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# THE HUMANITARIAN

*Join hands for HUMANITY*

## Bridging the estates and adjacent villages

CARE Plantation Community Development Project (PCDP)



CARE International first began its work in the plantations sector in 1985, targeting identified tea and rubber estates in the Nuwara Eliya and other districts. Initially, activities and projects implemented were needs based and focused only on the estate community. However, over the years CARE has continued to

re-assess its activities and approach, based on feedback from its many partners, including estate workers and others living in surrounding villages. Once such an example was the identification of deep rooted ethnic and other socioeconomic differences between the Tamil community living on the Carolina Estate and the Sinhala community living in the villages bordering the estates.

This prompted CARE to implement the Plantation Community Development Project (PCDP) which sought to 'improve the relationship between State community and neighbouring village communities' as an integral goal. The project adopts a variety of measures to strengthen socioeconomic relationships, promote understanding and respect for diversity and appreciation for collective action between both, estate residents and villagers.

The PCDP has been implemented in five tea estates, of which the Carolina Estate was selected to pilot the Estate-Village Harmonising Programme. In coordination with the estate management and the Divisional Secretariat, and having conducted a village selection survey in nearby villages, Minuwandeniya and Samanpura were selected as the two initial villages.

Minuwandeniya is a small village consisting of many people who are employed in the estate. It lacks some of the most basic facilities such as proper roads and access to Government services because of its location. Taking this into account, CARE conducted a Participatory Rural Appraisal (PRA) in the village. Through this process, they were able to identify issues that existed and take

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steps to address them. As a first step, the need for a Community Based Organisation (CBO) in estates, as well as adjacent villages, was highlighted and CARE's staff, together with the village, estate management, and trade union representatives, facilitated the establishment of a CBO. This was later federated under the umbrella of the Community Development Forum (CDF). The CDF brings together villagers, as well as estate residents living in the vicinity, on a monthly basis to discuss issues, highlight problems and to seek solutions amicably.

The estate Trade Union leader of the Ceylon Workers' Congress (CWC) was present throughout this process and has witnessed progress on some of the issues villagers faced, including the lack of access, poor infrastructure, and basic services. He feels the work initiated by CARE, supported by the communities, has served in bridging longstanding differences between the two communities.

In the Samanpura village, the two existing CBOs, the Village Development Society and the Funeral Committee, became part of the CDF. During the monthly CDF meetings, the estate management noticed the dilapidated condition of the pre-school and decided to renovate and upgrade this facility and provide the community with

plants to initiate Income Generation Activities (IGA) for themselves. In addition, villagers were able to obtain membership in the Credit and Savings Associations for the two villages of Minuwandeniya and Samanpura, in the adjacent divisions of Kadawala and Agrawatte. This led to the initiation of many IGAs.

As a result of these types of interventions, the estate communities, together with the two villages, were not only able to move beyond their longstanding differences, but were also able to support themselves and each other in order to bring about positive development.

Drawing from these experiences, CARE launched its three-year Plantation Communities Empowerment Project (PCEP) in May 2008 with the support of European Union and Ethical Tea Partnership to support communities living in 13 tea estates to gain and exercise their socioeconomic rights to improve their quality of life and dignity, while also working with plantation companies to improve working conditions.

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# Improving Sri Lanka's Healthcare

Over 100 hospitals and health centres were damaged or destroyed by the 2004 tsunami. The remaining medical facilities struggled to cope with the influx of injured people requiring treatment. Many simply did not have sufficient facilities or manpower to respond to such a large scale emergency as they struggled to cope with the thousands of injured people who needed treatment.

Within the framework of its Post-Tsunami Recovery Programme, the International Federation of the Red Cross and Red Crescent Societies (IFRC), together with the Sri Lanka Red Cross Society (SLRCS) undertook a major health infrastructure development programme across 16 districts of the country. The programme is making a significant contribution of rebuilding and improving the capacity of Sri Lanka's health sector by either constructing or renovating a total of 77 hospitals, clinics, and dispensaries in agreement with the Ministry of Health. So far, construction work on 31 facilities health facilities has been completed.

## Balapitiya Base Hospital – Galle District

Being the only large hospital between the

Karapitiya Teaching Hospital in Galle and the Kalutara General Hospital in Kalutara, the Balapitiya Base Hospital had inadequate ward space, no Intensive Care Unit (ICU), and only one operating theatre. Being woefully in need of improvement, the IFRC and SLRCS, with funding from the Cyprus Red Cross Society, set about in expanding and refurbishing the hospital in order to improve the service and quality of healthcare in the area.

The Balapitiya Hospital now boasts a new three-storey building that accommodates an operating theatre, an ICU with six beds, a female and male surgical ward with 40 beds each. The Red Cross has also provided essential equipment, a new Out Patients Department (OPD), and has supplied a variety of specialist equipment.

## Uhana Central Dispensary – Ampara District

Located 15 km northwest of Ampara the Uhana Central Dispensary was one of the very few working hospitals in the area immediately after the tsunami, but it was evident that the dispensary urgently required medical supplies and equipment, staff, and infrastructure renovation.

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The German Red Cross (GRC), in cooperation with the SLRCS, recognised the need to rehabilitate this dispensary in order to improve the medical care services in and around Uhana, Ampara. As well as rehabilitating the original dispensary, the GRC has constructed an additional building and provided new medical equipment, transforming Uhana into a state-of-the-art dispensary. The new building consists of an OPD, a store room for drugs and medicine, a waiting area, two consultation rooms, a record room, and a bathroom. The Dispensary will now be able to provide emergency care and specialised medical assistance to the local population, which numbers 55, 000.

**Nurse Training School – Ampara District**

In the wake of the tsunami the Norwegian Red Cross (NRC) and Danish Red Cross (DRC), in cooperation with the SLRCS and the Ministry of Health, have constructed a brand new training college for nurses in the Ampara town, which will provide hundreds of jobs to locals in the area and improve specialised healthcare services in the east.

The benefits of a training college in a district that has gone through conflict and the worst natural disaster Sri Lanka has ever experienced are evident. Specialised training is vital for improving healthcare amongst rural communities living in the area. Each year, 300 nurses will be trained and qualified to work anywhere in Sri Lanka.

**Kamburupitiya Base Hospital – Matara District**

It was clear that the hospital lacked the capacity to deal with serious injuries and other surgical emergencies in the immediate aftermath of the tsunami. The OPD could not house the thousands of patients seeking treatment, there was no Emergency Treatment Unit (ETU), and an inadequate number of beds.

The French Red Cross, together with the SLRCS, set about in enhancing Kamburupitiya capacity to act



as a secondary referral hospital in the area whilst improving the quality of patient care provided. Now, the Kamburupitiya Hospital has a new five-storey wing, a new OPD, on-call rooms for doctors, brand new medical equipment, a four-bed ETU, a new dental clinic, male and female wards, storage facilities, a garage for ambulances, a dispensary, and a pharmacy.

The Red Cross' focus on the construction and rehabilitation of health facilities in Sri Lanka is just one small but significant step in developing the island's health sector, as well as providing local communities with job opportunities. The improvement of hospitals and the provision of up-to-date equipment will not only improve and strengthen the quality of patient care services for communities, but will also enhance the capacity of hospitals that were once either directly or indirectly affected by the impact of the tsunami.



# 'JACHUFI' FACTORY

## PROMOTING LOCAL FRUIT MANUFACTURERS



### Fruit Product – Jaffna

The Jaffna Peninsula is popular for a variety of fruit. Mango, grapes, banana, and lime are seen versatile in this area. Important factors that contribute for the fruit cultivation are the weather of the peninsula, physical resources and the untiring labour of the people. Since time immemorable, the Jaffna mango named as '*Yaapane Amba*' is tasted by the people from the south.

Jachufi fruit juice factory, which was started in Uduvil by Mr. A. Mahalingam, former Valikamam South Pradheshiya Sabha Secretary, aims at promoting farmers' production and involves in production by using fruits as the raw material and creating market and job opportunities. It functions to bring in hope for fruit manufacturers in the status

quo where the peninsula is facing an uncommon situation. JACHUFI – Jaffna, Chunnalam Fruit Factory – has been initiated with the cooperation of Action against Hunger, Ministry of Resettlement and Rehabilitation, and Sunnaham Multi-Purpose Cooperative Society, and is administered by the Sunnaham Multi-Purpose Cooperative Society.

### Acquiring raw material

People manufacture their produce under very hygienic conditions using agriculture products as the main raw material. When obtaining raw material needed for production, it is necessary that they ensure quality control, fair price, and the quality of the product prior to marketing it. Raw material that is purchased more than the quota is stored and

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preserved using the latest technology so as to use it during the next season. Hence, consumers are provided with a fair price and quality goods through preservation.

### Jachufi productions

Some of the products include nellie juice, mix fruit cordial, grapes cordial, pineapple cordial, mix fruit jam, wood apple jam, strawberry jam, tomato sauce, chilly sauce, chillie chutney, and lime pickle.

### Methods of production

Having their own machines to purify water and extract fruit juice have contributed towards the success of their produce. In order to obtain the pure

water for production, they use a water purification plant.

In order to obtain thick juice from fruits, a machine for squeezing juice is used. After adding other ingredients into the juice, the mixture is boiled in a pan. SMS is added to keep it for a longer period of time. The water vapourisation process is used to manufacture Jachufi products. The boiler used to produce the vapour processes the soft water that is separated from the hard water.

The machine used stainless steel so as to avoid chemical reactions that are caused by aluminium and copper machines. The bottles used to contain the fruit juice are boiled in water in the autoclave machine.

In the case of the Jaffna Peninsula, Jachufi is the first factory that was started after the major displacement. Fruits are purchased at a fair price and fruit producers have been encouraged after the initiation of this factory. They receive a steady income through this venture.

It is a fact that this factory provides a greater service to the people of Jaffna. However, it is saddening to note that their productions are not preferred by the people of Jaffna themselves as the people of the south. It is the duty of the people and volunteer organisations of Jaffna to uplift this factory that depends and utilises only local resources.





# Interview

**O**ur Vision: A peaceful, righteous and self-reliant society for the advancement of humanity.

**Our Mission:** To contribute towards strengthening multi ethnic and multi religious aspirations for the peaceful co-existence of different communities in the country in an environment of freedom of thought and want in human pursuits, targeting globally comparative development.

We believe that we should:

**Be Universal** by embodying the principles of compassion, peace and justice.

**Be Equitable** by committing to alleviating poverty regardless of religion, ethnicity, nationality, disability, sexual orientation, gender or age.

**Ensure Subsidiarity** by putting the needs of our beneficiaries first and serving them as customers with the respect they deserve.

**Ensure Proper Consultation and Communication** by being adaptable and responsive to the changing needs of our beneficiaries.

**Be Professional** by providing high quality, efficient and effective services.

**Ensure Coordination** by working in partnership with others.

**Ensure Transparency** by being accountable in all our work.

## Partnering For People

Partnerships prove that people in similar types of organisations with similar types of ideas can come together for the common goal of serving humanity.

## A Financial Partnership

For MASL, partnerships are an essential way to deliver the right development assistance to grassroots communities. Its first partnership for the year was formed with Amana Investments to provide micro finance to small entrepreneurs in Colombo. For recipients, it was important to see that MASL was in partnership with a bank to support the scheme.

## A Partnership Across The World

In a global partnership that originated in Sri Lanka, two faith based organisations, Muslim Aid and the United Methodist Committee on Relief (UMCOR), share funds, personnel, and infrastructure resources to deliver more effective and efficient practical relief and development assistance to the vulnerable

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around the world.

The alliance was formalised at the Houses of Parliament in London in June, 2007, demonstrating that people from all religions can work harmoniously together for a common goal.

MASL and UMCOR began working together during the 2006 Muttur crisis, when they found that they were the only two organisations on the ground available to assist refugees fleeing from Muttur to Kantale. While MASL was able to gain entry for UMCOR into Muslim areas, UMCOR shared its transport and infrastructure facilities.

In order to ease suspicion and distrust between communities, MASL and UMCOR were able to meet religious leaders and plead for peace.

The groundbreaking nature of the partnership was recognised by the Commonwealth Foundation, which asked Amjad Saleem, Country Director, to present it at the Commonwealth Heads of State Summit in Uganda.

**Emergency Relief**

MASL is ready to handle the potential Vanni crisis by responding to it with treatment and distribution of drinking water, distribution of dry rations and cooked meals, medical camps, the possibility of a mobile hospital and camp management. The organisation is also prepared to assist via recovery programmes, such as micro finance loans and food security.

**Micro Finance**

MASL has currently given out small enterprise and other business micro finance loans in Ambalantota, Batticaloa, and Muttur. It also seeks to develop innovative new credit and investment products for micro finance loans and are planning to work with a few other organisations on micro finance service provision.

**Food Security**

The organisation has identified six villages in Trincomalee and four villages in Hambantota, where, coming February they will work with community groups on home gardens, seed banks, and food processing. It also expects to establish 1000 households partaking in home gardening within the next two years and will include Trincomalee and Hambantota.

**Child Blindness and Rainbow Family**

MASL currently conducts Child Blindness Camps in Hambantota, where they detect, treat, and refer children with eye ailments to doctors, where necessary, depending on the cost involved in the surgery. They also continue the Rainbow Family Programme, where they provide care to orphans or school going children with a single parent. This is done through sponsoring their educational needs, in addition to providing mentoring services, pen pal projects, and other school related activities. They are also given special treats in celebration of the various religious and cultural festivals.



**Communications**

MASL currently works through the Conference Report, staff and newsletters. Upcoming events include fundraising activities such as a cricket match in aid of child blindness camps and water sanitation projects with Cargills.



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