mobilization, and Mr. Shivam Shumsher, Digital Health Interventions Officer, DHI visited FPA Sri Lanka from the 12th - 19th of December to review the progress of the SPRINT, LEVIS, and RESPOND projects carried out by the Outreach Unit.



At the Nuwara-Eliya Service Delivery Point



At the Minimum Initial Service Package (MISP) Training for nurses of the Sri Lankan Army and Navy, held at the Chinthana Centre



In conversation with, **Saman Perera**
Deputy Director - Finance

Could you tell us a bit about your career path prior to becoming the Deputy Director of Finance?

Prior to joining FPA in 1997 as an Accounts Clerk/Assistant Cashier. Previously I worked in two other organisations. After two years, I was promoted to book keeper and after being in that position for 4-5 years it was re-designated to accountant.

In 2007 I was promoted to Deputy Finance Director. This is my 24th year of service at FPA Sri Lanka. I have worked under four Executive Directors and six Finance Directors, including the current Executive Director and Finance Director.

Share some insights into your role and the projects you manage.

When FPA became a Principle Recipient of the Global Fund Project in 2013, I was appointed as the Finance Manager of the GF project under the supervision of Director Finance.

The Global Fund supports countries in their efforts to fight AIDS, Tuberculosis and Malaria. Each grant is implemented by a Principal Recipient (PR) working under the National Programme. The HIV Grant has 2 PRs - Government PR (NSACP) and Non-Government PR (FPASL). The funding request is submitted by the Country Coordinating Mechanism (CCM) and both PRs collaborate with relevant stakeholders to develop the Concept Note and other related documents. After the funding request, performance framework and budgets are reviewed and approved, and both PRs implement activities separately under one National Framework.

Under the 2016-2018 framework we had to manage 3 Sub Recipients (SR) under the GF Project. This has increased up to 24 SRs in 2018-2021 since GF has treated all sub-sub recipients (SSR) as sub recipients.

We submit the Progress Update and Disbursement Request (PU/DR) after collecting all financial and programmatic data from SRs/SSRs to the GF as per the given deadlines. Initially PU/DR was submitted on a semester basis, currently it is on an annual basis.

Managing donor funded projects has its challenges, both internal and external. What are they and how do you assure the attainment of your financial objectives?

First of all we should clearly understand the donor/project requirements as per the signed MoU or Agreement and what procedures/guidelines we should follow when conducting the activities. Some donors are insistent on following special guidelines/procedures at the time of reporting and cash managing etc.

When it comes to internal/ external challenges it is required to closely monitor the project requirements especially proper budgeting/ time lines etc. In addition, recruitment of project specified staff, over spending, re-allocations, proper record keeping, external audits, and meeting the donor deadlines can be challenging.

How has FPA Sri Lanka adapted to changes since you joined to date?

When I joined FPA, it was handling only IPPF funded projects, mainly SRHR related. However currently we are receiving funds for HIV/AIDS, Advocacy, Disaster Management Projects, etc. This is the biggest change and as per my belief, FPA has taken the right decisions always, at all times.

Share some words of advice. If you were just starting out in your accounting career, which skills or aspects of finance would you be focusing on to get a competitive edge?

Hard work, honesty, time management and dedication to the assigned task are the key components required for success in your career in addition to professional qualifications.

Welcome to the Team



D.P. Isuri Imeshika
Data Entry Operator cum
Programme Assistant
Wathupitiwala SDP

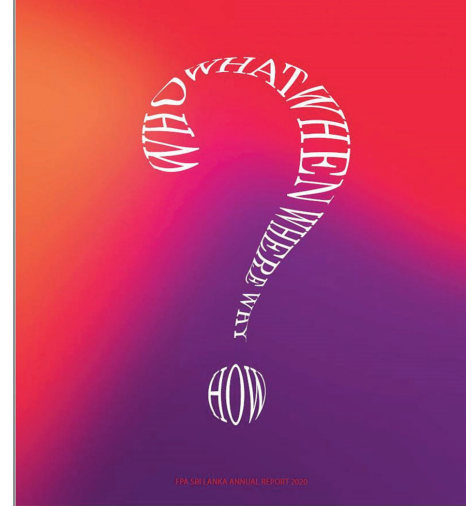
FPA's 50th Annual General Meeting

The meeting took place on the 30th of October 2021, via zoom. The National Council and Technical Advisory Committees remain unchanged for the ensuing year as well.



The 2020 Annual Report was virtually presented at the event.

To view the Annual Report, [click here](#).



'FPA Sri Lanka went above and beyond in supporting those who had been marginalized, especially in the context of a global pandemic that created much fear and anxiety. We continued to deliver products and services that assisted and advocated our principles of safe and informed reproductive health among other vital issues. During the year under review, we were faced with several restrictions to our essential work, nevertheless, we persevered in order to carry out our activities, albeit moderately, in alternate ways'.

Excerpt from the 2020 Annual Report



Social Media Campaigns

International Day of the Girl – 11th October

The International Day of the Girl Child focuses attention on the need to address the challenges girls face and to promote girls' empowerment and the fulfilment of their human rights. FPA's youth team and the UNFPA project's youth camp participants from across the island shared their views on the need for comprehensive sexuality education, gender equality, and protection from sexual and cyber violence.



To view campaign materials, [click here](#).

With increased access to technology, youth are more likely to own and use cell phones, computers, and other electronic devices than ever before. This has benefits, but it also increases the risk of abuse. To raise awareness of the situation and provide guidance on how to best protect oneself online, a FB live session was carried out in partnership with Hashtag Generation. To view the FB live session, [click here](#).



INTERNATIONAL DAY OF THE GIRL



“

பெண்களின் உரிமையை சிறுமியர் பராயத்திலே உறுதிப்படுத்துவதும் அதனை அவர்களை கொண்டே தீர்மானிக்க வைப்பது என்பதே முக்கியம். அது நீண்டகாலம் நீடித்து வாழும் மரத்தின் ஆணிர வேர் போன்று செயற்பட்டு பயனை தரும்.

It is important to ensure the rights of women at an early age and to let them decide for themselves. It acts like the root of a long-lived tree and bears fruit. "My Voice, Our Equal Future"

T. SHIRANI

FPA YOUTH CAMP PARTICIPANT (BATTICALOA)

16 Days of Activism Against Gender-Based Violence

25th November



#OrangeTheWorld #16days campaign launch with the Netherlands Embassy at their visit to FPA Head Office on the 25th of November 2021. The Ambassador of the Netherlands to Sri Lanka, Tanja Gonggrijp delivered "Orange The World" banners to Embassies and organizations to raise awareness on violence against women and girls.

Curious - Why orange?

Orange was chosen as a colour because of its vibrancy and association with hope, strength and perseverance. What's more, it symbolises a brighter future free from violence against women and girls.

The 16 Days of Activism against GBV is an international campaign originating from the first Women's Global Leadership Institute sponsored by the Center for Women's Global Leadership in 1991. Participants chose the dates November 25 - International Day Against Violence Against Women - and December 10 - International Human Rights Day in order to symbolically link violence against women and human rights and to emphasize that such violence is a violation of human rights.

"Gender-Based Violence is one of the most prevalent human rights violations in the world. Globally, an estimated 1 in 3 women will experience physical or sexual abuse in her lifetime. Since the outbreak of COVID-19, the situation for women and children has worsened worldwide. Staying at home under the lockdowns proved especially dangerous for women, as domestic violence increased dramatically. The more reason to take a stance together against Gender-Based Violence!", Ambassador Gonggrijp said.

FPA Sri Lanka also joined hands with the National Forum against Gender-Based Violence to raise awareness on this issue. A special FB live session was conducted on the discrimination, abuse, and violence that transgender persons and others who do not conform to social expectations about gender face in Sri Lanka. Bhoomi Harendran, head of the Sri Lanka National Transgender Network was the guest speaker.

To view campaign materials, [click here](#).

World AIDS day - 01st December

The National STD/AIDS Control Programme, Ministry of Health spearheads the national response to HIV/AIDS in Sri Lanka together with FPA and other partner organisations with the aim to end AIDS by 2025.

Particularly through the SKPA project, the goal is to promote sustainable services for key population members, scale-up outreach work, and improve key population members' access to prevention, testing, and treatment. Also strengthen advocacy efforts, community response systems, and address barriers to access, including addressing stigma, discrimination, and other human rights and gender - related barriers to services.

A social media campaign was carried out with the participation of Service delivery point healthcare staff, peer educators, activists, case finders, people living with HIV, community members, and FPA and Global Fund Project staff to share facts, encourage testing, and seek treatment.

Executive Director, Thushara Agus in her statement said:

"Ending pandemics is hugely affected by social and economic inequality. Although we have aimed at equal access to health, we have failed time and again in ensuring equality in healthcare. The ongoing vaccine inequality and the debilitating effects of it on ending the COVID 19, is a good case in point.

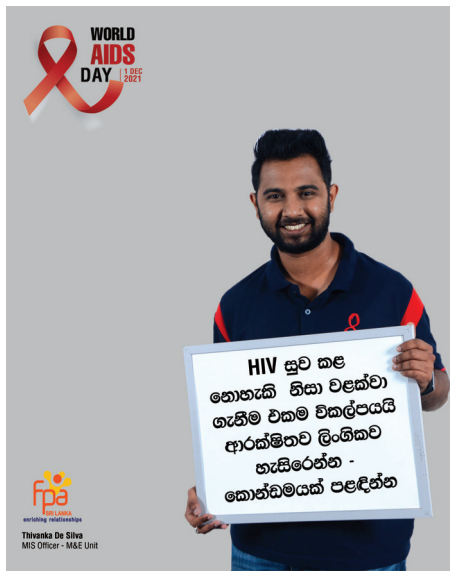
For ending AIDS, our long drawn out efforts over forty years have faced many inequalities, the highest among them being social inequality.

The stigma, discrimination and access to services vary among the countries and regions. It remains the key to addressing these barriers for Key Populations to access care. As the theme suggests, we approach to end AIDS within another pandemic, and it is all the more reason to end inequality"

To view campaign materials, [click here](#).



FPA Executive Director speaking at the National AIDS Committee advocacy meeting at Waters Edge Hotel.



II

මම සාපේක්ෂව සිටි අතර හැඳුනුම්පතක් සඳහා අයදුම් කිරීමට අවදානමක් විය. මේ සඳහා HIV පරීක්ෂණ වාර්ථාවක් ද අදාළ ආයතනයට භාරදිය යුතුය.


පළමු පරීක්ෂණය සාපේක්ෂව සිදු කළ අතර දෙවන පරීක්ෂණය කොළඹ ලිංගාශ්‍රිත රෝග සායනයේදී සිදු කරන ලදී. පරීක්ෂණ දෙකම මගින් HIV ආසාදිත බව තහවුරු විය. එක දැනගත්තම මට හිතූනා මැරෙයි කියලා. මගේ වර්තමාන ART (ප්‍රතිවෛරස) ප්‍රතිකාරය කොළඹ ලිංගාශ්‍රිත රෝග සායනයෙන් ලබාගෙන ඇත.

ඔබට මගෙන් පණිවිඩයක්: සමාජය විසින් HIV පිළිබඳව වඩාත් දැනුවත්ව, වගකීමෙන් ජීවත්වීම ඉතා වැදගත් වේ.

THE RISK IS NOT KNOWING.

LEARN. ACT. GET TESTED.

CALL: 0112 667 163 - THE NATIONAL STD/AIDS CONTROL PROGRAMME (NSACP)



II

මගේ මහත්තයා පරීක්ෂණයකට යොමු වීම නිසා මාත් පරීක්ෂණයට යොමු වුනා. මගේ ජීවිතේ ගොඩක් මානසිකව වැටුනා. මම ජීවත්වන්නේ ඉතා කෙටි කාලයක් කියලා හැගීමක් ආවා.

මේ වන විට මම ART ප්‍රතිකාර ලබාගෙන සතුටින් ජීවත් වෙනවා. කොළඹ සායනයෙන් ප්‍රතිකාර ලබා ගන්නවා.


ඔබට මගෙන් පණිවිඩයක්:

සැකයක් ඇතිනම් විගස පරීක්ෂණයකට යොමු වී, ප්‍රතිකාර ලබාගෙන සතුටින් ජීවත් වන්න.

THE RISK IS NOT KNOWING.

LEARN. ACT. GET TESTED.

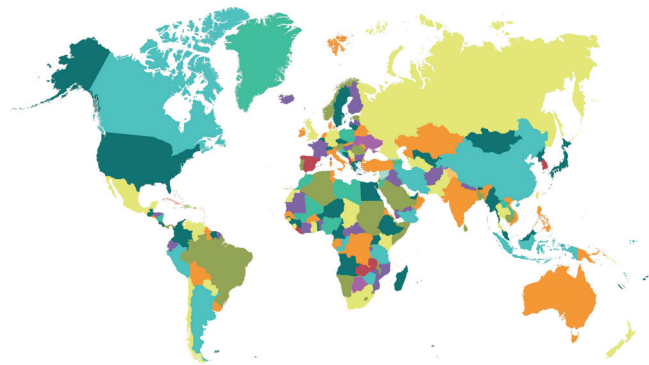
CALL: 0112 667 163 - THE NATIONAL STD/AIDS CONTROL PROGRAMME (NSACP)




HIV testing clinic by the National STD/AIDS Control Programme at the Urban Council in Maharagama with the teams from CSDF and Heart to Heart.

News from the Federation

Global Social Enterprise Internship 2021
13th - 24th September



25 participants from 15 affiliated organizations representing 5 IPPF regions attended the virtual sessions live-streamed via Zoom from FPA Sri Lanka. The comprehensive curriculum was delivered by external expert facilitators, IPPF Regional Office and Member Association leaders, FPA Sri Lanka Staff and Social Entrepreneurs. Some of the training methodologies used were synchronous eLearning, trainer-led sessions, group collaboration projects, intermittent Q & A forums, online tools, interactive discussions, and experience sharing. Simultaneous French translations of the sessions were provided together with workshop content materials.

This capacity-building internship, organized by the IPPF Social Enterprise Hub aimed to enhance entrepreneurial knowledge and develop business acumen on enterprise development so that the participants will be better equipped to work on their start-up ideas or grow their existing social enterprise activities to be income-generating and sustainable.

Going forward, the Hub will continue to work closely with the Internship Delegates and their organizations to guide them on the next steps and provide technical assistance or further training if required.

Internship delegates share their key learnings and knowledge gaining experiences of the two-week virtual workshop. [Click here](#) to view.



SOCIAL ENTERPRISE DAY 2021

Client testimonial: A service received; a life uplifted

As an IPPF Social Enterprise Hub communication initiative for 2021, in commemoration of 'World Social Enterprise Day' in November, organizations with established and successful enterprises were invited to share client testimonials in written or video format. This was to showcase the impact of IPPF affiliated organizations' diverse social enterprise ventures on their clients and the community they serve. Organizations with established and successful enterprises were invited to share client testimonials in written or video format.

To view the client testimonials, [click here](#).

IPPF SARO Regional and Youth Forum: 'Delivering No Matter What'



The South Asia Regional and Youth Forum spanning over three days from 23-25 November, 2021 was hosted online by IPPF SARO. Aptly titled "Delivering No Matter What", the theme was an affirmation of the commitment by the IPPF South Asia Regional Office and its Member Associations

(MA) to serve vulnerable communities despite the challenges posed by the COVID-19 pandemic.

The Forums provided a unique opportunity through the vibrant virtual platform to Member Associations, Youth Networks, Activists and Change Makers from across the South Asia region to engage in active discussions, exchange knowledge and best practices, share trends and evidences, gain insights through experiences, and to shed light on possible pathways to counter the unique challenges on Sexual and Reproductive Health and Rights (SRHR) arising in the wake of the COVID-19 pandemic.

[Click](#) to view the full report.

[Click](#) to view the sessions. (Representatives from FPA Sri Lanka also presented at the Forum)

We want to hear your views and suggestions! Please write to: FPA Sri Lanka, 37/27, Bullers Lane, Colombo - 07, Sri Lanka.
E-mail : fpa@fpasilanka.org Web : www.fpasrilanka.org Tel : +94 112 555 455 Fax : +94112 55 66 11