



PRELIMINARY SURVEY REPORT – PHASE 1

Preliminary Identification Survey for Disabilities & Women Vulnerabilities in Northern Province

KILINOCHCHI DISTRICT



**Ministry of Health, Indigenous Medicine and Probation & Childcare
Services, Northern Province, Sri Lanka**

10/20/2016



Australian Government

Department of Foreign Affairs and Trade



The Asia Foundation

Message from the Hon. Minister

In order to address the needs of the disabled and vulnerable women in Northern Province, as the first step, the Ministry of Health of Northern Province has successfully completed this preliminary identification survey in Kilinochchi district. This will help us to identify the persons with characteristics of disabilities and vulnerable women.

At the first time, our Ministry has completed this household survey in electronic manner. As a result, all the collected data was processed and analysed accurately immediately. Further, most of our PHMs, who involved in data collection were able to receive tablet PCs and familiar with electronic reporting system. I hope this will help us to computerise the Public Health reporting activities in future.

With the information, collected by this survey, our Ministry will engage in a comprehensive assessment on the identified disabled and vulnerable women population with specific focus on their special needs and requirements.

I appreciate all the efforts and contributions made by the team of experts, who engaged on finalising the questionnaires and the officers, who involved in supervision and implementation of this survey successfully.

Dr. P. Sathiyalingam

*Hon. Minister of Health, Indigenous Medicine and Probation & Child Care Services,
Northern Province.*

Acknowledgement

Planning and execution of the survey was done by Ministry of Health, Northern Province of Sri Lanka with the support of expert panel under the directions of Hon. Minister of Health, Dr. P. Sathiyalingam.

The questionnaire was designed by Dr. R. Surenthirakumaran, Consultant Community Physician and Dr. S. Sivayokan, Consultant Psychiatrist with the contribution of Dr. T. Gobishangar (Orthopedic Surgeon), Dr. Malaravan (Ophthalmologist), Dr. K. Ajantha (Neurologist), Dr. N. Indranath (ENT Surgeon), others in the panel of experts.

Technological support to design the electronic questionnaire, Web-based Survey Management System along with an Android Application and 50 Tabs were provided by The Asia Foundation, with the financial support by Department of Foreign Affairs and Trade of Australia. The sponsored Tabs were used in Kilinochchi district.

Data collection and monitoring of the data collection were carried out with the support of RDHS Kilinochchi, MO/MCH, MOHs of Kilinochchi District, MAs / DOs at MOH offices, SPHMM and Public Health Midwives (PHMM).

Field data collection activities of the survey were done by PHMM under the direct supervision of SPHM, MOH, MO/MCH, RDHS and Programme Officer.

Overall Survey supervision activities were carried out by Dr. A. Ketheeswaran, Provincial Director of Health Service, Northern Province.

Co-ordination of the field work and data cleaning activities were performed by Mr. M. Prashanthan, Development Officer, Ministry of Health, NP at provincial level and by MAs and DOs at MOH level.

This publication was jointly prepared by Dr. R. Surenthirakumaran, Consultant Community Physician, Faculty of Medicine, Jaffna and Dr. B. Paul Bright, Programme Officer, Disability Survey, Ministry of Health, NP.

The services provided by the Management assistants, Development officers, Accountants, Drivers and other staff are acknowledged for their valuable contributions during the whole survey process.

Finally, a note of appreciation is extended to all the respondents of the survey for their invaluable cooperation.

OFFICERS ENGAGED IN THE SURVEY ACTIVITIES

Supervision of the survey activities at Provincial Office

Hon. Dr. P. Sathiyalingam	<i>Minister of Health, NP</i>
Mr. S. Thiruvakaran	<i>Secretary, Ministry of Health, NP</i>
Mrs. S. Sujieva	<i>Asst. Secretary, Ministry of Health, NP</i>
Mr. R. Raveenthiran	<i>Former Secretary, Ministry of Health, NP</i>
Dr. A. Ketheeswaran	<i>PDHS, Northern Province</i>
Mr. S. Sivapala	<i>Director-Planning, Ministry of Health, NP</i>
Dr. (Mrs.) S. R. Jude	<i>Former PDHS, Northern Province</i>
Dr. R. Surenthirakumaran	<i>Consultant Community Physician, Faculty of Medicine, Jaffna</i>
Dr. S. Sivayokan	<i>Consultant Psychiatrist, Teaching Hospital, Jaffna</i>
Mr. M. Prashanthan	<i>DO, Ministry of Health, NP</i>
Mr. G. Krishnakumar	<i>PPO, Ministry of Health, NP</i>
Dr. B. Paul Bright	<i>Programme Officer, eDVS, Ministry of Health, NP</i>
Dr. B. Pragalathan	<i>Former Programme Officer, eDVS, Ministry of Health, NP</i>
Dr. S. Vaseeharan	<i>Former Programme Officer, eDVS, Ministry of Health, NP</i>
Dr. V. Guruparan	<i>Former Programme Officer, eDVS, Ministry of Health, NP</i>

Supervision of the survey activities at district offices

Dr. P. Karthikeyan	<i>RDHS, Kilinochchi</i>
Dr. S. Jeyarajah	<i>Former RDHS, Kilinochchi</i>
Dr. (Mrs.) T. Poonkothai	<i>RDHS, Mullaitivu</i>
Dr. M. Mahendran	<i>RDHS, Vavuniya</i>
Dr. Rajani Antonisin	<i>RDHS, Mannar</i>
Dr. K. Nanthakumaran	<i>RDHS, Jaffna</i>
Dr. V. Muraliharan	<i>MO/MCH, Kilinochchi</i>
Dr. S. Muhunthan	<i>MO/MCH, Mullaitivu</i>

Supervision of the survey activities at MOH Offices

Dr. R. Krishnalingam	<i>MOH, Karachchi, Kilinochchi</i>
Dr. T. Suvendran	<i>MOH, Kandawalai, Kilinochchi</i>
Dr. S. Suganthan	<i>MOH, Palai, Kilinochchi</i>
Dr. P. Gohilan	<i>MOH, Poonakary, Kilinochchi</i>
Dr. K. Dharsanan	<i>Former MOH, Karachchi, Kilinochchi</i>
Dr. K. Selvanathan	<i>Former MOH, Poonakary, Kilinochchi</i>
Dr. H. Y. C. Perera	<i>Former AMOH, Poonakary, Kilinochchi</i>
Ms. K. Umanathi	<i>SPHM, Karachchi MOH, Kilinochchi</i>
Ms. E. Vimalleswary	<i>SPHM, Karachchi MOH, Kilinochchi</i>
Ms. N. Jeyavathany	<i>SPHM, Kandawalai MOH, Kilinochchi</i>
Ms. T. Naguleswary	<i>Former SPHM, Poonakary MOH, Kilinochchi</i>
Ms. T. Jeyanthi	<i>SPHM, Poonakary MOH, Kilinochchi</i>

Ms. G. Daniel	<i>SPHM, Palai MOH, Kilinochchi</i>
Ms. S. Saroja	<i>MA, Karachchi MOH, Kilinochchi</i>
Ms. U. Rathika	<i>MA, Karachchi MOH, Kilinochchi</i>
Ms. S. Tharmila	<i>MA, Kandawalai MOH, Kilinochchi</i>
Ms. K. Piratheepa	<i>MA, Kandawalai MOH, Kilinochchi</i>
Ms. R. Kavitha	<i>MA, Poonakary MOH, Kilinochchi</i>
Ms. N. Newtha	<i>MA, Palai MOH, Kilinochchi</i>

Staff engaged in data collection

Ms. A. Kethesswary	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. S. Thiruvaran	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. C. Ratnakumar	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. J. Jeyagowry	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. R. Suseela	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. S. Kirubananthan	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. G. Suganthini	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. M. Valarmathy	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. P. Miverna	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. P. Jasikala	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. M. Arulmani	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. K. Rajeentha	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. S. Ushananthini	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. S. Ithayarani	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. V. Sivananthini	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. K. Surendra	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. S. Vijayakanthi	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. A. Janarthani	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. S. Sakthy	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. P. Thulasi	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. P. Tharani	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. D. Anitta Andrado	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. S. Puvanalagini	<i>PHM, Karachchi MOH, Kilinochchi</i>
Ms. Y. Rajini	<i>H.S.A, Karachchi MOH, Kilinochchi</i>
Ms. T. Thavamalini	<i>H.S.A, Karachchi MOH, Kilinochchi</i>
Ms. L. Pushparani	<i>H.S.A, Karachchi MOH, Kilinochchi</i>
Ms. S. Mery Chitra	<i>H.S.A, Karachchi MOH, Kilinochchi</i>
Ms. N. Jeyanthi	<i>H.S.A, Karachchi MOH, Kilinochchi</i>
Ms. A. Rasithadevi	<i>H.S.A, Karachchi MOH, Kilinochchi</i>
Ms. P. Vasanthapiriya	<i>H.S.A, Karachchi MOH, Kilinochchi</i>
Ms. V. Sivadevi	<i>H.S.A, Karachchi MOH, Kilinochchi</i>
Ms. K. Kavitha	<i>PHM, Kandawalai MOH, Kilinochchi</i>
Ms. J. Sharmini	<i>PHM, Kandawalai MOH, Kilinochchi</i>
Ms. M. Niranjala	<i>PHM, Kandawalai MOH, Kilinochchi</i>

Ms. L. Maryanantty	<i>PHM, Kandawalai MOH, Kilinochchi</i>
Ms. K. Mathumitha	<i>PHM, Kandawalai MOH, Kilinochchi</i>
Ms. J. Sasikala	<i>PHM, Kandawalai MOH, Kilinochchi</i>
Ms. A. Reshantha	<i>PHM, Kandawalai MOH, Kilinochchi</i>
Ms. S. Amirtha Sulosana	<i>PHM, Kandawalai MOH, Kilinochchi</i>
Ms. U. Sivaruby	<i>PHM, Kandawalai MOH, Kilinochchi</i>
Ms. S. Nagalogini	<i>H.S.A, Kandawalai MOH, Kilinochchi</i>
Ms. T. Kirupajini	<i>H.S.A, Kandawalai MOH, Kilinochchi</i>
Ms. S. Vijayakumary	<i>H.S.A, Kandawalai MOH, Kilinochchi</i>
Ms. T. Sumeetha	<i>PHM, Poonakary MOH, Kilinochchi</i>
Ms. S. Sujeepa	<i>PHM, Poonakary MOH, Kilinochchi</i>
Ms. M. Arunasalam	<i>PHM, Poonakary MOH, Kilinochchi</i>
Ms. M. Yasotha	<i>PHM, Poonakary MOH, Kilinochchi</i>
Ms. K. Jeyarani	<i>PHM, Poonakary MOH, Kilinochchi</i>
Ms. A. Arulnithy	<i>PHM, Poonakary MOH, Kilinochchi</i>
Ms. K. Sarmini	<i>PHM, Poonakary MOH, Kilinochchi</i>
Ms. N. Kuganeswary	<i>PHM, Poonakary MOH, Kilinochchi</i>
Ms. S. Kavitha	<i>PHM, Poonakary MOH, Kilinochchi</i>
Ms. P. Paritha	<i>PHM, Palai MOH, Kilinochchi</i>
Ms. T. L. Rajeskanna	<i>PHM, Palai MOH, Kilinochchi</i>
Ms. S. Rosista	<i>PHM, Palai MOH, Kilinochchi</i>
Ms. K. Losana	<i>PHM, Palai MOH, Kilinochchi</i>
Ms. S. Pushpamalar	<i>PHM, Palai MOH, Kilinochchi</i>

PANEL OF EXPERTS INVOLVED IN THE TECHNICAL ASPECT OF THE SURVEY

Dr. S. Sivayokan	<i>Consultant Psychiatrist, Teaching Hospital, Jaffna</i>
Dr. R. Kesavan	<i>Public Health Specialist, Former WHO Consultant</i>
Dr. R. Surenthirakumaran	<i>Consultant Community Physician, Faculty of Medicine, Jaffna</i>
Dr. T. Gobishankar	<i>Consultant Orthopedic Surgeon, Teaching Hospital, Jaffna</i>
Dr. M. Malaravan	<i>Consultant Ophthalmologist, Teaching Hospital, Jaffna</i>
Dr. N. Sivarajah	<i>Consultant Community physician, Faculty of Medicine, Jaffna</i>
Dr. K. Ajantha	<i>Consultant Neurologist, Teaching Hospital, Jaffna</i>
Dr. N. Sivathaas	<i>Consultant Psychiatrist, DGH Vavuniya</i>
Dr. N. Indranath	<i>Consultant E.N.T Surgeon, Teaching Hospital, Jaffna</i>
Dr. S. Sivansuthan	<i>Consultant Physician, Teaching Hospital, Jaffna</i>
Dr. K. Nanthakumaran	<i>RDHS, Jaffna</i>
Mr. V. Subramaniyam	<i>Director, Organization for Handicapped (ORHAN)</i>
Mr. G. Krishnakumar	<i>PPO, Ministry of Health, NP</i>
Mr. A. Subakaran	<i>Leg. Team Leader, The Asian Foundation</i>
Mr. T. Visvaruban	<i>Commissioner, Dept. of Probation & Childcare</i>
Mrs. N. Inparaj	<i>Provincial Director, Department of Social Services, NP</i>
Mr. S. Suthaan	<i>Project Officer, Ministry of Health, NP</i>

ABBREVIATIONS AND ACRONYMS

AMOH	- Acting Medical Officer of Health
DO	- Development Officer
eDVS	- Electronic Disability and Vulnerability Survey
H.S.A	- Health Service Assistant
MA	- Management Assistant
MO	- Medical Officers
MO/MCH	- Medical Officer of Maternal and Child Health
MOH	- Medical Officer of Health
NCD	- Non Communicable Diseases
NPC	- Northern Provincial Council
PDHS	- Provincial Director of Health Service
PHM	- Public Health Midwife
RDHS	- Regional Director of Health Service
SPHM	- Supervising Public Health Midwife
WHO	- World Health Organization

Contents

<i>Message from the Hon. Minister</i>	I
<i>Acknowledgement</i>	II
<i>Officers engaged in the survey activities</i>	III
<i>Panel of experts involved in the technical aspect of the survey</i>	VI
<i>Abbreviations and acronyms</i>	VII
<i>Contents</i>	VIII
<i>List of Tables and Figures</i>	IX
1. INTRODUCTION	1
1.1. BACKGROUND AND JUSTIFICATION	1
1.2. OBJECTIVES	3
General Objective	3
Specific Objectives	3
2. SURVEY METHODOLOGY	4
2.1. Phase 1	4
Survey Population	4
Survey Area	4
Survey Instrument	4
Data Collection	5
Data entry and Analysis	5
Survey Period	6
Dissemination of Information	6
2.2. Phase 2	6
2.3. Phase 3	6
3. RESULTS AND DISCUSSION	8
4. LIMITATIONS	13
5. REFERENCE	14
<i>Annexure - 1: Questionnaire in English (Phase I)</i>	15
<i>Annexure - 2: Questionnaire in English (Phase II)</i>	20

List of Tables and Figures

Table 1: Number of Households in Kilinochi District According to the data in DS office	7
Table 1: Number of Disabilities identified in Kilinochchi districts as per disability Categories.....	8
Table 2: Number of people suffering from NCDs in Kilinochchi District	9
Table 3: Gender of Chief wage earner in Kilinochchi District.....	10
Table 4: The Status of residence of kilinochchi people during the survey period.....	11
Table 5: Recipient status for financial Assistance by the Government.....	11
Fig. 1: Gender of the Chief wage Earner	9



PRELIMINARY SURVEY REPORT – PHASE 1

Preliminary Identification Survey for Disabilities & Women Vulnerabilities in Northern Province

KILINOCHCHI DISTRICT



**Ministry of Health, Indigenous Medicine and Probation & Childcare Services,
Northern Province, Sri Lanka**

10/20/2016



Australian Government
Department of Foreign Affairs and Trade



The Asia Foundation

1. INTRODUCTION

According to WHO international, the prevalence of disability worldwide is around 15% (WHO, 2011). This figure includes problems arising from chronic disease as well as congenital disability not just the results of injury, however the prolonged conflict in Sri Lanka is suspected to have resulted in a higher prevalence of injurious disabilities from wounds, shell blasts and explosive devices. Disability is defined by WHO:

“Disability is an umbrella term, covering impairments, activity limitations, and participation restrictions. An impairment is a problem in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or action; while a participation restriction is a problem experienced by an individual in involvement in life situations” (WHO, 2001).

Aside from the physical damage to health from the war, the family unit has also seen turmoil in the aftermath, creating vulnerability. Vulnerability is defined by this report as being at increased risk of gender based violence including rape, harassment and domestic abuse.

1.1. BACKGROUND AND JUSTIFICATION

The Sri Lankan civil war ended in 2009, but 30 years of conflict took its toll on the civilian population and the impact of the war is still being quantified by wide scale research. Historically, there is a lack of data on the health of the Northern and

Eastern Provinces as they were not covered by the demographic health surveys. This extends to medical illnesses but, specific to our cause, there is also little information on the prevalence of disability despite a presumed dramatic rise post-war as a result of injury.

Similarly, as a result of military action, there has been an increase in widows and women-headed households (Department of Census and Statistics Ministry of Finance and Planning Sri Lanka, 2015). There is some qualitative and anecdotal research that suggests that there is an increased incidence of complex mental health and psychosocial problems amongst women who are the head of their house, including assault and rape (Somasundaram & Sivayokan, 2013).

Northern Province has an estimated population of 1,235,060 spread across 5 districts, namely Kilinochchi, Mullaitivu, Vavuniya, Mannar and Jaffna. Families are still settling since the war and this forced nomadic behavior is an identified challenge for our work.

In order to tackle the plethora of issues arising as a result of disability and women vulnerability, it is essential that we collect quantifiable and location-specific data on their prevalence. This will definitively show the extent of the problems in Northern Province and enable the creation of effective rehabilitation programs and focused targeting of gender based violence.

1.2. OBJECTIVES

General Objective:

To determine the prevalence, needs and the service gap of the disable persons and women in special groups in Northern Province.

Specific Objectives:

- To determine the prevalence and pattern of disability.
- To assess the needs of the persons with disabilities.
- To assess the service gaps in the disability related services.
- To priorities the needs and plan for a comprehensive and integrated disability services.
- To determine the prevalence of women in special groups.
- To assess the needs of special groups of women from their point of view.
- To priorities the needs and plan for a comprehensive and integrated service for women in special groups.

2. SURVEY METHODOLOGY

The survey was designed in three phases namely; Phase 1, Phase 2 and phase 3.

2.1 Phase 1

Survey Population

The Phase one was a household survey covering the whole population living in the Northern Province done by the PHMM. The number of people living in the Districts and the number of households were obtained from the respective District Secretariat.

Survey Area

All five districts; Namely, Kilinochchi, Mullaitivu, Vavuniya, Mannar and Jaffna in the Northern Province of Sri Lanka were the Survey Area. It was decided to commence the survey from Kilinochchi district.

Survey Instrument

A pre designed interviewer administered questionnaire was developed after having multiple consultative meetings with a panel of experts consists of Professionals working with both disabled people and women who are categorized under special groups.

An android application was designed to do the survey in a electronic method, using Tablet PCs.

Data collection

Enumerators

Data was collected by Family Health Workers (PHMM). PHMM were visiting the houses in their respective PHM areas. Management Assistance (MAs) or Development Officers (DOs) attached to the relevant MOH offices were monitoring the data which was entered by the PHMM daily using online system at divisional level.

Monitoring

Divisional level monitoring was done by the respective SPHM and MOHs. Supervising and problem solving was done by MO/MCH at the District/RDHS level. Monthly review meetings were held by the Provincial Ministry where arising issues were discussed and solutions were sought then and there.

Ten House sample survey

Ten house sample surveys were carried out separately to cross check the quality of data and the coverage of the survey in each PHM's area at the end of the data collection process.

Data entry and analysis

Since the Survey was done electronically, there was no separate procedure of data entry. The Database of the collected data was analyzed by using SPSS software under the guidance and supervision of qualified professional. Tables and charts were used to present the data.

Survey Period

Planning and preparation of survey materials were done from April to October 2015.

Data collection was done from November 2015 to April 2016. Ten house sample survey and Data correction were done from March to September 2016. Data analysis was carried out from September to October 2016.

Dissemination of information

The survey results will be disseminated to the relevant stakeholders through appropriate channel.

The analyzed data is planned to be presented to a multi sectoral group of professionals, who work with, disabilities and women who are categorized under special groups, which will facilitate the planning of their services in the province.

2.2 Phase 2

Phase two of the survey will be done by MOHs and MOs. The identified disable persons via the phase one survey will be the study population. The Survey will be carried in a Clinic setting where the identified disable persons are living or at their home. Electronic questionnaire and Android Application, has been developed for the second phase. The questionnaire has finalized with the support of experts. Questionnaire is annexed. (Annexure 2)

2.3 Phase 3

Identified disabled person in phase II, who needs specialist care, but not getting the services, will be in seen by the specialist to confirm their disability. This phase will help to get the final confirmed details on disability.

Inauguration Programme



Training for Data collectors



Data collection using Tablet PC



3. RESULTS AND DISCUSSION

* In this Preliminary report; some of the vital findings of Kilinochchi District is presented which are subjected to correction till the process of re-checking the survey entries are completed.

There were 4 MOH areas staffed with 47 PHMM. The total number of family members (Population) included in the survey was 120,298. According to the Statistic Handbook -2015 of District Secretariat, total number of households was 41327. Total of 34138 households were enumerated and included in this survey for the District of Kilinochchi. Numerous reasons were given by the authorities for the disparity. Appropriate scientific methodologies were adopted to ensure the quality of the collected data in order to achieve the research objectives. More details are given in the limitation section.

Table 1: Number of Households in Kilinochi District According to the data in DS office

No	AGA Division / MOH Name	Total Number of <i>Households</i>
1	Karachchi	22,838
2	Kandawalai	7,936
3	Poonakari	7,006
4	PachchiPalai	3,547
Total		41,327

Source: Statistical Handbook – 2015, Kilinochchi district

The households visited were 18221, 6843, 6062 and 3012 in Karchchi, Kandawalai, Poonakary and Palai MOH divisions respectively. The total number of Women and children included in the survey were 25,233 and 39,882 respectively.

The Table 2 summarizes the Number of Disabilities reported in the first phase of the survey as per the disability categories. There were 3960 (30.2%) disabilities related to mobility which is the highest toll over other disability categories. The number of Mental retardation and Mental Diseases were seems to be low than the expected may be due to the under reporting, as this first phase of survey was based on self-reported information.

Table 2: Number of Disabilities identified in Kilinochchi districts as per disability Categories

Disability	Number of disabilities	Percentage within disabilities (%)
Hearing	1,670	12.7
Sight	3,342	25.5
Speech	487	3.7
Mobility	3,960	30.2
Mentally Retardation	966	7.4
Mental Disease	875	6.7
Inability to move alone/go outside	1,447	11.0
Other disabilities	384	2.9
Total	13,131	100.0

The incidents of Hypertension (4846) are more than the incidents of Diabetes (3192). There were 394 people affected by chronic kidney disease while 259 people are suffering from cancer (Table 3).

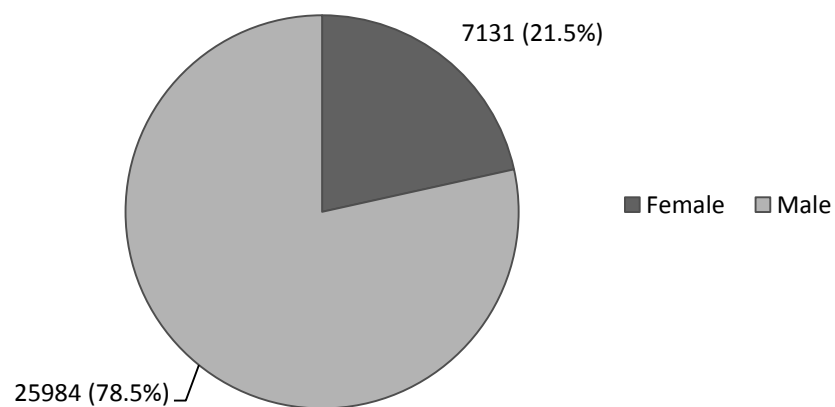
Table 3: Number of people suffering from NCDs in Kilinochchi District

Non Communicable Diseases	Numbers of People affected
Diabetes Mellitus	3,192
Hypertension	4,846
Cancer	259
Chronic Kidney Disease	394
Total	8,691

WOMEN IN SPECIAL GROUPS

Of the total of 25,233 women included in the survey, 4,290 (17.0%) women's husbands died, 1,310 (5.2%) women were deserted by their Husbands and 215 (0.9%) women's husbands were missing.

Fig. 1: Gender of the Chief wage Earner



A total of 7,131 women (21.5%) were the Chief wage earners of their families, that is; one out of every five family has a woman as the chief wage earner for the family in Kilinochchi district (Table 4).

Table 4: Gender of Chief wage earner in Kilinochchi District

Gender of the Chief wage Earner	Number	Percentage
Female	7,131	21.5%
Male	25,984	78.5%
Total	34,138	100.0

There were 4030 (11.9%) families who did not have an own residence during the survey period in Kilinochchi. Among the families who had owned residence, 22,366 (65.5%) families had their own permanent houses while 5,867 (17.2%) of them had own temporary houses (Table 5).

There were 35,710 school going students aged 3 to 18 yrs in Kilinochchi. Number of school dropped outs were 944 (nearly 2.6 %).

Samurdhi and PAMA are the financial assistance provided by the government for the needy people. The number of households who were receiving Samurdhi and PAMA were 11,002 (32.2%) and 7823 (22.9%) respectively.

Table 5: The Status of residence of kilinochchi people during the survey period

Status of the Current Residence	Number	Percentage (%)
<i>Own Residence</i>		
Own Permanent house	22,366	65.5
Own Semi-permanent house	969	2.8
Own temporary house	5,867	17.2
Own others	445	1.3
<i>Not owned</i>		
Not owned relatives house	2,899	8.5
Not owned shared accommodation	507	1.5
Not owned rent	534	1.6
Not owned others	90	0.3
Data not available	461	1.4
Total	34,138	100.0

Table 6: Recipient status for financial Assistance by the Government

Recipient status for financial Assistance by the Government	Samurdhi	PAMA
Yes	11,002 (32.2%)	7,823 (22.9)
No	22,905 (67.15)	25,984 (76.1%)
Data not available	131 (0.7%)	331 (1.0%)
Total	34,138 (100%)	34,138 (100%)

4. LIMITATIONS

There were disparities between the data obtained from District Secretariat and survey data with regards to number of Households. The number of households in the records at the District Secretariat was higher than the survey data. Hence following measures were taken to decide on the completion of data collection.

- The households visited by the PHMM were compared with the list of families maintained by respective GSs and voters lists.
- PHMM visiting the whole assigned geographical area was monitored by using the GPS system incorporated with eDVS
- Random Ten house sample survey was done separately by Programme officers and staff in the provincial health ministry.

5. REFERENCES

Department of Census and Statistics Ministry of Finance and Planning Sri Lanka, 2015. *Household Income and Expenditure Survey - 2012/13*, Colombo.

District Secretariat Kilinochchi Sri Lanka, 2015. *District Statistical Handbook*, Kilinochchi.

Somasundaram, D. & Sivayokan, S., 2013. Rebuilding Community Resilience In A Post-War Context: Developing Insight And Recommendations - A Qualitative Study In Northern Sri Lanka. *International Journal of Mental Health Systems*, 7(3).

World Health Organization, 2001. *International Classification Of Functioning, Disability And Health*, Geneva.

World Health Organization, 2011. *World Report on Disability*, Switzerland.

Annexure - 1: Questionnaire in English (Phase I)

Preliminary Identification Survey for Disabilities in the Northern Province

An initiative by the Ministry of Health of Northern Province to identify disabled persons and vulnerable women

* Required fields

District:

DSD:

PHI Area:

1. PHM Area *

2. GN Division *

3. RESPONDENT PROFILE

3.1 Enter the serial number of family *

Should be in the format given already

GND Code Enter the Serial number of family

<input type="text"/>	<input type="text"/>
----------------------	----------------------

3.2 Address line 1 *

3.3 Address line 2

3.4 Address line 2

3.5 Relationship to the Chief Wage Earner in the family *

Chief wage earner is the person who contributes the most to the household expenses

- | | |
|--------------------------------|-------------------------------------|
| <input type="radio"/> Self | <input type="radio"/> Grandkid |
| <input type="radio"/> Wife | <input type="radio"/> Cousin |
| <input type="radio"/> Husband | <input type="radio"/> Brother |
| <input type="radio"/> Son | <input type="radio"/> Sister |
| <input type="radio"/> Daughter | <input type="radio"/> Guardian |
| <input type="radio"/> Father | <input type="radio"/> Not Available |
| <input type="radio"/> Mother | |
| <input type="radio"/> Niece | |
| <input type="radio"/> Nephew | |

3.6 Gender of the Chief Wage Earner *

- Male
- Female
- Not Available

3.7 Are you a recipient of Samurdhi? *

- Yes
- No
- Not Available

3.8 Is the family receive PAMA ?*

- Yes
- No
- Not Available

3.9 Are children between age of 3- 18 are currently in the family ?*

- Yes
- No
- Not Available

If this option "YES"

Number of all LIVING children in the family

Consider only those are in age 3 - 18

- Attending school
- Dropped out of school
- Never attended
- Not Available
- Child#1
- Child#2

3.10 What has been the impact of war on your family? *

- Lost economic livelihood
- Lost family members
- Left family members injured
- Missed family members
- Displaced from home
- Lost land and/or house
- Mental and/or physical trauma
- Family member(s) claimed as Dead
- Lost blood relatives
- Others
- Not Available

3.11 Please indicate the status of your current residence*

- Own Permanent house
- Own Semi - permanent House
- Own temporary house
- Own others
- Not owned : rent
- Not owned : Relatives house
- Not owned : Shared accommodation
- Not owned : others

3.12 Family Registration Number

3.13 Total number of family members

3.14 If family residing temporarily in the current address

Yes

No

If YES

Reason for residing temporarily

(Work, Family reason, Education, other, Not available, war impact)

Screen 2

4. MORBIDITY PROFILE

Please indicate how many of your family members suffer from the following medical condition *

Diabetes

High Blood Pressure

Cancer

Chronic Kidney Disease

Screen 3

5. GENDER RELATED VULNERABILITIES

5.1 Do you have woman member in the family?

Yes

No

If YES then

No of woman members in the family

1

Member 1

less than 18

Age 18-34

Ag 35 -50

Age 50+

Please provide details of all women members in your family along the following lines

Married

Unmarried

Please provide details of all women members in your family along the following lines

Deserted by Husband (since 6 months)

Husband Missing

Husband Died

Other Trauma

Not Applicable

Informal marriage

others

5.2 Please indicate the importance of the following needs of the women in your house on a scale of 1 to 5. 1 being least important and 5 being most important * (0 - Not required)

5.3 Financial support

5.4 Housing

5.5 Employment

5.6 Medial assistant

5.7 Water

5.8 Sanitation

5.9 Others

Screen 4

6. DISABILITY PROFILE

Please indicate how many of your family members suffer from the following disabilities *

- Sight
- Hearing
- Speech
- Mobility
- Mentally Challenged
- Mental disease
- Inability to move alone / go outside
- Others

Screen 5

7. Need of the disabled

Please indicate the importance of the following needs of the disabled on a scale of 1 to 5. 1= least needed and 5 = most needed. *[0 - Not Required]

- | | |
|--|--|
| <input type="radio"/> Caring Nursing assistants | <input type="radio"/> Livelihood Support |
| <input type="radio"/> Toilet Facilities | <input type="radio"/> Financial Assistance |
| <input type="radio"/> Water Supply | <input type="radio"/> Education |
| <input type="radio"/> Medicines | <input type="radio"/> Housing |
| <input type="radio"/> Assistive Devices | <input type="radio"/> Counseling |
| <input type="radio"/> Access to medical services | <input type="radio"/> Other |

Screen 6

8. FAMILY NEEDS ASSESSMENT BY PUBLIC HEALTH MIDWIFE

Please indicate the importance of the following needs for the family of the respondent on a scale of 1 to 5. 1= least needed and 5 = most needed. *[0 - Not Required]

- | | |
|--|--|
| <input type="radio"/> Caring Nursing assistants | <input type="radio"/> Livelihood Support |
| <input type="radio"/> Toilet Facilities | <input type="radio"/> Financial Assistance |
| <input type="radio"/> Water Supply | <input type="radio"/> Education |
| <input type="radio"/> Medicines | <input type="radio"/> Housing |
| <input type="radio"/> Assistive Devices | <input type="radio"/> Counseling |
| <input type="radio"/> Access to medical services | <input type="radio"/> Other |

Screen 7

9. Submit Screen

9.1 NIC of respondent

9.2 Name of respondent

9.3 Contact No

Click to take image.

Comment

SUBMIT

Annexure - 2: Questionnaire in English (Phase II)

Preliminary Identification Survey for Disabilities in Northern Province

Phase - 2

Informant:

(Get the data from the disabled person as you can. If not, note the reason as well as from whom you are collecting the data)

Consent for collecting information of disabled person

Dear Participant,

In our society we are able to see so many people with impaired talents due to defects in both physical and psychological aspects. We tend to identify people with this problem and want to serve their needs. For that we are conducting a research. We humbly request your kind participation. Your truthful participation will let to design physical, mental and social services for the region. Data you give will be kept confidential.

Thank you for your co-operation

Consent

I consent to provide details after understanding the purpose of this study.

** Signature of the participant*

*** It has been decided at the meeting held on 27th May 2016, to translate the consent form to Tamil and get the signature of the participant in a printed copy**

Part 4 – Details of the disabled person

1. Name:
2. Sex: Male/Female
3. Date of birth (If you know): Date/Month/Year
4. Current age(in completed years):*(to be Calculated automatically)*
5. National Identity card number(If not, Driving License No) :
6. Family Card number:

7. Educational qualification, *The last exam passed*(Mention highest education level only):

- No formal education
- Grade 1-5
- Grade 6-11
- Qualified GCE(O/L)
- Qualified GCE(A/L)
- Diploma/ Certificate Holder
- Degree Holder
- Post graduate

8. Is the disability from birth?

Yes/ Congenital
No / Acquired

9. If this disability is not present at birth, occupation before the occurrence of disability:

- No Job
- House wife
- Farming
- Animal Husbandry
- Open/ Run Shop
- Driving
- Trading
- Mechanic
- Fishing
- Carpentry
- Security Guard
- Health Worker
- Tailoring
- Constructor
- Electrician
- Masonry
- Catering / Hotel
- Plumbing
- Labour
- Welding
- Teacher
- Administrator/ clerk
- Computer/ Operator
- Telephone/ Electronic devise repairing
- Hairdressing
- Leather Work
- Bee keeping
- Restaurant/Tea shop
- Fire wood Seller
- Auto/ van driver
- Laundry
- NGO/ Charity work
- Begging
- Toddy Tapping
- Combatants
- Armed forces and Police
- Other (Specify)

10. Current occupation (if an employer):

- No Job
- House wife
- Farming
- Animal Husbandry
- Open/ Run Shop
- Driving
- Trading
- Mechanic
- Fishing
- Carpentry
- Health Worker
- Constructor
- Electrician
- Masonry
- Catering / Hotel
- Plumbing
- Labour
- Welding
- Teacher
- Administrator/ clerk
- Computer/ Operator
- Hairdressing
- Bee keeping
- Restaurant/Tea shop
- Fire wood Seller
- Auto/ van driver
- Laundry
- NGO/ Charity work
- Begging
- Toddy Tapping
- Combatants
- Armed forces and Police

- Tailoring
- Leather Work

11. Marital status:

- Single
- Married
- Living together
- Separated
- Divorced
- Widowed/widower (died/ any other loss)

12. Chief caregiver of disabled person (If so, specify his/her relationship):Wife

- Husband
- Son
- Daughter
- Father
- Mother
- Niece
- Nephew
- Grandchild
- Cousin
- Brother
- Sister
- Guardian
- Neighbor
- Friend
- Hired Person
- Any other, Specify
- Not Available

13. Type of current living place, (if other's specify):

- Own Permanent house
- Own Semi - permanent House
- Own temporary house
- Own others
- Not owned : rent
- Not owned : Relatives house
- Not owned : Shared accommodation
- Not owned : others

Part 5:

14. Type of disability/ Disabilities and duration (As Mentioned in form –G)

Type	Duration	Section to be filled
Sight <i>(Blind in one or both eyes, unable to see someone near faraway)</i>		A
Low Vision		
Blindness		
Only eye		
Hearing <i>(Deaf in one or both ears, difficulty hearing what other people say)</i>		B
Partial Deafness		
Complete Deafness		
One side hearing		

Speech		C
Completely Defective		
Partially Defective		
Motor Disability (Mobility + Inability to move alone / go outside)		D
Bed Bound		
Move within Home Limits		
Can Move outside home		
Mental Disability (Multi Select)		E
Mild to moderate learning difficulties		
Severe impairment in intellectual functions		
Unable to look after self care		
Unable to carry out ADLs exclusively due to mental conditions		
Marked impairment in socialization		
Unable to live independently / always need a care taker		
Unable to earn their livelihood		
Others		F

15. In the above question number 12th, if you mentioned as childhood disease or disease after the childhood, the opinion about that disease (Mark as '✓')

	Causes	Confirmed	To be confirmed
A. SIGHT	Childhood blindness		
	Glaucoma		
	Diabetes		
	Macular & Retinal Degenerative Disease		
	Others (Specify)		
B. HEARING	ASOM / CSOM		
	Meningitis		
	Otosclerosis		

	Familial			
C. SPEECH	Vocal cord damage			
	Brain damage			
	Muscle weakness			
	Respiratory Weakness			
	Strokes			
	Polyps or nodules on the vocal cords			
	Vocal cord paralysis			
	Other causes	<ul style="list-style-type: none"> • Hearing Impaired • Cerebral Palsy • Cleft Lip And Palate • Down Syndrome • Global Developmental Delay • Autism spectrum Diseases • Oral Cancer • Laryngeal Cancer • Huntington’s Disease • Dementia • Traumatic Brain Injuries • Parkinsonism • Amyotrophic Lateral Sclerosis 		
D. MOTO DISABILITY (MOBILITY + INABILITY TO MOVE ALONE / GO OUTSIDE)	Vision → Section ‘A’ to be filled			
	Vestibular → ENT Section			
	Mental Illness → Mental illness section			
	Cardiac Cause	Specify		
	Skeletal/ Joints and bone	Causes are to be classified under: <ul style="list-style-type: none"> • Injury/Trauma • War related • Other • Infective • Inflammatory • Degenerative • Neoplastic 		
	Brain			
	Spinal Cord			
	Peripheral Nerve			
Myopathies				

	Others	Aging NMJ Disorder Others; Specify		
E. MENTAL DISABILITY	Mental retardation	Syndromal child (specify if possible) or from birth <ul style="list-style-type: none"> • Known Syndrome. Specify....(Eg: Try 21) • Unknown 		
		Infections or injuries during childhood		
	Mental Illness	Chronic Schizophrenia or related psychotic disorders <ul style="list-style-type: none"> • Infection • Trauma • Others (Specify)..... 		
		Chronic Bipolar Affective Disorder		
		Severe debilitating depression		
		Dementia or other Chronic confusional states		
		Others (specify)		
F. OTHERS	Know (Specify)			
	Don't know			

16. Do you use one or more **instruments or Specific therapies** for your above mentioned disability? If not, do you think that you have a need for that instrument?

	Special Instruments or Therapies or Services	Currently using	Needed	
A. SIGHT	White cane			
	Optical / Low vision aids			
	Special Educational activities			
	Vocational Training			
	Others: (Default: Driving License)			
B. HEARING	Hearing aids			
	Special educational activities			
	Teaching in special school			
	Teaching special subjects			
C. SPEECH	Speech therapy			
	Special educational activities			
	Teaching in special school			
D. MOTOR DISABILITY (MOBILITY + INABILITY TO MOVE ALONE / GO OUTSIDE)	Occupational therapy			
	Physiotherapy			
	Vocational training			
	Medical treatment			
	Medical rehabilitation			
	Others	Wheel chair		
		Specialized chair		
		Specialized bed		
		Prosthetic leg		
		Prosthetic hand		
		Walking frame		
		Surgical treatment		
	Prosthesis			
	Specialized slipper (Shoe raise)			

		Spinal belt		
		Clutches		
		Neck color		
		Designing moving and walking assistive devices		
		Three wheeler		
		Motor bike designed for disabled		

E. MENTAL DISABILITY	Mental Retardation	Special educational activities		
		Training on vocational skills		
		Day care in specialized schools or centers		
		Home based assistance in care giving		
		Specialized therapies (speech, physio...) please mention		
		Regular financial assistance		
	Mental Illness	Rehabilitation (residential / community based)		
		Apprenticeship / part time job		
		Specialized psycho therapies		
		Regular financial assistance		
		Long stay / nursing home facilities		
F. OTHERS	Any other services like this (Specify)			

17. Do you get/need to get any of the following **General services** for the above mentioned disability you have?

General Service	Already available	should be available
Identify appropriate employment & develop their capacity		
Psychological Assistance		
Psychological support		
Psychosocial counseling		
Basic facilities		
Food		
Clothing		
Water		
Electricity		
School		
Appropriate housing facilities for disabled		
Appropriate toilet facilities for disabled		
Appropriate bathroom facilities for disabled		
Appropriate bed for disabled		
Appropriate furniture for disabled		
Economical compensation/ Assistance		
Initial compensation		
Regular assistants amount		
Investment for self-employment		
Others specify		
Welfare services		
Accessing inclusive welfare assistance		
Service provision of welfare institution		
Others (Specify)		

Part 7

18. Impacts of above mentioned disability/disabilities on your family members or care takers.

Mark '√' for the appropriate response regarding the statement given below.

Statement	Always	Sometimes	Never	Don't know
1. This disability causes economic problems in the family				
2. This disability cause conflicts in the family				
3. Family members or care takers know adequately regarding this disability				
4. Family members or care takers follow proper approaches regarding this disability				
5. Family members or case takers have become tired of caring this disability regarding this disability				
6. Others, Specify				

19. Mention an important thing that you or the one who represent your disability seems to feel good.

.....

20. Mention an important thing that you or the one who represent your disability seems to feel difficult.

.....

21. Do you wish to tell anything on behalf of you or the one who represent your disability

.....

Name of the interviewer & Date of the interview

(Automatically appear)