

FPA Sri Lanka selected for IPPF global pilot initiative on MA governance strengthening

In April 2020, following its own reform process conducted in 2019, IPPF launched a global pilot initiative to support ten Member Associations (MA) across the Federation in strengthening organisational governance. FPA Sri Lanka was selected as one of the 10 MAs to be awarded this project from more than 20 applications received from across the six regions, showing need and desire for change. The selection process was done by a Committee comprising representatives from across the Federation and based on variables, such as governance challenges, the rationale for the application, the expected outcomes and creative thinking on how the MA can contribute resourcefully towards this programme.

The process will involve two phases:

1. The analytical phase will involve an evaluation or SWOT analysis to review existing governance and its effectiveness against set criteria, including the effectiveness of governance oversight, the cost of governance and other factors.
2. The development phase will involve support tailored to the specific needs of the MA as determined by the phase one analysis.

Under phase 1 of the initiative, the participating MA will recruit a local consultant, in coordination with the project support team to conduct an in-depth analysis of their governance structure and functioning.

Objectives of the consultancy:

- To analyse selected MA governance structures against international governance best practices, evaluating their cost-effectiveness, and the fulfilment of their governance roles including, but not limited to setting the strategic direction, approving policy frameworks, and overseeing the financial situation of the organizations.
- To provide recommendations and an action plan to improve the governance structures.



Since FPASL is a multi-disciplinary organization it is clear that volunteers from different disciplines need to be steering it. They include, but are not limited to business, marketing, branding, medical, research, communication, IT, Finance and audit fields. Whilst we have attempted to have this representation in the board, a formalized and structured approach to having this expertise within our governing body is needed. This project on MA Governance strengthening will provide us an opportunity to define the path to attaining this goal.

Thushara Agus
Executive Director | FPA Sri Lanka



“This is a rare opportunity and we bank on your collective leadership in ensuring that there is full ownership at the local level and make best use of this resource to bring about a change for the betterment of the Association.”

Sonal Mehta
Regional Director | IPPF SARO



Hygiene at the heart of the workplace



The country is cautiously making its way toward relaxing Covid-19 restrictions. Many of us are resuming a sense of normalcy to life and work. Yet, in the absence of a vaccine, aspects of modern workplaces will have to change if employees are to safely return to their desks. Under the perceptive guidance of our Executive Director, Thushara Agus, long-term design upgrades and modifications were made that put hygiene at the heart of workplace planning, boosting worker confidence. The staff are deeply grateful for the measures taken, to ensure workforce safety at all times, at the Head Office and at all Service Delivery Points located island-wide.



An enterprising solution to premature ejaculation!

Premature ejaculation is a sexual and biological condition, during which a man ejaculates sooner and at most times involuntarily during sexual intercourse than he or his partner would like. Estimates vary, but as many as 1 out of 3 men say they experience this problem at some time. Both psychological and biological factors can play a role in premature ejaculation. Although many men feel embarrassed talking about it, premature ejaculation is a common and treatable condition. Medications, counselling and sexual techniques that delay ejaculation - or a combination of these - can help improve sex for you and your partner. Some drugs slow down the onset of ejaculation. However, these drugs are recommended to be prescribed in combination with the psychodynamic and behavioural approach, and seen as a temporary help.

The Moroccan Family Planning Association (AMPF) placed focused efforts to address this complaint and provided a balanced solution to their clientele by partnering with The Family Planning Association of Sri Lanka (FPASL) and IPPF's Social Enterprise Hub (managed out of FPASL). The collaboration unfolded as follows:

In November 2017, the Executive Director of AMPF, Fadoua Bakhadda attended a global workshop sponsored by IPPF's Technical Assistance Network (TAN), which was hosted and facilitated by FPASL's Social Marketing Unit (SMP Unit). The workshop focused on 'Social Marketing of Contraceptives' and also covered recommended social entrepreneurial practices in line with the main topic.

Following the workshop, AMPF was keen to adopt and implement the learnings from the workshop and submitted a proposal to TAN and FPASL on their plan to conduct additional research on premature ejaculation and a market study on introducing FPASL's flagship product – 'Stamina' condoms as a potential solution (Stamina is a condom with a lubricant that contains benzocaine that prolongs sexual pleasure) to the Moroccan market. Being a social enterprise focused organization, a side objective of this for AMPF was also for them to diversify their self-generated income stream. AMPF's proposal was approved by TAN and the Social Enterprise Hub (SE Hub) joined to support the project and provide technical assistance where required.

Over a follow-up period of eight months all concerned teams worked cohesively to drive the project forward. Mentionable contributions from those involved were as follows:

- AMPF conducted the themed research, gathered required data from a considerable sample of clients and prepared the feasibility study. Based on the analysis and customer information gathered, they made a strategic decision to go ahead and introduce Stamina to their market.

- TAN supported with a seed grant for AMPF's initial research. SE Hub managed the collaboration between all teams, extended administrative support, and technical consultation related to the study, readiness assessment, business planning and budgetary management.
- FPASL's SMP provided the initial shipment of Stamina stocks at a fair cost, handled the international transport logistics and shared marketing best practices and local promotional material used for Stamina.
- The Arab World Regional Office assisted with Arabic translation support and attending to the remittance formalities for the initial consignment of Stamina stock.

Since February 2020, on receipt of the Stamina stocks, AMPF introduced Stamina into the Moroccan market and has leveraged on their service delivery points and other sales bridges to distribute the product across the capital city and main towns. Initial observations and results indicate that the product has been well-received.



Promotional material used by AMPF to market Stamina

There has been an increase in demand for the product as a (rare) positive impact of the COVID-19 restrictions, customer satisfaction has been good and the issue of pre-mature ejaculation being addressed to an extent, word of mouth feedback has been helpful to promote it further and new clients steadily joining their customer base (including female patrons).

The teams continue to be in touch to explore what further can be done to help each other out on this collaboration. AMPF plans to order a second consignment of stocks from FPASL before end of this year; and the SE Hub has also invited AMPF to join in as a pilot team to market their products (including Stamina) and services on IPPF's online store that is being developed.



"With regard to overseas sales of SMP products, this is the first time we were involved in direct export. Our products are regularly exported to countries such as the Maldives etc. through third parties. This overseas sale was a new experience for us, But if we are to get in to regular exports there are few formalities which will have to be followed. As Stamina is one of our own brands, designed and developed by FPA Sri Lanka, it's a great achievement and satisfaction to know that it has global presence"

Suhail Junaid
Director Marketing | FPA Sri Lanka





Stamina as part of the AMPF product portfolio



“Expanding the scope of marketing of Stamina beyond Sri Lanka... For me, this is a great achievement – that an MA in one region (Asia in this case) is not only providing technical support to an MA in another region (Arab World), but also providing a product that can and will likely be a game-changer in terms of social marketing of commodities, increasing access and ensuring economic empowerment and sustainability of the Member Association. This initiative clearly demonstrates the existing leadership within MAs that can be amplified further for capacity building and collaboration”

Sarah Onyango
Director Technical and TAN contact point | IPPF



Webinar on Diversifying and Digitalising your Business

Webinar

Open to all Member Associations, Regional Office and Central Office staff

Diversifying and Digitalising your Business

Leading you to success - Beyond the pandemic

- Are you thinking of diversifying your MA income sources?
- Want to know how your MA can commercialise and digitalise product and service provision via e - payments?
- Learn how you can increase the financial/business resilience of your organization

Speakers

- Thushara Agus – Executive Director, FPA Sri Lanka
- Fadoua Bakhadda – Executive Director, Moroccan Family Planning Association
- Dhammike Mendis – CEO, Ceynocta (Pvt) Ltd - Software Developer/IT consultant

Organized by IPPF Social Enterprise Hub

Wednesday, 29 July | 1100 GMT, 1300 CAT, 1630 IST - 1 hour session | English

SE IPPF

The SE Hub intends to support this initiative by:

- Establishment of an e-Commerce/online sales and marketing platform – A common online store for the Federation with separate pages for interested MAs
- Enabling a payment gateway to be integrated to accommodate global credit/debit cards
- Including country and MA specific delivery mechanisms
- Providing guidance on administering and managing said web platform
- Providing capacity building and technical assistance on online sales and marketing topics
- Help develop a business plan for the online business model

The first global webinar organised by IPPF’s Social Enterprise Hub took place on the 29th of July 2020. The one hour educative session was open to all MAs, Regional and Central Office staff. Between 50 - 60 participants from across different countries were in attendance.

The webinar addressed two crucial strategies that are key for MA resilience and advancement through and beyond the current global healthcare crisis – ‘Diversification and Digitalisation’.

In any industry, diversification means branching out into other product categories, industries or marketplaces. While this strategy does present some risks for a company, diversification is often viewed as a safety net against downturns, unexpected crisis such as the COVID pandemic or a way to grow your business.

For MAs, the mode to diversify is to; Expand income sources through new enterprises (products or services) and/or Engage in multiple donor-funded programmes/activities.

For every IPPF MA, SRHR delivery is the core undertaking and going online can help take this objective to a whole new level. Digital Marketing opens doors to a large audience beyond the physical reach of the offline business to target and is relevant in all business scenarios. And in this business climate, it is the way to move forward.

This session supported an opportunity to engage with the MAs, provide an understanding of the available online solutions, hear first-hand from MAs who have diversified income sources and who have had positive business continuity despite the challenges of the COVID crisis.

We want to extend our thanks to the panellists, Thushara Agus - Executive Director, FPA Sri Lanka, Fadoua Bakhadda - Executive Director, Moroccan Family Planning Association and Dhammike Mendis - CEO, Ceynocta (Pvt) Ltd, Software Developer/IT consultant who provided a technological overview. The session was conducted via Zoom Webinar, with technical support by FPA Sri Lanka.

The individual presentations and the intermittent and culminating Q & A session was well received with encouraging engagement and a good flow of questions and comments from the participants.

After the session, the SE Hub received positive feedback from most of the participants who thought it was an important session and a good knowledge sharing experience. A post session survey was shared to evaluate the session, assess usefulness and to ascertain which areas the SE Hub could be of assistance to individual MAs.

[Session presentation](#)

[Session recording](#)

Ensuring access to Sexual and Reproductive Health care at work!

Thousands of workers in the Export Processing Zones across Sri Lanka struggle to access sexual and reproductive health services. Reasons for this can range from a general lack of knowledge of health needs and rights, to insufficient time to find or access services due to working hours.

While many factories have on-site clinics, predominantly these function as a first aid station, offering very basic remedial care. Very little is offered to workers in terms of health education, particularly around preventative healthcare including sexual and reproductive health.

FPA Sri Lanka works with large - scale employers to address these barriers, formulating and designing programmes that address the health needs of workers.

FPA offers information, education and access to sexual and reproductive health services as well as general health screenings.



The signing of the agreement between FPASL and the B.O.I Wathupitiwela (By Mr. Susantha Rathnayake - Chairman, BOI and Thushara Agus - Executive Director FPA Sri Lanka) on 21/8/2020



Our FPA Suwa Sewa Centre in Avissawella conducted a medical camp at Ceylon Biscuits Limited, located in the Seethawaka Export Processing Zone on 17/8/2020.



Medical camp at MIDAS (Prime Polymer factory), Seethawaka EPZ on 31/07/2020



Manager of FPA Sri Lanka's Batticaloa Service Delivery Point, Shahul Imthias presented the Service Centre's proposed activity plan for 2021/2022 to the Office of the Regional Director Health Services in Batticaloa on the 31st of August 2020. All mobile and static health clinics for the general public , awareness sessions and Comprehensive Sexuality Programmes for in and out of school youth are carried out by FPA with support from the government.

COVID19 SPRINT Response Summary

The Australian Government, through the SPRINT Initiative, was quick to provide support to priority countries in the Asia-Pacific Region, through the provision of personal protective equipment to enable IPPF's Member Associations in Sri Lanka, Pakistan, Afghanistan, Bangladesh, Pakistan and Indonesia to continue to provide vital SRH services.

This [three-page infographic](#)  provides top line information around these responses including key statistics, images and successes.





During the COVID-19 pandemic, IPPF Member Associations have been actively engaging in advocacy with decision makers at national, regional and international levels to ensure that access to SRHR and SRH services is safeguarded and available to all who need it. They have demonstrated exceptional innovativeness, leadership and resilience in their advocacy efforts to secure these goals.

FPA Sri Lanka's efforts were highlighted in this [IPPF publication](#).

Launching PrEP Demonstration Project in Sri Lanka



At the launch

Pre-exposure prophylaxis (or PrEP) is a medication people at risk for HIV take to prevent getting HIV. It is not a vaccine, but it is a highly effective preventative method recommended by the World Health Organization (WHO).

Studies have shown that PrEP reduces the risk of getting HIV from sex by about 99% when taken daily. This demonstration project will be provided to 250 Men who have sex with men (MSM) and Transgender Women (TGW) in the Colombo District.

The PrEP Demonstration Project is implemented by the National STD/AIDS Control Programme (NSACP) with the support of the Global Fund. The National Programme and the Regional Grant are providing support for the implementation by helping to connect community members and providing workshops to better educate MSM and TGW on PrEP. FPA Sri Lanka will also provide support to create demand for PrEP to help the Demonstration Project be successful. Based on the findings, the NSACP will gradually incorporate PrEP across their clinics.



PrEP Community Workshop
March 2020



Maldives, Sri Lanka eliminate measles and rubella, ahead of 2023 target

On July 8 2020, Maldives and Sri Lanka were verified for having eliminated rubella, making them the first two countries in WHO South-East Asia Region to achieve measles and rubella elimination ahead of the 2023 target.

“Protecting all children against these killer and debilitating diseases is an important step in our endeavour to achieve healthier population and health for all,” said Dr Poonam Khetrpal Singh, Regional Director, WHO South-East Asia Region, congratulating Maldives and Sri Lanka on their achievement.

Maldives reported last endemic case of measles in 2009 and of rubella in October 2015, while Sri Lanka reported last endemic case of measles in May 2016 and of rubella in March 2017.

Coming at a time when the entire world is grappling with the COVID-19 pandemic, this success is encouraging

and demonstrates the importance of joint efforts, Dr Khetrpal Singh said, lauding the Ministries of Health, health workforce, partners, and most importantly the communities, who together contributed to this public health achievement.





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බොහෝ රටවල පවත්නා දිළිඳුබවට, විරැකියාවට හා උගත රැකියා ගැටලුවට මූලික ම හේතුව තරුණ පෙළට හා වැඩිහිටියන් ට ද, වෙසෙසින් ම කාන්තාවන්ට ද කුසලතා පුර්ණ පුහුණුවක් හෝ අධ්‍යාපනයක් ප්‍රමාණවත් ව නොලැබීම බව විවිධ සමීක්ෂණ තුළින් සොයා ගනු ලැබ ඇත. අනෙක් අතට, සාමාන්‍ය පාසැල් අධ්‍යාපනය හෝ උසස් අධ්‍යාපනය හෝ තාක්ෂණ ශිල්පයන් ප්‍රගුණ කෙරෙන වෙනත් ආයතන හෝ තුළින් තාක්ෂණ කුසලතා හිමි කර ගන්නා තරුණ හා වැඩිහිටි පිරිස් වෙසෙන දේශයන්හි දිළිඳුබව, විරැකියාව හෝ උගත රැකියා ගැටලු බොහෝ දුරට අවම වී ඇති බව ද සංඛ්‍යාලේඛන පෙන්නුම් කරයි.

සෑම වසරක ම ජූලි මස 15වන දිනට ලෝක තරුණ කුසලතා දිනය යෙදෙයි. එය එක්සත් ජාතීන්ගේ සංවිධානය විසින් මෑත කාලීන ව සමරන්නට ආරම්භ කළ එක් අවස්ථාවකි. 2014 නොවැම්බර් 11වැනිදා එක්සත් ජාතීන්ගේ මහ සමුළුවට ශ්‍රී ලංකාවේ නියෝජිත පිරිස ඉදිරිපත් කළ ලෝක තරුණ කුසලතා දිනය පිළිබඳ යෝජනාව ඒකච්ඡන්දයෙන් සම්මතවීම නිසා මෙම දිනය වසරක් පාසා සැමරීම 2015 ජූලි 15 දින සිට ඇරැඹිණි. ශ්‍රී ලංකාව ඉදිරිපත් කළ මෙම යෝජනාව පෘතුගාලයේ නියෝජිත පිරිස විසින් ස්ථිර කළැයි වාර්තා වේ.

ලෝක තරුණ කුසලතා දිනය පාදක කර ගනිමින් තරුණ පෙළට කුසලතා පිළිබඳ දැනුම, අවබෝධය, පුහුණුව හා වෘත්තීයමය කුසලතා ද වර්ධනය වන විවිධ වැඩ සටහන් නිර්මාණයට හා ක්‍රියාත්මක කිරීමට බොහෝ රාජ්‍ය නන්ත්‍රයන් පියවර ගෙන තිබේ. වර්තමාන ශ්‍රම වෙළඳපොළ තුළ පුහුණු ශ්‍රමකයින් අඩුවීමට එක් ප්‍රධාන සාධකයක් වශයෙන් හඳුනාගෙන ඇත්තේ තරුණ පිරිස පාසැල් අධ්‍යාපනය සම්පූර්ණ කිරීම පසෙකලා රැකියා සොයා මහ මගට පිවිසීමයි. මේ නිසා වෘත්තීය පුහුණුව සඳහා ඔවුන්ට මග ඇතිරෙන අතර, අඩු වැටුප්, අස්ථිර රැකියා, තරගකාරී උසස්වීම් නොලැබීම ආදී බාධක මධ්‍යයේ කලකිරීම් හා අධෛර්යයට පත්වීම් ඔස්සේ ඔවුන් පරාජිතයින් බවට පත්වීම ද සුලබ ය. ඇතැම් අවස්ථාවල කුසලතා නොමැතිවීමෙන් රැකියා අහිමිවීම නිසා ඇතැම් තරුණ පිරිස් සිය දිවි භානිකර ගැනීමට පවා පෙළැඹී ඇති බව බොහෝ රටවලින් වාර්තා වී තිබේ. ශ්‍රී ලංකාවේ ද මෙවැනි සිද්ධි කලින් කලට පුවත් පත් මගින් අනාවරණය විය.

කුසලතා පුර්ණ තරුණ පරපුරක් බිහිකර ගැනීමේ අභිලාෂයෙන් ශ්‍රී ලංකාව තුළ කලක සිට ම නවීන තාක්ෂණය පෙරදැර කරගත් පුහුණු ආයතන කිහිපයක් ම ක්‍රියාත්මක විය. අම්පාර හාඩ් තාක්ෂණ විද්‍යාලය එක් දහස් නවසිය පණහේ දශකයේ පමණ ආරම්භ වූ අතර, ජර්මන් තාක්ෂණ විද්‍යාලය එයිතික්බිති ව බිහි විය. ඒ ඒ කාලවල පැවැති රාජ්‍ය පාලනයන් විසින් ජාතික ආධුනික හා කාර්මික පුහුණු අධිකාරිය, ජාතික තරුණ සේවා සභාව, ශ්‍රී ලංකා වෘත්තීය පුහුණු අධිකාරිය, තානීය හා වෘත්තීය අධ්‍යාපන කොමිසම ආදී ආයතන ආරම්භ කරන ලද අතර, ප්‍රාදේශීය මට්ටමේ තාක්ෂණ විද්‍යාල හා විශ්ව විද්‍යාල ද කිහිපයක් ම බිහි කරන ලද්දේය. එම ආයතන යටතේ පුහුණුව ලබා කුසලතා අත්කර ගන්නා අයට ජාත්‍යන්තරය පවා පිළිගන්නා සහතික පිරි නැමීම ඔස්සේ ශ්‍රී ලංකාවේ තරුණ පෙළට උසස් වෘත්තීය කුසලතා මෙන් ම, උසස් රැකියාවන් ද හිමි කර ගැනීමේ අවස්ථාවන් උදා වී තිබේ. කුසලතා පුර්ණ තරුණ පරපුරක් ජාතියට හිමිකර දීමේ ශ්‍රී ලංකාවේ ප්‍රයත්නය ජගත් අවධානයට ලක් වී ඇති අතර, එම ක්‍රමෝපායයන් අධ්‍යයනය සඳහා විදෙස් නියෝජිත පිරිස් පවා පැමිණීම අප රටේ අභිමානයට හේතු වන්නකි.

යෝජනාව ඉදිරිපත් කරමින් ශ්‍රී ලංකාව ප්‍රකාශ කර සිටියේ, ලෝකය පුරා තරුණ පිරිස අතර විරැකියා හා උගත රැකියා ගැටලුව උත්සන්න වෙමින් පවතින බව යි. ලෝක ජනගහනයෙන් සියයට 15ක් පමණ සේ සැලකෙන වයස අවුරුදු 15 හා 24 අතර බිලියනයකට අධික තරුණ පිරිසක් වෙසෙන බවත්, රැකියාවන්හි නියුතු වැඩිහිටියන්ට වඩා තුන් ගුණයක් පමණ විරැකියා හා උගත රැකියා තර්ජනයෙන් ඔවුන් පීඩා විඳින බවත් පෙන්වා දුන් ශ්‍රී ලංකාව, මෙය ජගත් මට්ටමේ අභියෝගයක් හෙයින් එක්සත් ජාතීන් ගේ මහා මණ්ඩලය ඊට විසඳුම් සෙවිය යුතු බවත් පැහැදිලි කර දුන්නේය. මෙම කණ්ඩායමෙන් අති විශාල ප්‍රතිඵලයක් සංවර්ධනය වෙමින් පවත්නා දේශයන්ට අයිතිවන අතර, හැකියා, කුසලතා වර්ධනය කර ගැනීම සඳහා ඔවුන්ට අවස්ථා උදා කරදීම සෑම රජයක ම වගකීම බව ද ශ්‍රී ලංකා නියෝජිතයා අවධාරණය කළේය.

විවිධාකාරී දියුණු තාක්ෂණයන් අද සමාජය, සංවිධාන හා ආයතන තුළ පමණක් නොව ගෘහයන්හි පවා භාවිත කෙරෙන බව බහුල ව දැක්නට ලැබේ. තාක්ෂණයෙන් තොර ව අද දිවි පෙවෙත ගෙන යාම පවා දුෂ්කර ව ඇත. මෙම තාක්ෂණ ශිල්පයන් නිර්මාණය හා භාවිතය ද සිදු කරනුයේ කුසලතා සපිරුණු ශිල්පීන් විසිනි. ඒ අනුව කුසලතා තොර ජීවිතයක් ගැන සිතන්නට වුව නො හැකිය. කුසලතා තොර වූ ශ්‍රමයට අගයක් දීමට නො පුළුවන. තර්ගකාරීත්වය නිසා ගරුත්වයක් හෝ අභිමානයක් දිනා ගැනීමට පවා අසීරු ය.

මෙම කරුණු හා තවත් අදාළ දත්ත හා සංඛ්‍යාලේඛන හැඳෑරීමෙන් ඉක්බිති ව



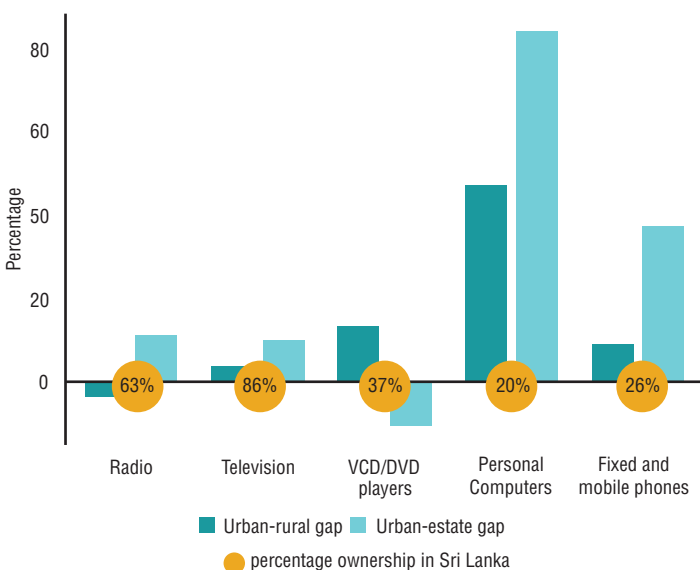
COVID 19 and Online Education in Sri Lanka

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Unprecedented times of uncertainty due to a global pandemic led to a lockdown situation in Sri Lanka. All schools and universities were shut down from March to August 2020 in order to prevent COVID 19 from spreading within the community. With no proper infra structure and training, schools and universities had to rise to the challenge of providing education using alternative and innovative methods and switching to online learning.

A few universities in Sri Lanka had prior experience in conducting lessons and online assessments before the COVID 19 outbreak. On the contrary, online education was a brand new territory for the primary and secondary school education system.

Challenges of online learning



Source: Department of census and statistics of Sri Lanka. (2018). Household income and Expenditure Survey - 2016: Final Report. http://www.statistics.gov.lk/HIES/HIES2016/HIES2016_FinalReport.pdf.

According to the Department of Census and Statistics of Sri Lanka 2018, only 22% of households owned a personal computer, while 86% owned a television. Therefore, the Ministry of Education telecasted lessons via educational TV channels such as Nethra TV and channel Eye, targeting the students in crisis, the grade 5 scholarship, and the O/L and A/L classes who do not have access to the internet. The Education forum of Sri Lanka states that only 40% of households in Sri Lanka currently have internet access. Students who have a computer and internet facilities are mostly from the major cities. Leading private and government schools in cities like Colombo and Kandy started an online system where one or two lessons were provided using interactive sessions via teleconferencing apps and the rest of the lessons were sent via whatsapp, viber or uploaded onto google Classroom. Some popular Public schools in Colombo were able to create their own online systems and student portals to cater to their large student population. Online video lessons consume large amounts of data, and in families with two or more children, this system is a financial burden on the family. In addition, parental supervision is needed in a large scale where young children are concerned, to log onto video conferencing calls, upload answers and to complete assessments. In the event where parents are medical staff or other front liners, or parents who are working full-time from home with no child care assistance, children are left to their own devices while connected to the internet, which can lead to dangerous consequences.

Large amounts of notes are transferred via mobile phones using whatsapp or viber and reading them using a small screen such as a smart phone can cause health problems. Most families who do not have a computer own one smartphone with data connection, and sharing among 2 or 3 school going children has its practical difficulties. While online learning is a necessity in current times, the obvious problems of keeping children confined indoors, and their inability to meet peers and friends for social interaction poses other mental health problems. Many children are kinaesthetic learners who need to move to be able to learn, and sitting in front of a laptop creates an uncomfortable learning environment. After all, school is where jokes are cracked, notes are passed among friends or a small snack is gulped down in between lessons and these provide the much needed movement and entertainment for a child, thus making school education enjoyable.

Recovery from educational crisis

The recent report from Hong Kong of a 33-year-old man having a reinfection of COVID 19 suggests that this pandemic will prevail for sometime and sporadic outbreaks of COVID 19 in the country is to be expected. Thus, in preparation for a similar encounter, an effective plan for an online education in Sri Lanka is necessary. As of August 2020, most schools have opened, at least partially, with social distancing and other precautionary measures, with some of the leading schools continuing with a blended approach of maintaining

an online component. Recovering from this educational crisis may take a long period; the Education ministry may have to step forward and take actions like reducing cut-off marks in major public exams, postponing exams for a few months and may need to keep an eye on the number of school dropouts due to the financial crisis caused by COVID 19. Providing free meals will ensure children from poverty stricken homes returning back to school.

Rural schools will need financial assistance to provide running water facilities for handwashing. Health education programmes in schools will help to prevent an outbreak, help to contain it effectively in case of infection and to eliminate social stigma regarding COVID 19. An easy payment scheme for families to purchase a smartphone with data for education purposes, more teaching material via educational TV channels, and minimal computer and internet facilities in the local school for a blended approach to education may be useful.

It may be a good time to reflect on our somewhat traditional education system where students are spoon-fed from Grade 1 to university level. If Sri Lanka could adapt to teaching online within days of a lockdown situation, Sri Lanka is capable of changing from a teacher centred education system to a child based approach which is practised in many parts of the developed world.

The vulnerable groups identified by the FP2020 Sri Lanka commitment who do not have access to modern contraceptives are older women, single women, adolescents, working women and urban poor.

This project aims to reach these vulnerable groups by involving religious leaders, Civil Society Organisations, (CSO's), youth, working women, and urban low-income women to increase awareness and usage of modern contraceptive methods.

A 2 day orientation programme for field coordinators* took place in Dambulla on the 25th of August 2020. Sessions addressed Advocacy, Family Planning and How to conduct Training of Trainer (TOT) programmes. It was facilitated by Sonali Gunasekera - FPA Director Advocacy and Thushara Manoj - Senior Manager, Advocacy & Youth.

*A Field Coordinator liaises between the Heads of NGOs, Civil Society Organizations (in operation at district level, working with women, youth on issues of SRHR and GBV) the MOH Offices and FPASL to organize, implement and disseminate UNFPA FP2020 Project objectives and goals.

Training of Trainers Programmes

The Family Planning Association of Sri Lanka has been assigned the position of Civil Society Focal Point, with the specific target of assisting and complementing the services provided by the public sector. Working alongside a coalition of CSOs, FPA's mission is to drive progress in planning and implementation of the country's FP2020 goals and this project is supported by the United Nations Population Fund (UNFPA) and the people of Japan. The CSOs will work with key populations, youth, working women, and older women, for whom coverage is limited by the government sector's services.

Under the UNFPA FP2020 Project, FPA is working in four Provinces (Southern, Central, Eastern and Northern) and in each Province, FPA has to conduct six Training of Trainers Programmes in each District, where staff and volunteers selected from various CSOs will be trained.

Training of Trainers (TOT) programmes on modern contraceptives were conducted in the Tamil language in the Kandy and Nuwara Eliya Districts.



Kandy TOT was facilitated by Dr. Nitharshani Periyasami and P. Sivakumaran, Manager FPA Sri Lanka Nuwara Eliya Suwa Sewa Centre

**Family planning –
saves and changes lives!**



The FP2020 Project has been a game changer in the fight for universal access to family planning through the fundamental right to sexual and reproductive health. Through this project, FPA Sri Lanka's priority is to educate young people and women in the Southern, Central, Eastern and Northern Provinces on modern Family Planning methods.

The unmet need of family planning in Sri Lanka indicates that there are certain vulnerable populations that remain unreached, without adequate access to information and modern contraceptive services.

Welcome to the Team



Nuwara - Eliya TOT was facilitated by Dr.P.Sudarshan, Medical officer Nuwara Eliya District Hospital and P. Sivakumaran, Manager FPA Sri Lanka Nuwara Eliya Suwa Sewa Centre



Batticaloa TOT was facilitated by Dr. Hari Suthan - MOH Batticaloa, S.H Imthiyas - Manager FPA Suwa Sewa Centre and Sonali Gunasekera - FPA Director Advocacy.



Following the 'Trainer of Training Programmes' (TOT), the trained CSO staff, in turn, will train the rural and urban women, women's groups and youth groups in their respective district via ten grass root level training programmes that will be conducted in each district. These grass-root level trainings will be conducted by the PHMs and during these sessions, the PHMs and the trainers will be tasked with discussing family planning rebranding strategies and the importance and availability of modern contraceptive methods. The first five such grass-root level trainings were conducted in the Galle District in Dadella, Kaluwella, Galwadugoda, Kanampitiya and Godadenigama PHM area offices in the month of September.



S. S. Rosemary
Packing Assistant



J.M.C.Krishantha
Driver



V. R. N. Fernando
MLT



R. P. D. Jayaratne
IT Executive



Arnjali Samarasekera
Project Counsultant
UNFPA



T.G.M.T.W.Gamage
GFATM Project
Project Coordinator



Aishwarya Devi Kugadhason
Field Coordinator
Eastern Region



Perumal Anbukarasi
Field Coordinator
Central Region



G.L. Janaka Ravindra
Field Coordinator
Southern Region



Vaithilingam Vaikunthan
Field Coordinator
Northern Region



In conversation with
Nadika Fernandopulle
 Deputy Director - HIV & GFATM Project Manager

You have been with FPA Sri Lanka since 2002 and transitioned from Administrative Assistant - CRS Division (Former SMP division) to Deputy Director, heading the Global Fund HIV Prevention Project. Describe this journey.

I did not know much about the field of Sexual and Reproductive Health when I first joined FPA as I started my career in advertising. As an Administrative Assistant in the Contraceptive Retail Sales Division of FPA, I was coordinating all advertising and media activities and carried out the administrative work for the Senior Director. Since then I have worked under 4 Executive Directors and in many divisions; ED's Office, Resource Mobilisation, Advocacy and in the HIV Unit.

My first HIV related experience was in 2002, when FPA implemented the Condom Social Marketing project under the guidance of NSACP, funded by the World Bank.

Under the project, there were wide spread activities island-wide such as, raising awareness at ground level in villages, Social Marketing Campaigns via Radio, TV, Press, Mobile Vision outdoor shows, etc. This was a great opportunity to work with many stakeholders in the field.

Working in the ED's Office as the PA to Executive Director and Resource Mobilisation Manager, paved way for me to learn more about Governance, HR, Accreditation, Fund raising, etc. Acting as the first point of contact and coordinating all meetings and appointments was an extensive and challenging experience. Being a part of the Golden Jubilee Celebration Team, 8th ICAAP Volunteer Sub Committee, first

International Training on Resource Mobilisation/ Communication by IPPF in Bangkok, the ICTA Funded Happy Life Project team, were some of my amazing experiences. I worked as the Coordinator for the Volunteer Programme for the 8th International Conference on AIDs in Asia Pacific, the biggest conference held in Sri Lanka. FPA was responsible for recruiting, training and mobilising 300 volunteers to coordinate all activities, programmes for the conference.

In 2011, I was promoted as the Assistant Director, Advocacy and worked under the Director Advocacy & HIV. This was the beginning of my career in the Global Fund Project as the Sub Recipient. In 2013, FPA became the Principal Recipient (PR) and I continued as the Project Officer. In 2017, I was promoted as Deputy Director – HIV and then in 2018, I was appointed as the Project Manager. Since then I have been managing the Project under the Leadership of Ms. Thushara Agus, Executive Director, who is also the Project Director for the project. Her leadership qualities have inspired me in many ways and made me a more confident person in managing the project. I am also grateful to my school, Little Flower Convent, Bandarawela, where I received training in leadership and I was able to lead the school team as the Head Prefect.

The Global Fund (GF) Project requires close collaboration with the Donor, NSACP and the community. What are the processes involved, challenges and how do you overcome them?

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, both PRs implement activities separately under one National Framework.

During implementation FPA contracts many civil society organizations/ Key Population (KP) lead organisations as sub recipients (SRs) in the districts decided, to reach different Key Populations. This is done through a national, open and transparent process with the participation of CCM/ NSACP and KP Subcommittee members. The capacity of these organisations is assessed in detail before contracting. FPA disburses funds to all contracted SRs. This is done to finance smaller organisations which reach key populations that cannot be reached by Governments.

The Non-Government PRs are assessed through a comprehensive process for their financial, managerial, monitoring and evaluation and programmatic capacities. Transparency, Accountability and Effectiveness are key

principals required to be met by PRs. At any step of the process, the PRs should demonstrate results and show how the grant money has been used. All sub recipients are also required to meet standards of accountability and transparency. GF has zero tolerance policy for fraud, corruption, waste and it applies to all recipients.

There are few CBOs/KP lead organisations working for KPs in most of the districts. Also it is a challenge for most organisations to meet the standards required by GF. It is an ongoing capacity building exercise with some sub recipients during the grant. Data is recorded and reported through FPA's online system, MEIMS as per the modes of verifications agreed with the donor. Close coordination, supervision and monitoring are needed at all levels to achieve performance indicators.

Close coordination with district level STD clinics is required to conduct HIV testing at district level. The district based recipients organise outreach mobile clinics on evenings and holidays convenient to unreachable KPs. Throughout the project period it is important to maintain a good relationship and have strong coordination with all stakeholders concerned.

What is the current status of HIV/AIDS in Sri Lanka? Who is at risk?

HIV Prevalence in Sri Lanka remains very low. The estimated number of people living with HIV is 3600 in 2019 and cumulative HIV diagnosis by end 2019 is 3631. The epidemic concentration is within the Key Populations and the prevalence rates among Men having sex with Men (MSM) and Transgender (TG) populations have increased over the last years. HIV prevalence among females has decreased in the past years. Also Sri Lanka has not seen a PWID epidemic. Colombo and Gampaha (Western Province) are epicentres for HIV, with the highest reported new infections annually. Matara, Kalutara, Polonnaruwa, and Kegalle have remained in the top ten list, during the past 3 years. (NSACP Annual Report 2019).

According to the findings of the Sentinel Surveillance Survey 2019, Men who have sex with men (MSM) are the key population group with the highest HIV prevalence (1.5%). People often assume that MSM includes only gay persons but this includes Bi-sexual persons as well.

Only 64% PLHIVs know their status and only 80% from the People Living With HIV/AIDS (PLHIVs) know their status are on ART. It is very important for all PLHIVs to be on effective treatment. According to the U=U concept, a PLHIV person can maintain an undetectable viral load by taking ART daily as prescribed. Virally suppressed means that HIV cannot be passed sexually.

How does stigma and discrimination towards those living with HIV affect prevention efforts and what are the innovative strategies used to overcome this issue?

HIV related stigma and discrimination continues to prevent people from accessing health services. Research conducted in many countries shows that people living with HIV reported that they were excluded from social gatherings, etc. Also they were verbally insulted, harassed or threatened by their families and local communities. More people hide their status and be unreachable if stigma continues. As the HIV epidemic is concentrated mainly among KPs and especially among MSMs, the interventions should target them. But due to self-stigma and stigma from family, society and even health workers, it is difficult to reach these hidden key populations.

Interventions targeting general and high risk populations are essential to achieve the Ending AIDs target. More interventions related to self-assessment like Know4sure App, more testing opportunities (like evening and night clinics), outreach clinics at different locations for KPs, social media led interventions and interventions to address stigma and discrimination towards KPs, interventions to encourage early detection (Know4sure), awareness on U=U concept, should be expanded. The last national communication campaign on HIV was done in 2002 and the need for this is very vital now as many hidden key populations have insufficient knowledge on HIV.

GF Funding for HIV Prevention in Sri Lanka will cease in the near future. Why is this and what does this mean for the country? How will this work continue?

Global Fund funding to us has declined over the years and this will continue until the final transition grant probably in 2022-2025. Sri Lanka reaching upper-middle-income status in 2019 and the concentrated epidemic has resulted in Sri Lanka being included in the list of countries transitioning out from GF support. However, Sri Lanka was again downgraded to a lower middle-income country on July 1, 2020 by the World Bank and it is still not clear how this will impact the transitioning decision earlier made.

GF transitioning means that the Government of Sri Lanka needs to fund or domestic funding needs to be secured for key population interventions that were funded by GF until now. It will be a huge challenge to continue key populations interventions in 15 districts without GF funding. The NGO's/ CBO's will need to be self-sustainable to continue KP targeted activities as domestic funding will be limited and will be only for activities. More Resource Mobilisation activities and self-financing activities need to be done for the organisations working for the National HIV response. The GFATM Regional Grant, FPA SKPA project will play a major role in supporting SR's in this area.

This will also affect Sri Lanka's goal to Ending AIDs by 2025. Sri Lanka has advanced 2030 goal to 2025. As per the data reported by 2019, it shows that significant progress is required to achieve the 90–90–90 targets* by 2025. More targeted interventions need to be carried out and the National STD AIDs Control Programme will need to work more closely with all relevant stakeholders to achieve this goal.

*diagnose 90% of all HIV-positive persons, provide antiretroviral therapy (ART) for 90% of those diagnosed, and achieve viral suppression for 90%

Your job has great impact on society. How does that make you feel?

Since my school days I was passionate about social work because it provided a space to make a difference in people's lives and to do many things for the underserved, stigmatised and marginalised communities.

By supporting, empowering and educating others, we inherently do the same for ourselves. Helping to change lives is one of the most important and rewarding elements of working at FPA and in this role. We get the opportunity to help people in more practical ways. The impact we have on individuals and on small CSO's will stick with us for a long time. This is the reason we continue our work even if it is challenging. The differences we make in individuals' lives also leads to changes in systemic levels as well. We get to see how our society treats the most vulnerable, marginalised people. We touch on issues where few people have the understanding. This is challenging and also stressful sometimes as we talk about real life situations.

Wherever we are or whatever position we are, we need to give back to our community. I am privileged to be at FPA who is serving the marginalised, underserved communities and to hold this position to be able to support, empower and educate the people who need it most.

What advice or encouraging message would you like to share with your colleagues and the society at large.

Having HIV doesn't mean that you have AIDS or you are going to die. With effective treatment, many people with HIV can live long, be virally suppressed (not able to transmit) and live productive lives.

The education of people regarding sexual and reproductive health and sexual responsibility should be enhanced by the education system and by parents. Especially the young children 12-24, often have access to misleading information from their peers, internet, etc. It is a very challenging role but it is very important that parents put more effort in building the platform/relationship with children to discuss SRH and sexual responsibility related issues until this topic is allowed to be widely discussed in schools. Parents should be more responsible, spend more quality time with children, be comfortable talking about SRH, HIV, STI's, etc. and be aware about their activities and whereabouts. Some of the HIV positive people clearly state that if they had the right information and support from parents, such devastating events in life could have been prevented. We as a country should take all steps to stop our future generation being victims of HIV/AIDs.

Sri Lanka is enriched with culture and traditions. Sri Lanka has a very strong health system and achievement of health indicators, are good in many areas. But HIV/AIDs is still a taboo topic in Sri Lankan society and people hardly talk about HIV. People are afraid of being condemned by society and this makes them to lie low and not access health services or treatment.

I always believe that all people, regardless of their age, gender, who they love, have the right to health. Everyone should be able to access health services without any fear or discrimination.

M & E Webinar

On the 04th of August 2020, a webinar was conducted on the tools available to assess Comprehensive Sexuality Education: SERAT (Sexuality Education Review and Assessment Tool) created by UNESCO in 2012 and updated in 2020 & Inside & Out (adapted to IPPF). During the session, IPPF Member Association representatives from Ghana, Sri Lanka and Togo shared their experience of using Inside & Out.

Mr. Janaranga Wijaindu Dewasurendra, Senior Manager – M & E Unit presented FPA Sri Lanka's experience on using the tool and lessons learnt.

[Watch recording now](#) 



Webinar: Assessing Comprehensive Sexuality Education
An Introduction to using the tools Inside & Out and SERAT (updated)

[Watch recording now](#)

International Days Commemorated through social media



Access to family planning is a human right, it saves lives and promotes healthier populations. Sexual and reproductive health services must always be a priority. A poster and video campaign was carried out with the participation of staff and YTAC Committee members.

Video Statements - Click to play 

Thushara Manoj Senior Manager, Advocacy and Youth

Kethees Sridevi - Project Coordinator , Gender Development (Federation of Social Development) FPASL- FP2020 Project

Jananie Karunaweera - Youth Member



What is a Skill? It is the ability to apply knowledge to specific situations. Knowledge on comprehensive sexuality education is a must so that young people have the tools they need to make healthy decisions.

A video campaign, advocating for the need for CSE was carried out with the participation of FPA Youth Committee Members.

Video Statements - Click to play 

Jayomi Marasinghe - FPASL National Council - Asst. Secretary and Youth Technical Advisory Committee Member

Nilupuli Nayanathara Jayathilaka - Youth Technical Advisory Committee Member

Lakshan Seneviratne - National Council Assistant Treasurer and Youth Technical Advisory Committee Member



The Advocacy Unit developed videos that could be used for training programmes with young people on modern contraceptives. These were shared on all our social media channels on Youth Day.

FPA youth group members were consulted and their ideas and feedback incorporated in the development of the 3 videos, that take the form of a fictional story.

Click to play 

Video 1. Contraceptives used by a couple who have begun a relationship (temporary methods)

Video 2. Contraceptives used by a married couple before they have children (longer lasting methods)

Video 3. Permanent method after the completion of the family (the irreversible permanent methods)



World Population Day 2020 amid a Pandemic

"On July 11th falls the World Population Day celebrated for over three decades. Today the world is battling a Virus that has crippled its Economy, Relations and Health. In turbulent times as this, it is natural that women and marginalized communities get disproportionately affected by the negative impact. We witnessed a steep increase in demand for Gender Based Violence and abortion services. The social distancing and isolation strategies to curtail the spread of Covid 19 has brought about a situation that is completely different to our daily routine and this alone is sufficient to challenge the mental health of many. Our goal remains at maintaining access to Sexual and Reproductive Health services to all, during the crisis. To this end we have deployed novel and innovative mechanisms to enhance our reach to the vulnerable communities. Due to the advancement of science we hope that the Pandemic will not impact the human race and the world's population significantly, despite the high rate of transmission. In the interim, the need to safeguard women and marginalized communities will be a high priority for FPA Sri Lanka."

Thushara Agus - Executive Director



Adolescents must have knowledge of key SRH topics and issues if they are to make informed decisions to protect their health and well-being. This knowledge will help them even as adults.

We also shared via social media channels information on STI's, contraceptive options and the need to have regular check-ups if sexually active.



Dr. Sriani Basnayake
Vice President (FPA Sri Lanka)
IEC Committee Member
Former Director Medical

“
ලිංගික හා ප්‍රජනන සෞඛ්‍ය අධ්‍යාපනය ශ්‍රී ලංකාවේ සියලුම පාසල්වල ජ්‍යෙෂ්ඨ පාසල් සිසුන් සඳහා අනිවාර්යෙන්ම තිබිය යුතුය.

ලිංගික හා ප්‍රජනන සෞඛ්‍ය අධ්‍යාපනය අවබෝධ කරගැනීම තුළින් යෝනි මාර්ග ජේෂ්ට් තද වීම (වැරදිනිසමස්) හා කන්‍යාභාවය පිළිබඳ ගැටලු වැනි මුල් අවධියේදී විවාහයන් බිඳී යාම වැලැක්විය හැකි අතර, ප්‍රීතිමත් විවාහ ජීවිතයකට දායක වේමේ මගින් ඔවුන් වගකිව යුතු දෙමව්පියන් වීමටත්, මතු විය හැකි ලිංගික හා ප්‍රජනන සෞඛ්‍ය ගැටළු අවබෝධ කර ගැනීමටත් හැකිවේ.



Too many women still do not have autonomy over their reproductive lives, and are not able to choose to end an unwanted pregnancy under safe conditions with the support of a trained provider.

Globally, 66 countries either prohibit abortion entirely or permit it only to save a woman's life. Approximately one quarter of the world's population resides in these countries.

The women who suffer as a consequence of restrictive laws are not just numbers. Each woman who seeks an abortion does so under a unique set of circumstances.

In Sri Lanka, abortion is so severely restricted that people who cannot afford high-quality services, either in the country or else abroad, are forced to risk their lives to get the procedure done in unsafe conditions, or are forced through a pregnancy that they cannot afford, manage, or do not want.

Click to play

[Dr. Yakandawala – SPRINT Project Consultant explains the abortion law in Sri Lanka](#)

[IPPF SARO features FPA in their video campaign](#)

Click to read

[Interview with Sonali Gunasekera, Director of Advocacy at the Family Planning Association of Sri Lanka](#)

Stand up against violence!

Every day, everywhere, all over the world, women and girls face violence. This ranges from emotional and psychological to physical and sexual. Some believe that violence within a household is not their business and they cannot interfere. Some believe that violence toward women and girls is justifiable and in many instances, even normal or acceptable. Many know that it isn't but they don't speak out because they don't want to lose their standing, whether at work, in the local community, or even in the family.

This has to change.

We are responsible for our words and actions!

Violence in all its forms - Recognize it, Report it, Prevent it.!

Click to play

[Anuki Premachandra](#) , Strategic Communications Manager, Adfactors PR Sri Lanka and FPA Sri Lanka Youth Member

[Kapila Rasnayaka](#) - Activist

[Kokila Krishanthi](#) - Senior Counsellor at the District Secretarial Office - Hambanthota

[Tharindi Abeynayake](#) - FPASL Youth Technical Advisory Committee Member

Service Awards



10 Years
Ms. B. R. Priyanthi



10 Years
Ms. D. K. Athukorala



10 Years
Ms. J. C. Aluthwalage



15 Years
Ms. S. A. G. Shyamalee



20 Years
Mr. B. T. Prasanthaka



35 Years
Mr. M. P. Senarathna

Mr. R. J. Kularathna and Mr. S. H. Imtiyas (10 Years Service) - Absent

Sales Person of the Year Awards 2018



Left to Right :

2nd Runner up

Mr. Lahiru Prasanna Pathirana

Winner

Mr. Lahiru Saman Kulasinghe

1st Runner up

Mr. Suranga Sampath Withanage

We want to hear your views and suggestions!

Please write to:

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