



The Multiple Dimensions of Child Poverty in Sri Lanka

A literature review

Fiona Remnant and Azra Abdul Cader

June 2008

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Preface

This study was prepared for the **Christian Children's Fund (CCF), Sri Lanka**, and is based on the Deprivation, Exclusion and Vulnerability (DEV) Framework which was conceptualised by Wordsworth, McPeak and Feeny (2005) for the Christian Children's Fund worldwide. CCF Sri Lanka funded the research and publication of this study.

The study draws on a range of qualitative and quantitative information available on a variety of issues relevant to a multidimensional understanding of child poverty in Sri Lanka to provide an overview of the current context at different levels; regionally (where available), nationally and at a policy level. It is envisaged that the study can be used as a source of information for those working with deprived, excluded and vulnerable children as well as for those who have an interest in child poverty. The publication includes an introduction which sets the context for the study, and is then split into a series of issues which are considered to be the main areas which impact on a multidimensional understanding of child poverty. The conclusion provides an overview of the main issues facing children in Sri Lanka, as well as summarising the research gaps which remain. Readers can dip in and out of the study without having to refer to each chapter sequentially, and each section lists relevant references and further reading to enable readers to find relevant literature more easily. A wider list of further reading is available at the end of the publication.

Every effort was made to track down and access as many resources as possible which refer to the issues included under the overarching theme of child poverty for this study. Numerous libraries, research organisations, international and local non-governmental organisations and government departments were contacted and provided generous assistance in tracking down relevant references. However, the authors do not claim to have referred to all available literature, and are aware that there could be a substantial body of information which was not discovered during research - for a variety of reasons. Gaps in research are identified in each issue area, and the authors hope that this study will either help to uncover existing research which does plug this gap, or that it could encourage the commissioning of relevant new research.

As emphasised in the conclusion, the authors hope that this study will lead to further collaboration and discussion which will add to the findings presented in

this publication – making the information available more comprehensive and continually updated. In order to facilitate this, the Centre for Poverty Analysis would like to encourage readers, be they researchers or practitioners, to contribute to the resources available to others by **adding any additional research, statistics or reports to CEPA's Poverty Database.**

The Poverty Database is a resource portal for information relevant to poverty in Sri Lanka and aims to become a comprehensive repository of information. Information which is available in a downloadable format, available on a website or in hard copy in a library can be entered into the database.

Please email **database@cepa.lk** or contact CEPA on tel. 011 2676955-8, 2667967-8 with any suggestions for information which can be uploaded for the use of others working in this area. Readers should consult **www.povertydatabase.lk** to use the database and access the information available.

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CHAPTER 1

Introduction

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1.1 Introduction

Child poverty is a broad phrase which is used to refer to wide range of issues that impact children's capabilities, wellbeing and future potential. Over the past fifty years understanding of the factors that influence children and adults' wellbeing has developed substantially from narrow definitions of the ability of households to meet basic needs (measured primarily by income), towards a more multidimensional understanding of a variety of influential factors, including environment, culture, education, health, freedom and security. In the case of children this multidimensional perspective is also facilitating greater emphasis on the *agency* of children, recognising that they are individuals rather than extensions of a household or a family, and that their experiences of poverty and wellbeing are different to those of adults.

Although a multidimensional understanding of poverty is gaining substantial ground at international and national levels, definitions still vary widely, and empirical research and benchmarking remain contested and somewhat limited. This poses a challenge for governments and agencies working at an operational level with a multidimensional definition of poverty. Understanding where priority needs are, and what issues children from different areas and groups face is vital when planning interventions, and this is where rigorous empirical research is needed.

Many agencies working with children in Sri Lanka are now using participatory methodologies which put the child at the centre of development and use their perceptions and views to drive their strategic direction. However, a broad overview of priorities and key issues within the country is still vital in order to target interventions appropriately. This literature review aims to pull together an overview of the main issues that impact on children's wellbeing in Sri Lanka, using existing qualitative and quantitative research.

1.2 Understanding poverty

This study uses a multidimensional understanding of poverty, that is to say poverty is the result of a variety of different factors and influences and can be experienced in many different dimensions. This means that using a single indicator, such as income, is not sufficient to capture the extent or true experience of poverty. In recognition of this, governments and international agencies have started to adopt multiple indicators of poverty, the most

well known of which is the UN's Human Development Index (HDI) which measures development in three basic dimensions; the ability to live a long and healthy life, measured by life expectancy at birth, the ability to gain knowledge, measured by the adult literacy rate (with two-thirds weight) and the combined primary, secondary, and tertiary gross enrolment ratio (with one-third weight), and the ability to have a decent standard of living, as measured by the log of gross domestic product (GDP) per capita at purchasing power parity (PPP) in USD.

However, even multiple indicators such as the HDI still depend upon income as a proxy for standard of living, and have significant limitations in capturing detail such as the dynamics of poverty, i.e. people moving in and out of poverty over time, the depth of poverty, i.e. the extent to which deprivation occurs, and relative poverty. Poverty is often relative rather than absolute; even if families are living above an arbitrary income poverty line such as the US\$1/day (PPP) line, they may be poor, and *feel* poor, in comparison to the standard of living and opportunities that others have access to around them.

Poverty is most often defined as a *lack* of something (employment, sufficient income, infrastructure, housing, land, water, food, education, freedom, security etc.) in terms of economic, social, political and environmental assets. Deprivation is therefore a key element of poverty, and can deny people the opportunity to achieve their *capabilities* in the sense that Amartya Sen expressed in *Development as Freedom* (1999). However, it is important to understand the context in which this deprivation occurs. People living within the context of a conflict, for example, may experience deprivation of their freedom and security as a result of the conflict. This experience can also be described as heightened vulnerability, with people subject to displacement and risk meaning they are unable to have a stable and secure life or plan for the future.

A study carried out in 2000 (ADB 2001) in four districts in Sri Lanka sought to understand people's *perceptions* of poverty and how they experienced it, and the results highlight the significance of deprivation, but also the importance of other characteristics such as marginalisation and susceptibility to falling into poverty or other risks. The study found that communities that have been marginalised from mainstream society often suffer a strong feeling of exclusion which they associate with poverty. These communities may have been marginalised on the basis of economic, political, socio-cultural and

spatial dimensions including: slum dwellers in urban low income communities, squatter communities, village expansion colonies, social outcasts (caste based), marginal irrigation settlements, fishing communities, plantation communities, steep hill farming communities, and displaced/refugee settlements (ADB 2001: xv). Exclusion is often the result of socio-political factors that are the basis of discrimination and disadvantage within society, and can lead to deprivation of economic, social, cultural and political rights (UNICEF 2005). Exclusion is therefore a much broader experience than that of material poverty. Indicators such as the HDI or Millennium Development Goals which are based on national averages won't highlight exclusion, whereas disaggregated data can show sharp disparities caused by poor or no access to services, high costs of access or cultural barriers.

1.3 The DEV Framework

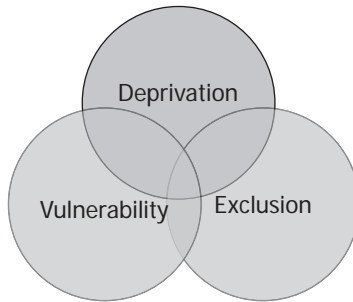
This literature review is based on a multidimensional understanding of poverty as outlined above, using a framework specifically conceptualised in the context of child poverty. The **DEV framework** was conceptualised by Wordsworth, McPeak and Feeny (2005) for Christian Children's Fund (CCF), and is based on the three overlapping and interlinked dimensions of **Deprivation, Exclusion and Vulnerability**. The DEV framework followed an extensive study of child poverty in different countries and embodies the multidimensional approach to poverty, setting it within the context of child poverty specifically. It is an attempt to move beyond simplistic, narrow definitions of child poverty which fail to take into account the way that children *experience* poverty.

“Both adults and children experience poverty not simply through a lack of goods and resources, but also through the interplay of social, cultural and political factors such as stigmatisation, humiliation and insecurity. Yet this complexity is still largely ignored in contemporary analyses of child poverty, which prioritise and often limit themselves to ‘objective’ physical measurements such as mortality and malnutrition.” (Wordsworth *et al.* 2005: 11)

Wordsworth *et al.* visualise the DEV framework as overlapping dimensions (see Figure 1.1), highlighting the interdependency of aspects of deprivation, exclusion and vulnerability. Children are unlikely to only experience one dimension of poverty, and are more likely to be subject to varying intensities of different dimensions depending on the nature of the issue. It is also likely

that many children will experience more than one dimension simultaneously, thereby falling into the overlapping areas. Wordsworth *et al.* stress the importance of seeing these dimensions as interrelated holistically rather in a linear sense; there is not always an obvious cause and effect relationship between different dimensions, and interactions and impacts may be more complex. A brief overview of each of the dimensions is given below, but more detail can be found in Wordsworth *et al.*'s paper on the DEV framework – *Understanding Children's Experience of Poverty: An Introduction to the DEV Framework*.

Figure 1.1: The DEV Framework



Deprivation

This dimension can be described as the 'basic needs' dimension and refers to a lack of resources and services which are essential to children's wellbeing, such as food, safe water, education and health. Deprivation is often a more severe experience for a child than for an adult, as children are more vulnerable to ill effects which could impact them for the rest of their lives. This is particularly relevant in terms of health and nutrition. The findings of the CCF Poverty Study which the framework is based on highlight that it is important to break down certain aspects within deprivation (Wordsworth *et al.* 2005: 13):

- **Severity:** When their experience of deprivation is to such a degree that it either threatens children's lives or seriously threatens their physical/psychological wellbeing and quality of life.

- **Intensity:** When their experience of deprivation is multidimensional, that is, experienced across a range of 'needs' at one time.
- **Context:** When their experience of deprivation is primarily a consequence of locally-determined social values/markers.

Exclusion

The dimension of exclusion is less about specific resources and materials and more about the systems and context which contribute to children being deprived, not only of basic needs, but also of emotional and social support. Exclusion was found to be an important component of how children expressed poverty in the CCF Poverty Study, and is a dimension which stresses the importance of familial and social relationships. There are many reasons why a child may feel excluded from certain groups, activities or opportunities. Wordsworth *et al.* focus on four main factors which impact children's experiences of exclusion (Wordsworth *et al.*: 16):

- Social status, e.g. stigma
- Group membership, e.g. ethnic, religious, racial, caste
- Economic status, e.g. exclusion from the 'formal' sector
- Cultural biases, e.g. gender discrimination

Vulnerability

This dimension stresses the dynamics of poverty, how children are vulnerable to different threats based on their location, ethnicity, social status, age, gender etc. It also refers to children's ability to cope with dimensions of poverty, the extent to which they can be resilient and therefore bounce back. However, children's experience of this dimension was more focused on "the *longevity* and *insecurity* of impoverishment as a dynamic and unpredictable condition." (Wordsworth *et al.*: 18). The inability to plan ahead and lead a stable and secure life is a sign of vulnerability, and the extent to which children are able to cope with the risks around them depends on the resources available to them, on the context and on their individual capabilities.

Levels of vulnerability can change dramatically depending on context; poverty is a dynamic experience and dependent upon many contextual issues such as seasons, levels of conflict, the macro-economic situation etc. Few people are trapped in chronic poverty, and vulnerability expresses this dynamic well, exposing the factors which make people more vulnerable to falling into and moving out of poverty.

1.4 Children's perspectives of poverty

UNICEF defines childhood as “the state and condition of a child's life” (UNICEF 2005: 7), and an ideal childhood is one where a child's rights under the UN Convention on the Rights of the Child (CRC) are fully respected and fulfilled. The CRC sets an international definition of ‘children’ as persons up to the age of 18. However, the General Assembly also defines ‘youth’ as those persons falling between the ages of 15 and 24 years inclusive. Strictly speaking, this means that persons below the age of 14 are considered children as opposed to youth, but that everyone under 18 is protected by the Convention on the Rights of the Child.

The CRC emphasises that a happy childhood is important for its own sake, not simply as a preparation for adulthood. The CRC ensures that children are to be protected from discrimination, abuse, conflict, injustice and abuse. But it also calls for children to have the right to be involved in wider society and to play an active role. Children have their own identity and autonomy which should be nurtured (ECPAT International, 2006: 32). It is important to stress that it is the *rights* of the child which are protected, rather than the child – emphasising the child's identity as more than a passive recipient of protection.

The CRC highlights that *children have their own rights*, outside of their family, despite the fact that they are dependent upon their parents and guardians (ECPAT International, 2006: 30). However, opponents of the CRC argue that this definition is problematic since a child does not have the right to exercise their rights and freedoms given that they are still dependent, first on their parents, and second upon the state – both of which play an important legal role in a child's life. Critics also argue that children have *duties* as well as rights, including respecting other people and the community they live in, and that this sense of responsibility is not emphasised enough in the CRS. However, the fundamental principles of the CRC do endow children with a significant degree of agency. In the context of child poverty, it is therefore important to remember that children are not always passive victims of circumstance, and are often capable of understanding complex interactions between factors that affect their lives. Given the appropriate support and opportunities children can demonstrate surprising resilience and ability to cope with difficult situations, and their experience of poverty may not be as all consuming as is presumed.

“children usually have a much larger life outside their poverty which must be recognised in order to properly contextualise institutional responses. Poverty does not stop children from hoping, nor does it prevent them from enjoying certain other aspects of their lives.” (Wordsworth *et al.* 2005: 21)

Children perceive and experience the world very differently from adults, but, similarly to adults, their lives are impacted and influenced by a range of factors at different levels and at different stages in their life. While this level of complexity is beginning to be acknowledged in adults’ or households’ experiences of poverty, it is often overlooked in relation to children specifically. Children have equally complex perceptions of poverty and a clear understanding of what priorities are important to them in terms of improving their lives. These need to be understood in order to identify the range of influences that impact child wellbeing. However, the great majority of research on child poverty is conceptualised and carried out by adults, limiting the ability of children to voice their perceptions and priorities. Adults’ views on child wellbeing are tainted by their own experiences and biases, and may not reflect children’s own views and experiences.

“Our ways of seeing are defined, in part, in childhood: we learn some of our affinities and our prejudices as children, and it is difficult to describe others’ childhoods. As children we learn to interpret our experiences in relation to the stories we are told; to our own positions in the social structure and in the hierarchies of age and gender; to the interpretation that others (especially adults) place upon our actions; to our access (or lack of access) to resources and the uses of them; to the opportunities available to us; and so on. That is to say, we see childhood, and so interpret others’ experiences as children, differently depending on our own experiences.” (Reynolds 2000: 146)

“We should also not forget that children create their own cultures at different points in development, and in different contexts. ...Each of these worlds includes child-defined perspectives as well as rules and practices.” (Dawes & Donald 2005: 15)

This highlights the importance of involving children in research and decision-making to ensure that their needs are recognised.

“children too feel the need to participate in decisions made regarding their lives and children’s engagement in research on issues that concern them is necessary for them to participate effectively. It is also their right. ...However, the right to participation is the least realised of all children’s rights. Children are seldom consulted and almost never enabled to feed into policies and programmes that are designed for them. Children are ignored in decision-making processes and policy formation.” (Lolichen 2006: 2)

Despite the importance of gaining information from children at the level of the individual, it is also vital to take into account information at the level of the household and the community they live in. This stems from the fact that children are attached to a wider network and usually do not exist independently of micro-level support structures such as carers and living environment at the household level, and meso-level networks such as school, peer groups, youth organisations, and religious institutions. Different elements of this social structure are relevant to children at different stages of their life, with the household and primary caregivers being most important during early childhood, but community structures and peer groups growing in importance during adolescence. These social networks have a strong influence on children’s lives, but they also have a strong influence on caregivers, which influences how they look after their children.

“negative structural characteristics of the neighbourhood... produce stress in caregivers who, in turn, cannot cope or create the conditions needed for positive emotional outcomes for their children.” (Dawes & Donald 2005: 10)

Understanding the context in which children live is vital in the context of interventions to improve child wellbeing. The systems and culture at international, national, community and household levels will be the target of change if intervention is required, so research needs to identify at which level change will most effective and have the greatest influence on children’s wellbeing.

Unfortunately most indicators of child poverty do not consider a child’s perspective, or the family and social networks which they engage with. Research is usually undertaken from an adult’s perspective, and while some research does consult children and use them as key informants, very little actually uses children to conceptualise and carry out research. In this respect a literature review is limited as it relies upon existing research which may not consider child poverty in this more holistic perspective. However, it does

highlight gaps where information and perspectives are lacking, and points towards the need for more research in certain areas.

1.5 Dimensions of child poverty in Sri Lanka

The Sri Lankan Government is a signatory to many international conventions regarding children, and a relatively good policy framework is in place following some key changes during the 1990s. Sri Lanka ratified the Convention on the Rights of the Child in January 1990 and some national legislation has been updated in line with this regarding child labour, sexual exploitation and domestic violence. The National Child Protection Authority was set up in 1998 to deal with victims of abuse and exploitation, and has powers to track down and prosecute offenders, as well as responsibility for ensuring adequate care and rehabilitation is provided for victims. Sri Lanka is also party to the ILO Convention on Minimum Age for Admission to Employment which requires the abolition of child labour and the progressive raising of the minimum age for employment. Sri Lanka is also party to the Convention on the Worst Forms of Child Labour and the SAARC Convention on Preventing and Combating Trafficking in Women and Children.

The Committee on the Rights of the Child reviewed Sri Lanka's second periodic report in 2002 and found that much improvement had been made since the first report in 1994; more legal measures had been adopted and there was more co-ordination at provincial and government level. However, harmonisation of national law with international standards was still lacking and there is still a huge gap between policy and reality on the ground. Third and fourth periodic reports will be delivered by August 2008, particularly reporting on the progress against Sri Lanka's National Plan of Action for Children.

Continuing issues in relation to children's rights and recommendations as reported by the Committee on the Rights of the Child (International Bureau for Children's Rights 2006):

Child Development

- Health facilities for children are not evenly provided throughout Sri Lanka and are inadequate in many places.
- There is suspicion that the immunisation programme is not as widely spread as averages suggest, particularly in conflict-affected areas [*this claim cannot be verified*].

- Malnutrition continues to be a significant problem with levels possibly higher than government statistics suggest.
- Education enrolment rates are misleading – using gross enrolment rates as a measure of educational participation rather than age specific participation rates does not indicate what percentage of children in each age group do not have access to education.
- Disparities in availability and quality of education continue to be marked between and within districts.
- There are not enough schools for children with special needs outside of the Western Province, particularly for disabled girls.
- Special Education Units for disabled children suffer from under funding, and little has been invested in early intervention programmes to encourage parents to seek support and medical care.
- Not all schools run by NGOs are registered with or monitored by the Ministry for Education.

Abuse

- The number of complaints registered with the National Child Protection Authority indicates child abuse is the top criminal offence committed in 2000 and is a significant problem in Sri Lanka.
- The Committee expressed concern that victims of abuse do not receive adequate support for their recovery and rehabilitation, and that children are institutionalised while court cases are pending.
- The Committee was concerned at the continuing high number of children who have dropped out of school to work. Poverty was considered to be the most important driving factor.
- Laws protecting children from sexual abuse are not watertight and offenders continue to slip through loopholes.
- The UN Special Rapporteur on the sale of children, child prostitution and pornography also criticised the lack of motivation by the police to conduct investigations into child abuse.

Juvenile Justice

- The age of criminal responsibility is too low (8 years) and children between 16 and 18 are treated as adults. There is no separation of children from adults within the justice system.
- Time limits for the amount of time a child is institutionalised are not operationalised or monitored.
- There is insufficient provision for legal representation of children.

Equality

- Disability is still discriminated against in law as the Sri Lankan constitution does not explicitly protect the right to equality of disabled people.
- The law does not prohibit discrimination on the basis of illegitimate birth and there is still stigma attached to children born outside marriage.
- Great disparities exist between different groups along geographical, socio-economic and occupational lines – some groups are denied the development and welfare required to benefit all children equally
- Social discrimination continues amongst children with disabilities, adopted children, those displaced by conflict, infected with HIV/AIDS and children from different ethnic and religious groups.

Best Interest of the Child

- The conflict in Sri Lanka has eroded the fundamental principle of acting in the best interests of children, and the Committee called for more action to support vulnerable children who have been affected by the conflict.
- More effort needs to be made to reintegrate conflict affected children into the education system.
- More psychosocial support is required for child soldiers, internally displaced persons, refugees and landmine survivors.
- The rehabilitation of water, sanitation and electricity needs to be prioritised in conflict-affected areas

“The government was advised to prioritise the provision of services to children in loan and structural adjustment negotiations with international donors and collect, and include in the regular budget,

disaggregated data on the expenditures for children according to the various areas of the Convention, such as foster care, institutional care, primary and adolescent health care, pre-school, primary and secondary education and juvenile justice.” (International Bureau for Children’s Rights 2006: 72)

The issues raised in the Committee’s report provide a good overview of the main issues relevant to child wellbeing in Sri Lanka, issues which will be explored in more detail in this publication. This literature review will focus on the following core dimensions of poverty which are relevant to the Sri Lankan context:

- Health and nutrition (including disability)
- Education
- Conflict (including child soldiers and young people in the army, and conflicts outside the North and East)
- Abuse
- Child labour
- Children’s institutions and juvenile justice
- Migrant mother families
- Street children

There are wide areas of overlap and interaction between these dimensions, and certain cross cutting threads which impact children’s vulnerability to these issues, such as geographical location, sectoral differentiation (rural, urban, estate), the socioeconomic status of households, and gender. Within each of these dimensions literature was researched in order to find:

- which population is affected
- what evidence there is of resilience and coping mechanisms
- whether poverty is transient or chronic
- who/what are the main influences on child poverty
- what are the main threats to children that could cause them to move into poverty
- what opportunities there are for reducing exposure to these threats

Not all this information was available for all the dimensions, particularly around the area of resilience and coping mechanisms. There was also a lack of children’s voices in much of the literature, although more recent

research has started to involve children much more in studies. One of the most valuable sources of information, which serves well as an introduction to this study, was the testimony of children themselves who participated in the National Children's Forum organised by Save the Children, Sri Lanka as part of International Year of the Child (2006) in October 2006.

The Forum was held on International Children's Day (1st October) in Colombo and brought together over 60 girls and boys between the ages of 11 and 18 from 23 districts representing all ethnic, religious and regional groups. Extensive consultations with over 1,500 children were held in these districts during four months prior to the forum to give children an opportunity to identify their concerns on education, health, safety and other issues affecting the fulfilment of their rights. Children presented key issues and their suggestions for change. The National Forum was endorsed by the Ministry of Child Development and Women's Empowerment and was expected to contribute to efforts of programme planning by obtaining the views of children. Key government representatives and officials were present to hear the views of the children and respond to questions.

Some of the views of child representatives from some districts are presented below (based on notes taken at the event), giving a snapshot indication of the different priorities children expressed concern about from different areas:¹

Ratnapura District

[While children in Ratnapura are not directly affected by the war it is interesting that they had internalised the issues experiences by children in conflict affected areas and saw the impact it had on the whole country].

- The war has taken away educational opportunities for children and education has come to a standstill for some. Teachers are not able to remain in school and this has affected children in war regions.
- Children have been disabled because of the war.
- Children's expectations for the future have been shattered and we will be unable to take our country forward.

¹ It should be noted that there is a risk that children have been exposed to sensationalist news stories in the media which tend to fulfil certain stereotypes. Although these children may not have directly been exposed to these issues, they may be aware of them through hearsay and anecdotal evidence.

Galle District

- There is a lack of awareness of health related issues, we don't know about good health habits that affect our overall development and education.
- Children are susceptible to drug abuse and children are not aware of how this abuse can affect them, they have to be enlightened. High penalties should be put in place for people who sell drugs.
- Sex education – without proper sex education children want to experiment and this leaves them open to being exploited by adults.
- We are here to take over the future and for us to be able to do this we have to be healthy and safe. Children are your biggest asset.

Vavuniya District

- The protracted and prolonged war has affected children. We live in fear and are traumatised, we have nightmares. We live with the war, all we know is this war, bombings, shelling and abductions. The war has devastated our lives.
- We can't go to school, we are unable to concentrate when we can, our memories are mainly of the war, it is an obsession to us.
- Children in Jaffna are living without food, security and an education.
- We live in fear of landmines, even when we go to school our lives are not assured, children are vulnerable to being caught in explosions on their way to school.
- We have lost our childhood, we are deprived of educational facilities, the war has made children beggars, they are used as domestic workers, they are abused etc.
- School children are suspected of being militants, stopped by armed forces and they are asked if they are representing any group. Harassment such as this would make some want to join the militant movements.
- There have been some incidents of children being taken forcibly and you need to ensure the security of these children. Schools should be provided with security to stop the recruitment of children.
- Where can we talk about our rights, it is only in the books, who will ensure that are rights are met?

Kandy District

- The migration of parents abroad for work means that some children are deprived of parental care; they are entrusted in the care of relatives. They are then exposed to threats such as alcoholism and their basic needs are neglected. Some run away.
- No-one can look after a child as well as their parents can.
- Children are forced to fend for themselves and the easiest way to do this is to steal. Children are at risk of getting involved in substance abuse and drug trafficking.
- Children keep their problems bottled up as they don't have anyone to talk to.
- Money sent for the children is used by the guardians and some children are used to serve their guardians like domestics.
- There should be programmes to monitor the condition of children left in the care of guardians – weekly checks by government officials.

Mannar District

- The present education system expects a lot from a student, as a result their leisure time is reduced and this affects sports activities.
- Most schools don't have experienced teachers and children are compelled to attend extra tuition and have no time for recreation.
- Parents need to understand children better, they have to be their friends and communicate better. In this country children are not respected much.
- The pressure on children comes to a head sometimes, causing suicidal tendencies.
- Sports facilities should be provided in rural areas as in urban areas if not the lack of these compels children to go to the beach or jungle areas that leaves them vulnerable to other dangers.
- There are a large number of students who want to engage in sports but their talents are wasted. A balance between education and recreation will make children lead more fulfilled lives.

Hambantota District

- Children are not taught in school and they have to go for extra classes, teachers are not committed. The education system is not practically oriented, children become robots.
- There is no point in *saying* that children have to be protected, it has to be practiced.
- Cultural practices prevent girls from mixing with others, they are not allowed to go out. This makes them less aware of the world they live in.
- Sri Lanka has its own natural resources so why aren't they being used to develop the country and improve conditions for children?
- Don't only think of children on 1st October. Ask what you **HAVE TO** do for us and not what you **CAN** do for us.

1.6 Structure and boundaries of the literature review

This review is based on existing literature, most of which is published in Sri Lanka. The authors collected the literature following an extensive search through publicly accessible libraries and collections within research organisations and government departments which were kindly loaned to us. The thematic parameters of the study were defined before the literature search, so any material relating to these themes in the context of children was collected. Literature was considered relevant if published since approximately 2000 to ensure most recent data was used and make the study manageable. If no other literature was available, older literature was used, but the most recent literature was used wherever possible.

The authors are aware that many agencies commission research or reports for internal use only which never get published and are not easily available within the public domain. This restricts the ability of other researchers to access a wide variety of studies, and may account for some gaps in the available literature, despite plentiful anecdotal knowledge amongst practitioners. Another limitation found when collecting literature was the limited usefulness of many publications and articles which were not based on rigorous research methodology. Studies based on very small, unrepresentative sample sizes, or the use of unstructured and inconsistent questionnaires and anecdotal evidence are very difficult to use, particularly when trying to make comparisons with findings from other studies. For this reason a substantial amount of literature was used in a limited way, or discarded as it was not possible to verify the evidence.

The boundaries of the study are clear; this literature review can only reflect the information *available in existing literature* since no primary data collection or field work was undertaken for this study. The balance and bias of available data is therefore reflected in the analysis. Some of the information presented may appear to contradict the views of practitioners based on their anecdotal and operational experience, but the balance of information serves to highlight research gaps, and the biases of researchers and agencies, which will be commented upon in the conclusion. In order to confirm the presence of research gaps, two workshops were conducted with practitioners and researchers during the study to present the available data and collect any additional information available on areas where data was lacking. As well as confirming certain research gaps, these workshops also highlighted the difficulty practitioners had accessing a range of information, and confirmed the need for more centralised and formal information sharing and knowledge management between organisations.

This literature review brings together a variety of qualitative and quantitative evidence to back up the importance of the issues expressed by the children in the preceding section. Each thematic section is followed by a list of references directly referred to in that section, and where relevant a list of further reading which was used in the background research for the study but not directly referred to in the text. The review and lists of references and further reading should be seen as a resource for researchers and practitioners' work, but the gaps in the available literature and analysis should also highlight the need for more in-depth and child participatory research which allows children to express their feelings, experiences and priorities.

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CHAPTER 2

Health

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2.1 Introduction

A child's health is key to their development in both intellectual and physical terms, and poor health can impair a child's ability to fulfil their capabilities. The characteristics that can impact a child's health include parental income, education and health levels, economic or social exclusion from key services or infrastructure, and geographical location (spatial disadvantage and vulnerability). A child that suffers ill health and is not able to develop to their maximum capability, is in turn vulnerable to perpetuating the same disadvantages in the next generation.

Sri Lanka's headline health statistics, such as high immunisation and low infant mortality rates, offer a relatively benign image of the health of Sri Lankan children in comparison to other developing countries. The emphasis placed on social welfare since independence has ensured the availability of free healthcare and other interventions aimed at improving nutrition and family health. However, despite these positive indicators, low weight and stunting in children are still significant issues, and safe drinking water and adequate sanitation (key factors in diarrhoeal prevalence) are still not accessible to all children.

A recent study by the National Education Council (De Silva *et al.* 2005) examined the health of a representative sample of 2,731 schoolchildren with a mean age of 9.6 years. All nine provinces were represented, including the North and East. The findings highlight the continued existence of serious health problems amongst children:

- 15.5% of children were stunted
- 52.6% were excessively thin
- 12.1% were anaemic
- 3% had goitre
- 4.6% were short sighted
- 6.9% had worm infections
- 6.4% had a lifetime history of malaria (more common in the Northern and Eastern Provinces)
- 15.4% suffered frequent illness that required them to miss at least 3-5 days of school per month (usually due to fever or asthma)

These figures may be relatively low compared to other developing countries, but they are high enough to merit concern. Malaria is a particular problem in the North and East, where additional issues of conflict-induced displacement and interrupted food supplies can lead to long-term health problems. Dengue and Chikungunya are recent epidemics with higher prevalence in areas which have open rubbish dumps and latrines such as underserved settlements in urban areas.

Malnutrition is a major problem in Sri Lanka, with over 1 million children under five years of age underweight to varying degrees. In the North Central and Uva Provinces, as well as in the estate sector over 50% of the children are moderately or severely underweight. Approximately 10% of estate children are severely underweight and 15% severely stunted. Malnourishment also causes issues of vitamin and mineral deficiencies which contribute to poor health and certain illnesses such as goitre.

This section will consider the available information on the health of children in Sri Lanka, focusing on key areas of importance; immunisation, prevalence of diarrhoea, maternal health, infant mortality, reproductive health, disability and mental health. Since malnutrition is such a significant problem in Sri Lanka particular focus will be given to this issue in a separate chapter, looking at the impact of factors such as infant feeding practices, living conditions, parental education levels, and food security.

2.2 Immunisation

The Demographic and Health Survey conducted in 2000, in all areas excluding the North and East, captured the percentage of children under the age of five with a health card who have received full vaccination coverage. It is worth noting that the vaccination with the highest coverage (almost 100%) was BCG which is given shortly after birth, and the vaccination with the lowest coverage was Measles (between 76-82%) which is given at nine months. This suggests some issues with ensuring parents return to the doctor for vaccinations after longer intervals. It is also important to note that these figures are only for those children with health cards, Child Health Development Record (CHDR); the percentage of children holding such cards varied from 66.3% in the estate sector to 87.4% in the rural sector. This leaves a large section of children about whom immunisation levels are not known.

Table 2.1: Vaccinations of children under five holding a health card (2000)

Sector	% of children with a health card	% of these children with full immunisation coverage
Colombo Metro	86.8	79.9
Other Urban	86.5	82.2
Rural	87.4	81.5
Estate	66.3	71.4

Note: Excludes the North and East

Source: DCS 2002(a): 172

As an addition to the figures above, the Plantation Human Development Trust (PHDT) publishes its own comprehensive statistics on the estate sector, and the rates of immunisation recorded in this survey amongst estate sector children are much higher. Overall coverage of BCG, DPT-3, OPV3 and Measles is recorded at 99-100% (PHDT 2005: 18). These more recent statistics may reflect a renewed focus on healthcare in the estate sector, but they may also be a result of different data collection techniques.

The last limited Demographic and Health Survey carried out in the North and East in 2001 (DCS 2002(b)) covered the districts of Jaffna, Vavuniya, Mannar, Trincomalee, Batticaloa and Ampara. The survey found that immunisation coverage of children in the North and East is relatively high. There is little district variation, although figures are somewhat higher in urban areas than in rural areas. Overall, 75% of children under five with a CHDR are fully immunised, higher than the DCS figures from the estate sector but lower than the overall average of 79% in the rest of Sri Lanka. The average for the urban sector is 84% (higher than urban sectors in the rest of Sri Lanka) and the average for the rural sector is 73% (much lower than the rural sector in the rest of Sri Lanka). 82% of children have a Child Health Development Record, the same overall average as in the rest of Sri Lanka.

2.3 Prevalence of diarrhoea

Diarrhoeal disease is still a common occurrence amongst children in Sri Lanka and is one of the main causes of poor growth and development of young children. Sanitation issues and living conditions are still significant factors in contamination and disease. Diarrhoea is often caused by poor

sanitary conditions and unsafe drinking water. Infection spreads faster in overcrowded accommodation and damp and unventilated accommodation causes respiratory diseases. Families living in crowded housing are also more likely to pass on infections to each other.

The Department of Census and Statistics' data on MDG Target 10 (Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation) contains information on the proportion of households with access to improved sanitation gained from the last Census of Population and Housing. This does not cover many districts in the North and East, but highlights that in Matale, Nuwara Eliya, Anuradhapura and Moneragala, more than 50% of households do not have access to improved sanitation.

The North and East Demographic and Health Survey, 2001, recorded that 29.3% of children had experienced fever during the two weeks prior to the survey, and 13.3% had experienced acute respiratory infections. These are significant issues when one considers that diarrhoeal disease and respiratory illnesses are amongst the three primary causes of infant mortality (the third being accidental deaths).

The DHS 2000 data (excluding the North and East) also captures the number of children reported as having suffered a diarrhoeal episode during the two weeks preceding the survey. Prevalence was much higher in rural areas, and in children between 6-11 months, 12.6%. For children over three years old the prevalence had dropped to 5.6%.

Table 2.2: Children under five who suffered a diarrhoeal episode in last two weeks

Sector	% of children with diarrhoea in last 2 weeks
Colombo Metro	5.4
Other Urban	4.9
Rural	7.1
Estate	6.7

Note: Excludes the North and East

Source: DCS 2002(a): 176

A more recent health survey conducted in selected Northern and Eastern districts by UNICEF in collaboration with the DCS (2004) found that diarrhoeal prevalence was higher in rural districts and particularly in Mannar, Batticaloa, Trincomalee and Ampara districts. Rates were highest amongst 12-23 month old children at 13.3%, dropping to 4.9% in 24-35 month olds, and 2.9% for children between 48 and 59 months (DCS & UNICEF 2004: 65). Interestingly no clear statistical link was evident between a mother's educational level and rates of diarrhoea. The link was also not clear in the rest of Sri Lanka, although children whose mothers were educated up to or above A' Level had the lowest prevalence at 3.2% in the North & East (DCS/UNICEF 2004: 65), and 5% in the rest of the country (DCS 2002: 176). Below A' Level, education did not affect the statistics significantly.

2.4 Maternal health

Antenatal care levels are relatively high across all areas of the country with almost 100% of women receiving some sort of antenatal care (at home or in a clinic) in all sectors, including the North and East. Mothers in the estate sector and mothers with no formal education are the least likely to receive home visits from the family health worker, although they are the most needy. However more than 85% of mothers in these two groups have realised the importance of medical advice and had visited maternity clinics for that purpose (DCS 2002(a)).

Levels of care at delivery are also relatively high across the country, although the rural and estate sectors fare worse than the urban sector, and the North and East fare worse overall. The level of schooling of the mother is a key factor across the country, with rates of trained assistance rising with higher levels of education.

Table 2.3: Assistance at delivery by sector and education levels

Background variables	% received assistance at delivery from a skilled health professional	
	North & East*	Rest of Sri Lanka
Sector		
Urban	97.6	98.9
Rural	90.2	98.1
Estate	-	83.6
Education		
No schooling	71.7	82.6
Primary	86.6	90.7
Secondary	93.1	97.2
More than secondary	96.3	98.3
Total	91.5	96

Note: *Based on survey in the districts of Jaffna, Mannar, Vavuniya, Batticaloa, Ampara, Trincomalee
Source: DCS/UNICEF 2004: 108

Despite persistently lower levels than other sectors, maternal healthcare in the estate sector has improved dramatically. Antenatal care is well organised on estates and a majority of women register their pregnancy before 12 weeks (68.4% in 2003) (PHDT 2005: 12). They are then given access to clinics on the estate, or at MOH (Medical Officer of Health) antenatal clinics off the estate, as well as home visits by estate midwives. In 2002-3 67% of mothers made six or more visits to antenatal clinics and 22% three to five visits. 8% (or 1,280) mothers did not attend clinics on the estate. They may have attended off-site clinics, but this needs to be carefully monitored.

Deliveries in estate maternity wards have decreased dramatically in favour of government hospitals; this reflects easier access in many areas. Rates of stillborn births in estate hospitals are similar to government hospitals. However in the hill country the estate wards are still vital for the isolated estate populations. Postnatal visits are still relatively low in the estate sector, with around 48.8% of women receiving three or more postnatal visits in 2003.

Table 2.4: Place of delivery and outcome for estate sector households - 2003

Region	Government Hospital				Estate Hospital				Home Deliveries					
	TOTAL		%		TOTAL		%		Trained Midwife		Untrained Midwife		Total %	
	LB	SB	LB	%	LB	SB	LB	%	LB	SB	LB	SB		
Galle	976	7	983	98.6	9	0	9	0.9	4	0	1	0	5	0.5
Ratnapura	1766	25	1791	95	88	0	88	4.7	3	0	4	0	7	0.4
Badulla	2277	38	2315	79.9	547	4	551	19	7	0	22	2	31	1.1
Kegalle	782	10	792	95.3	16	0	16	1.9	4	0	18	1	23	2.8
Kandy	1612	29	1641	84.2	202	3	205	10.5	20	0	80	3	103	5.3
Hatton	3166	67	3233	83.8	545	15	560	14.5	15	2	41	6	64	1.7
Nuwara Eliya	3011	49	3060	85.2	475	10	485	13.5	42	5	0	0	47	1.3
TOTAL	13590	225	13815	86.3	1882	32	1914	12	95	7	166	12	280	1.7

Source: PHDT 2005: 13

LB = Live Birth SB = Still Birth

Box 2.1: Health services in the estate sector

All estates have some kind of health facilities available, but many have now concentrated on maternity and dispensary services as residents can access government facilities in the area. In 1994 the Ministry of Health was requested to take over all 54 estate hospitals. As at 2004 a total of 20 had been taken over, including three maternity wards.

A Plantation Family Welfare Supervisor is also employed by the estate to help families access relevant services and assist health staff. There is some difficulty in recruiting trained personnel to work in estate hospitals, and dispensaries may have to rely more on qualified pharmacists in future. Midwives are usually trained by the Ministry of Health, but the PHDT recommends that estate management needs to give more recognition and better conditions and salaries to midwives – at least to match government employed midwives. In 1994 there were 303 midwives working on estates. The PHDT has worked on increasing transport options for healthcare, with the provision of ambulances and motorcycles for health staff. There has not been a dramatic increase in transport choices however.

Water and sanitation continue to be a crucial issue in the estate sector, with statistics showing that over 36% of households did not have individual latrines and over 20% did not have piped water in 2003 (PHDT 2005: 7). Almost 50% of estate sector households in Nuwara Eliya did not have individual latrines and more than 50% of households did not have piped water in estates in the Galle area (PHDT 2005: 7).

Source: PHDT 2005

2.5 Infant mortality

Sri Lanka has already achieved the Millennium Development Goal of universal child immunisation and has much lower infant mortality and maternal mortality rates compared with most other developing countries (CBSL 2006). The establishment of a widespread system of Maternal and Child Health (MCH) clinics as well as an outreach of MCH care through home visits by Public Health Midwives, supported by family planning programmes, particularly family spacing, and a reduction in home deliveries have contributed to declining mortality. Nuwara Eliya district and the estate sector have the highest rates of infant mortality, but perinatal and neonatal mortality rates have also fallen in this sector.

The three principal causes of infant mortality in Sri Lanka remain:

- Respiratory illness
- Diarrhoeal infection
- Accidental death

In order to clarify the statistics presented, it is important to explain the definitions used in infant mortality:

- Neonatal mortality: the probability of dying within the first month of life (almost 70% of infant deaths in Sri Lanka occur in the first 28 days of life)
- Post neonatal mortality: the probability of dying after the first month of life but before reaching the first birthday.
- Child mortality: the probability of dying between the first and fifth birthday
- Under-five mortality: the probability of dying between birth and fifth birthday

Table 2.5: Trends in mortality rates (per 1,000 live births)

Period	Neonatal mortality	Post neonatal mortality	Infant mortality	Child mortality	Under five mortality
1995-2000	8.3	5.3	13.6	1.0	14.6
1990-1995	19.4	5.2	24.6	2.6	27.2
1985-1990	13.8	8.2	22.0	3.3	25.3

Note: Excludes the North and East

Source: DCS 2002(a)

Table 2.6: Mortality rates by sector 2002 (per 1,000 live births)

Sector	Neonatal mortality	Post neonatal mortality	Infant mortality	Child mortality	Under five mortality
Urban	9.1	5.8	14.9	2.5	17.3
Rural	13.5	3.9	17.4	1.1	18.6
Estate	(31.0)	(16.5)	(47.5)	(4.1)	(51.6)

Note: Excludes the North and East; (Figures in brackets based on fewer than 500 cases)

Source: DCS 2002(a)

The DCS and UNICEF survey undertaken in Northern and Eastern districts (2004) was based on too small a sample to produce accurate infant mortality statistics, and the survey in 2001 did not record infant mortality rates. The

2004 study estimated infant mortality rates at 3 per 1,000 live births, and under five mortality at 7 per 1,000 live births. This is much lower than statistics in the rest of the country, but figures should be treated with caution.

Contributory factors

The reasons for mortality rates can be linked to mothers' health and nutritional levels during pregnancy and her access to quality pre-natal care and post-natal care. Maternal malnutrition and deficiencies such as anaemia complicate pregnancy and can lead to low birth weight. Other contributory factors are the quality of antenatal care, poor management of pregnancy complications, sepsis during delivery, and lack of proper newborn care including lack of means for resuscitation (NCED 2005).

The socio economic background of parents, especially *the educational attainment of mothers*, has also been found to affect infant and child mortality to a great extent. *Living environment* and *accessibility to primary health care* facilities are also key factors that influence mortality levels. The mother's age is also an important factor; children born to women under 20 years of age or over 35 years of age are at a higher risk of dying within the first month of life.

Table 2.7: Mortality rates by educational and age of mother 2002 /1,000 live births

Sector	Neonatal mortality	Post neonatal mortality	Infant mortality	Child mortality	Under five mortality
No schooling	(15.9)	(9.6)	(25.5)	(6.4)	(31.8)
Primary	21.3	8.5	29.9	3.4	33.3
Secondary	14.6	3.0	17.6	1.1	18.8
GCE O/L	9.0	4.5	13.6	0.9	14.5
GCE A/L & higher	6.3	7.5	13.8	0.0	13.8
Mother's age at birth					
<20	17.9	3.6	21.5	3.6	25.1
20-29	13.9	6.1	20.0	1.4	21.5
30-34	11.3	3.8	15.0	1.5	16.6
35+	15.2	5.5	20.7	1.4	22.1

Note: Excludes the North and East

Source: DCS 2002(a)

It is important to note the marked sectoral divide in infant mortality figures, with the estate sector suffering most. Spatial disaggregation points to poverty, conflict, limited educational achievement of mothers, and poor medical infrastructure as important contributory factors to infant mortality rates. However, there is some inconsistency in the statistics available for the estate sector which has very high rates of infant mortality according to the DCS data. The Registrar General's Office statistics record *much* lower rates of infant mortality than the DCS statistics do. According to the Registrar General infant mortality rates in the estate sector have decreased from around 50 per thousand live births in 1985 to 18.1 per thousand live births in 2000, to 14.16 per thousand live births in 2004 (compared to national rates of 12.1 in 2001 - Registrar General's Office). The Plantation Human Development Trust offers its own disaggregated statistics within the estate sector, highlighting Nuwara Eliya with the highest rate at 19.6 per thousand live births in 2003 (PHDT 2005:21).

Box 2.2: Health in migrant mother families

One vulnerable group which has recently been the subject of more focus are families with mothers working abroad. Athauda, Gatk and Fernando (2002) looked at health patterns in children in three groups; those which mothers who worked abroad, mothers who worked in Sri Lanka and mothers who were not employed. Children in the first group, those with migrant mothers, had the highest mean number of illness episodes, with the risk of falling ill 1.8 times more than the other children. They also show the lowest mean clinic attendance in the first four years of life. This shows a clear disadvantage for children of migrant mothers. However, it is important to note that a mother will often go abroad to work because her family's economic circumstances are bad. Poor socio-economic backgrounds are synergistically related to morbidity in children; children are more likely to fall ill as a result of unsanitary conditions and they are also less likely to receive adequate medical care.

Source: Athauda et al. 2002

2.6 Reproductive health

Knowledge and understanding of reproductive health is low in Sri Lanka, and is a subject not often talked about, particularly by women. The DCS does not track numbers of children or adults infected by HIV/AIDS, but numbers have not yet reached critical proportions yet in Sri Lanka. The focus is more on

ensuring infections rates remain low, and raising public awareness. Knowledge of HIV/AIDS and prevention is measured by the DCS in its Demographic and Health Survey, amongst 'ever married' women. Awareness is much lower in the rural sector than in the urban sector, but overall knowledge does not go much beyond awareness and even in urban areas many do not know about preventative methods. The table below presents the findings in relation to age (taking the youth group as the target audience for this assessment), and according to schooling. Levels of awareness were relatively high, but knowledge on how to prevent it was worryingly low, particularly at lower education levels. Age and schooling clearly make a difference to awareness and knowledge of prevention, with schooling over 'A' level a particularly strong factor.

Table 2.8: Knowledge of HIV/AIDS amongst ever married women

Among ever married women who are aware of AIDS % who					
Age Group	% of women aware of AIDS	Know only 1 preventative method	Know 2 preventative method	Know 3 or more preventative method	Do not know any method
15-19	79.1	36.4	24.8	8.5	30.2
20-24	92.4	39.1	23.7	16.5	20.5
Education					
No schooling	47.6	42.8	5.0	1.2	50.9
Primary	74.0	41.7	12.7	5.4	40.1
Secondary	95.4	43.0	23.9	11.8	21.1
A/L & higher	99.9	33.4	31.3	30.7	4.4

Source: DCS 2002(a): 205, 209

Note: Excludes the North and East

In Northern and Eastern districts the survey was carried out differently and all household members over the age of 15 years (rather than only 'ever married women') were asked about their knowledge of HIV/AIDS, so comparison between the two sets of results is difficult. Rates of awareness were relatively high, with Batticaloa district recording the lowest level of awareness.

Table 2.9: Knowledge of HIV/AIDS in North & East Districts and sector

District and Sector	% Aware of HIV virus
District	
Jaffna	85.8
Mannar	78.2
Vavuniya	86.8
Batticaloa	71.1
Ampara	92.7
Trincomalee	86.0
Sector	
Urban	90.6
Rural	81.2
Total	83.2

Source: DCS/UNICEF 2004: 89

In the DCS DHS survey (2002) women were also asked about their awareness of sexually transmitted diseases (STDs); amongst those who are aware, knowledge of the symptoms was very low in all groups.

Table 2.10: Awareness of symptoms of STDs amongst women

Age Group	% of women aware of the symptoms of STDs in both men and women
15-19	18.5
20-24	14.5
Education	
No schooling	6.4
Primary	9.2
Secondary	9.0
A/L & higher	21.0

Source: DCS 2002(a): 205

Note: Excludes the North and East

This type of poor knowledge of reproductive health was explored in more detail in a study undertaken by Silva *et al.* in 1997 in Peradeniya. Two groups were interviewed; students and low-income community residents. All were unmarried people ranging from 17-28 years. Knowledge of reproductive health among young people, particularly outside the university, was limited. The study highlighted the emphasis placed on young women to maintain their virginity before marriage, however the degree of sexual activity reported for young men was much higher than for young women. Young men are not bound by the same expectations and some engage in sexual activity with older women, commercial sex workers or male partners instead of young women. 50% of males interviewed had their first penetrative sexual experience with another male, while for 16.3% it was with a married older woman (Silva *et al.* 1997: 10).

“Male-to-male sexual behaviour is neither “accepted” nor “condemned”; it is simply taken for granted and, like other forms of sexual behaviour, neither openly discussed nor referred to in any pejorative fashion. This observation was supported by the willingness of male interviewees to talk about their male-to-male sex experiences in the open-ended semi-structured interviews.” (Silva *et al.* 1997: 10)

Condom use was low; although most young men knew about condoms and where to buy them few reported using them. But a relatively low percentage of females reported engaging in risky sexual activity, protecting themselves by engaging in non-penetrative sex instead.

“However, given the percentage of men who engage in potentially risky behaviour (23.2%), sex after marriage or engagement could place women at risk despite their prior abstinence.” (Silva *et al.* 1997: 13)

While men turned to other male friends for advice and discussion on sexual activities, women were much less likely to do this. They saw the family, and particularly the mother, as a source of advice, but were unlikely to ask advice about sex in the family context. Access to health issues for women was assessed to be greatest through the mainstream media; women's magazines and newspapers.

“For women in the university and in the community, their ‘ways of knowing’ and their perceptions of sexual risk can constitute a risk apart from their actual level of sexuality.” (Silva *et al.* 1997: 17)

The experiences touched upon in this study reflect the dilemmas that young people face balancing modern influences and values in a society which traditionally separates young men and women, places great importance on the sanctity of virginity up to marriage, and tolerates male pre-marital sexual activity. Social change and different expectations from and of youth are now altering these concepts. Traditional behaviours may now expose young people to additional risk, particularly the type of sexual activity which is tolerated by young men. The increase in the average age of marriage is likely to contribute to increased sexual activity before marriage, thereby underlining the need for better reproductive health education. In 2000 the average age of marriage for women had increased to 24.6, one of the highest ages in South Asia (De Silva, Somanathan, Eriyagama 2003: 5) and fewer than 9% of women marry under the age of 20 (*ibid*: 9).

Very little rigorous research or data exists on teenage pregnancy as an issue in Sri Lanka, possibly because the rates of unwanted adolescent pregnancy are so low. According to De Silva *et al.* (2003) age-specific fertility rates (ASFRs) for females ages 15–19 years went down from 35 per 1,000 in 1993 to 14 per 1,000 in 2000 (*ibid*: 6). UNICEF figures for the period 2000-2005 show a higher rate of 23 per 1,000 for the same age range indicating that there may have been a substantial increase since 2000. However, this rate compares very favourably to other countries in South Asia (Nepal: 124/1,000; India: 44/1,000; Pakistan: 50/1,000; Bangladesh: 125/1,000) and favourable compared to most other developing nations and some developed nations (USA: 49/1,000; UK: 24/1,000; New Zealand: 31/1,000) – ranking at 43rd out of 124 countries listed on UNICEF's Global Database on Fertility and Contraceptive Use (<http://www.childinfo.org/eddb/fertility/dbadol.htm>).

It is thought that despite abortion being illegal, most unwanted pregnancies among unmarried teenagers end in abortion. A study undertaken in 1993 found that 80% of abortions that had taken place amongst the 322 women questioned were carried out in private clinics or government hospitals showing that the service is available albeit clandestinely (De Silva *et al.*: 6).

The issue of reproductive health among adolescents has been taken up at government level and in the 1997 Population and Reproductive Health Policy specific mention is made of the need to promote responsible adolescent behaviour. A steering committee under the Family Bureau of Health was set up in the 1990s and includes representatives from the Faculty of Medicine

(University of Colombo), Ministry of Education, Department of Education, and NGOs involved in adolescent health programs. The committee was involved in the production of a book entitled 'Dawn of Adolescence' (*Udawu Yauvanaya*) for older school children. Twelve Public Health Midwives are available in 13 districts for adolescents to consult and counselling services were made available at 'service delivery points' in these areas as part of a project called the Reproductive Health Initiative in Asia. In addition 262 Well Women clinics across the country also provide services to women's reproductive healthcare. The Family Planning Association of Sri Lanka runs a hotline to provide advice on reproductive health issues, and although it is not aimed specifically at adolescents young people are amongst the callers.

During the 1990s 1,074 school health clubs were established in 10 high-risk districts by the Health Education Bureau in collaboration with the regional health authorities and UNICEF. These clubs give young adults the opportunity to discuss issues related to sexual behaviour and to learn more about reproductive health issues, including HIV/AIDS and STI prevention. Some teachers were trained in counselling as part of this initiative.

A number of local and international NGOs are involved in improving awareness of reproductive health. The Reproductive Health Information, Counselling, and Services to Adolescents and Youth Project, which aims to train counsellors on dealing with reproductive health issues, was implemented by seven NGOs; FPASL, Sarvodaya, Worldview Sri Lanka, SLAVSC, CDS, Vinivida Federation of Community Based Organisations, and Prevention of Cancer and AIDS. Another NGO, Sumithrayo, specialises in adolescent health and sexual and emotional problems, and the International Rotary society does work on promoting information about sexually transmitted diseases and responsible sexual behaviour to adolescents (*ibid*: 14).

However, despite all these projects and initiatives, awareness of sexual health remains poor among adolescents in Sri Lanka. There are not enough trained teachers or health workers, and there remains a taboo around discussing such issues openly. De Silva *et al.*'s report recommends the training of more teachers as counsellors for adolescents, as well as training pharmacists to provide confidential services.

In addition, the lack of detailed research and data on reproductive health and issues such as teenage pregnancies poses a significant barrier to creating momentum for a larger awareness raising campaign and the provision of

more services. More research is needed looking at vulnerable populations on issues such as abortion, high-risk sexual behaviour by adolescents and commercial sexual activity.

2.7 Disability

The last Census of Population and Housing conducted by the DCS in 2001 collected data on the prevalence of different types of disability amongst children in Sri Lanka. The numbers of disabled children goes up with age, indicating that most disabilities either develop later in life or are a result of injury or illness. No detailed information was collected on how the disability occurred. The most common type of disability was in the legs, followed by hearing/speaking disabilities and mental disability which recorded similar levels. More male children were found to be disabled than girl children.

Table 2.11: Disabled persons by type of disability, age and sex

Age group and	Total number of	Sight disability	Hearing/ speaking disability	Disability in hands	Disability in legs	Other physical disability	Mental disability
0-4							
Both sexes	4851	632	2122	876	1807	687	1311
Male	2783	323	1212	530	1078	378	733
Female	2068	309	910	346	729	309	578
5-9							
Both sexes	11681	1406	6062	1835	3310	923	4008
Male	6639	822	3451	1094	1907	494	2275
Female	5042	584	2611	741	1403	429	1733
10-14							
Both sexes	14246	2008	6170	2142	3736	872	5522
Male	8310	1198	3628	1296	2291	497	3155
Female	5936	810	2542	846	1445	375	2367

Table 2.11: Disabled persons by type of disability, age and sex (contd.)

15-19							
Both sexes	15168	2120	5837	2299	3812	781	5875
Male	8869	1233	3321	1420	2343	437	3326
Female	6299	887	2516	879	1469	344	2549
Total both sexes	274711	69096	73343	48131	90576	13275	69026
Total male	158446	35419	40584	31070	56529	7344	37181
Total female	116265	33677	32759	17061	34047	5931	31845

Source: DCS 2001

A study by Dr. Padmani Mendis used a sample of 193 disabled children to estimate of the balance of different types of disability amongst children. The figures reflect the census data, highlighting that mobility and hearing made up the highest proportion of disabilities, with speech and 'different behaviour' (including ADHD and autism for example) the next most significant disabilities. Almost 30% of the children suffered from more than one disability (Disability Information Resources 2002-5).

The disabled are amongst the poorest and most marginalised in the country. Statistics show that disability and poverty are closely linked, with the disabled and their families making up a high proportion of households living below the poverty line. The Ministry of Social Services conducted a study in 2003 as part of its research for a National Policy on Disability and found that of those disabled individuals in employment, 43% with intellectual disability lived on less than the international standard of US\$1/day (PPP), rising to levels of 45% for those with mobility disabilities, 72% for those with a psychiatric disability, 81% for those with hearing disability, to a high of 88% for those with speech disability. Employment levels for those with learning difficulties and epilepsy were 1% and 5% respectively (Ministry of Social Services 2003: 11).

Social exclusion is a significant problem for disabled children, with many families remaining trapped in poverty due to stigmatisation by others, reduced access to services and information and poorer earning potential. Disabled children have less access to entertainment and social activities,

particularly as there is superstition in some cultures around bad luck incurred if you see someone disabled on a journey or at a wedding for example;

“33% [of disabled people] never go out with the rest of the family and the same proportion have never been to a wedding, nor have they taken part in community activities and festivals. Only 21% take part in religious activities.” Ministry of Social Services 2003: 28.

The Ministry of Social Services (2003) has used the data obtained from ongoing programmes and estimates that between 4 - 5% of the population as a whole have some kind of disability. One unsourced report (Disability Information Resources 2002-5) estimates that 2.1% of the female population are disabled, and 2.9% of the male population are disabled.

Amongst young people many disabilities may be conflict related, whether from young soldiers injured whilst on duty, or civilians caught in crossfire, landmines or attacks. Malnutrition and poor health in pregnancy also contribute to an increased likelihood of infants being born with a disability, and malnutrition and deficiencies can cause disability in children as they grow older. The health service is not well equipped to follow up and monitor children who may need further care. Without this kind of close monitoring some minor disabilities may develop into something more serious or lead to multiple disabilities over time. There is no specialised support for children who have disabilities such as autism, dyslexia, or ADHD which affect their learning and development.

Children who have a disability are already at a disadvantage in terms of achieving their full capabilities in life, and the lack of a fully functioning support system in Sri Lanka further disadvantages children, particularly those from poor socio-economic backgrounds whose families cannot afford to pay for extra support services or healthcare. Education has been recognised as key for disabled children, giving them a better chance of independence and improved wellbeing in later life.

In this context Sri Lanka has had a relatively forward looking policy and since the early 1970s disabled children have been integrated into the education system where possible in attempt to provide an ‘inclusive education’. Some schools have special education units attached to them. If children cannot fit into either the ordinary or special schools they are catered for by special schools run by NGOs or the private sector. In 2001 the Annual School

Census showed that the majority of disabled children *in schooling* were in the mainstream – making up 2.37% of the student population. However, this census only covers those children who are in the schooling system, and does not highlight the extent of the problem of those children who still receive no schooling. Children with more severe disabilities often get no education at all,

“The Education System, both state and private, lacks the expertise and the capacity to deal with these children.” (Ministry of Social Welfare 2003:17)

The study by the Ministry of Social Services found that over half the children of school going age with disabilities in 76 Divisional Secretary Divisions were not attending school. The figures were even higher among pre-school children. Out of 1,425 children with disabilities of pre-school age, 909 (63.7%) were not attending a pre-school. This could be due to poor attitudes of teachers and other pupils, poor access to, and a lack of transport to and from schools. Most specially trained teachers do not go on to work in the special units of schools.

Box 2.3: Proportion of disabled adults who received schooling

The Ministry of Social Services conducted a retrospective study with a sample of disabled adults to determine the schooling rates for those with disabilities. It found that only 35% of adults with an intellectual disability, and only 46% of children with a speech disability had received any kind of schooling.

Disability	% of adults who started schooling
Visual	70
Speech	46
Hearing	51
Mobility	76
Intellectual	33
Psychiatric	88
Epilepsy	68

Source: Ministry of Social Welfare 2003

Figures from the Special Education Unit in 2002 suggested that there were very high attrition rates amongst disabled children with only 56% going on to secondary school and only 4.5% to tertiary education. In educational

terms, female disabled children are much more disadvantaged than male disabled children; of those disabled children attending school 59.5% are boys and 40.5% are girls (Ministry of Social Services 2003: 19). The Ministry's research suggests that this could be because families are keen to protect their daughters from the stigma associated with disability.

"Females encounter a greater degree of negative attitudes. Families tend to protect their female members who have disability from a society which rejects and stigmatises them. As well as social abuse, females need also to be protected against sexual abuse. Families and authorities who for one reason or another are responsible for the well-being of females with disability tend to 'protect' them from the male sex. The protection quite easily leads to over-protection, and some times to what some may consider even to be oppression. As women who have disability say, *'We have no opportunities for education, no chance of doing a job and no prospects of marriage. So what is our future?'*" (Ministry of Social Services 2003:25)

Attendance rates at school are also impacted by poor transport networks and inaccessibility in and around schools which were not designed for those with mobility disabilities. Testimonies from those working with disabled children also highlight issues of social exclusion,

"Children and young people with disabilities feel that they are discouraged from going to school. Those that do attend are often discriminated against by both teachers and their peers and as a result do not learn. Some teachers assume that people with disabilities are unable to learn so a self-fulfilling prophecy comes into operation as the children themselves come to believe that they cannot learn." (Disability Information Resources 2002-5).

One of the reasons why children may be discouraged from attending school may be the way that teachers are assessed; on the academic results of their students. This may put them off teaching children who have special needs and who may not achieve such high results, pulling down the averages. This implies that provision needs to be made for encouraging teachers to accept disabled children into the classroom. The Ministry of Social Services

also made further recommendations in its proposals for a National Policy on Disability relating to education for disabled children:

- Better pre-service training of primary and secondary school teachers in 'inclusive education'
- School infrastructure should take into consideration access for disabled children
- More publicity around the principles of inclusive education to ensure more people access schooling
- Ensuring equal access to higher education and providing counsellors and support for those who need it.

The issues outlined above demonstrate that *deprivation* and *exclusion* from key areas such as appropriate health services and education/training discriminate against disabled children being able to achieve their capabilities, making them more *vulnerable* to falling into a trap of socio-economic poverty in later life. The families of disabled children are also vulnerable, with increased chances that they will suffer economic poverty and stigmatisation. Specific groups within the disabled are particularly vulnerable, including girls who fare much worse in terms of education and future income earning prospects, the intellectually disabled who are the most marginalised and the least well served, and those children who suffer from multiple disabilities.

2.8 Post-traumatic stress disorder

Little information is available on mental health issues in children. This is an area in which existing research needs to be more widely communicated, or new research undertaken as there is little quantitative evidence on the prevalence of mental health disorders in children. Post-traumatic stress disorder (PTSD) is one psychological disorder that children subject to abuse and deprivation are more vulnerable to, but PTSD is a controversial area as the characteristics are many and various and it is not always easy to positively diagnose the disorder. However, sexual abuse, poverty and natural disasters such as the tsunami are commonly associated with PTSD in children. Symptoms of PTSD in children who have been abused can include (Chandrasekera 2006: 143):

Age 0-4

- Fear of an individual
- Withdrawal
- Disturbances in sleep
- Inactivity
- Aggressive behaviour
- Often touching genital area
- Lying
- Shyness

Age 5-10 years

- Relating of dreadful dreams of some individual
- Dislike of school for no reason
- Constantly biting nails, end of pencils, shirt collar
- Stammer
- Boisterous behaviour, cruelty
- Unusual fear
- Uncontrollable passing of urine and bowel movements
- Dislike for and rejection of food
- Attempts to harm himself/herself
- Constantly touching own genital area
- Withdrawal from peers and tendency to associate with adults

Poverty and continuous deprivation of elements such as food or clothing can also affect a child's wellbeing, causing PTSD.

“This often happens because the parents, due to their poverty and dire economic circumstances are unable to satisfy and make the child happy. The child cannot comprehend the destitution of the parents. The child only feels that ‘he/she did not get it’. This frustrating experience can lead to PTSD.” (Chandrasekera 2006: 144)

2.9 Suicide

According to 1999 data Sri Lanka has one of the highest suicide rates in the world, mainly by self-poisoning, and there is evidence that this is an issue which seriously affects the young as well as the old. It is generally understood that poorer sections of society are more vulnerable to external shocks which can cause severe economic hardship, which can lead to family breakdown and mental trauma, and ultimately suicide. However the picture appears to be a lot more complicated than this, with young people in Sri Lanka particularly prone to seeing suicide as a solution to even minor problems.

Suicide statistics quoted in different sources vary widely, so it is difficult to paint an accurate picture of the numbers of young people affected, but the statistics below from the Police Department suggest that youth make up a significant proportion of suicides. Despite a drop in overall numbers, the percentage of the overall total remains high.

Table 2.12: Suicide in Sri Lanka 1995-2001

Year	1995	1996	1997	1998	1999	2000	2001
Total	8519	7367	6228	5869	5907	5412	4995
Youth							
(20-30 years)	2030	2715	2164	1300	1220	1045	1553
Youth as							
% of total	23.8%	36.9%	34.7%	22.1%	20.6%	19.3%	31%

Source: Police Department Statistics 2003 in Ganepola & Thalayasingam 2004: 11

A study conducted by Eddleston *et al.* in Anuradhapura hospital over 1995 and 1996 found that many people admitted for deliberate self poisoning were young: about two thirds were aged under 30. Most were not expecting to die, but fatality is common amongst young people who take poison. 60% of female patients who died were less than 25 years old. A similar study carried out in Anuradhapura and Polonnaruwa in 2002 also found fatality rates to be high amongst younger female patients, with the highest number of cases occurring in the 15-19 year old age band. Oleander was the poison most commonly used by females and males under the age of 20 (Eddleston, Gunnell, Karunaratne, Arunaratne, De Silva, Sheriff and Buckley 2005: 583).

Gunnell and Eddleston (2003) have done extensive work on suicide by ingestion of pesticides which is a very common cause of death in Sri Lanka

and highlight that the easy availability of pesticides contributes to the high incidence of attempted suicides in developing countries compared to developed countries. Small-hold farming means that these pesticides are commonly and easily available in towns and villages, meaning that young people can act on a suicide impulse quickly and easily (*ibid*: 903). The authors recommend that more research is carried out to identify the best ways of restricting access to pesticides in rural communities, as well as more research into treatment for victims (*ibid*: 907).

In an effort to shed more light on an area about which most information is collected anecdotally, Dr. Rupasinghe from the University of Ruhuna recently undertook a study in two divisions in Monaragala District: Wellawaya and Thanamalwila. Secondary research was carried out at a divisional level, and primary research (PRA) was conducted in two villages, one in each division. These divisions were selected due to popular media reports that they have particularly high rates of suicide. Discussions were held with government officers, police officers, teachers, midwives and with children in schools (with teachers present).

The data indicated that *completed* suicide rates (as recorded by the police) were in fact not particularly high, but *attempted* suicide rates (as recorded by the hospital) were very high. More than 80% of child suicides used pesticide – easily available and commonly known as an easy method of suicide. Reasons cited for suicides were mainly broken love affairs, family conflict and alcoholic fathers. Family conflict can also mean between husband and wife as the average age of marriage (although not legally recognised) in the area is 13/14 for girls and 17 for boys.

Table 2.13: Suicide rate for under 19 years per 100,000 people

Wellawaya	Male	Female
2003	97	197
2004	193	247
2005	241	468
Thanamalwila	Male	Female
2003	178	316
2004	152	237
2005	25	368

Source: Rupasinghe 2006

However, such secondary data on suicides is considered unreliable due to problems of under reporting, incomplete records, and reluctance on the part of the authorities and on the part of families to disclose data. Interviews in the villages suggested much higher rates. The study identified a number of factors which influenced the high prevalence of suicide amongst young people:

Poverty

There is a severe lack of water for personal and farming use, and many families live in extreme poverty. In one of the villages surveyed 80% of inhabitants were Samurdhi beneficiaries. All are involved in illegal 'kansa' cultivation to increase their income. Literacy rates are very low. Children leave school early as they do not see the point in continuing their education. Education is also hampered by long distances to schools and the need for children to work on the farms during harvesting seasons. This extreme poverty leads to a sense of hopelessness and depression.

Poor social integration and community relations

The villages are 'new' (set up in the mid 1970s) and the inhabitants are all migrants from other areas. They arrived as labourers, encroached government land which was eventually given to them and they are now farmers. Due to the fact that families are migrants, there is little social cohesion within the communities and people do not confide in one another. There is a clear social hierarchy between families who own buffalo herds and those who are farmers. The former are the powerful groups in these communities and are greatly feared. Many families would not talk about them for fear of reprisals. These families are often involved in incestuous relations – in one village of 90 families, six were engaged in incestuous relationships. These complex relationships are a common cause of suicide. The denial of relationships between these upper and lower social classes is also a cause of suicide amongst young people.

Negligent parenting – poor role models

Alcoholism and deviant sexual behaviour is common amongst the adult community, and children often witness such activity within the household. Teachers interviewed expressed concern that children often try to copy adult behaviour, not realising that it is socially unacceptable.

Researchers found unusual attitudes to sex within the community, possibly as a result of their social isolation from other areas. Residents of the villages

surveyed claimed to have particularly high sexual desires and performance, and used this to justify the high prevalence of incest and deviant sexual behaviour. This belief was very strongly felt, and elders even assumed that children felt it too, therefore it was justifiable to sexually abuse children. Abnormal sexual relations were considered normal. Adults and adolescents do not know how to handle normal hormonal changes and sexual desires in a manner which is considered more socially acceptable and less damaging. Children believed that it was abnormal for them *not* to have love affairs from the age of 13/14 years, and did not see anything unusual in teenage marriage.

Sexual abuse amongst children is a significant problem in the area, but it is estimated only 10% is recorded. Children expressed a fear that they will be punished if they report such abuse. One case was cited of a mother choosing to receive a pay off from the offender rather than report him to the police.

Social attitudes to suicide

Children interviewed said that suicide was talked about openly and is not seen as something shameful or shocking. Suicide is a part of children's lives and is not something surprising to them. They know the reasons why people commit suicide and they know what to do if the same thing happens to them.

Lack of counselling facilities

Children say that they have no-one to talk to that they can trust. There is a lack of suitable role models who can listen and give advice. Police and education officers believe that training some teachers in basic counselling skills would make a big difference as children may see some other solution to their problems rather than suicide as the first option. Suicide is seen to be an easy and final solution to their problems.

Box 2.4: An epidemic of youth suicides?

“For most of the youngsters, self poisoning seems to be the preferred method of dealing with difficult situations. Examples include a 16 year old girl who died after eating oleander seeds because her mother said she could not watch television; a 13 year old boy who drank organophosphates after his mother scolded him, and who spent three weeks in intensive care being ventilated; and a 14 year old boy who presented in complete heart block after eating oleander seeds because his pet mynah bird had died.

Box 2.4: An epidemic of youth suicides? (contd.)

The children are learning from people around them - they are surrounded by people who have previously attempted suicide. In interviews with 85 patients on the general medical wards, more than 90% stated that they knew someone who had harmed themselves, and 90% knew someone who had killed themselves. If knowing someone who has committed suicide is a risk factor for deliberate self harm, whole communities in Sri Lanka are at very high risk.

The reasons for the epidemic are unclear. Sociologists have suggested that the young have few support systems and are unable to cope with societal and cultural demands. Frustrations felt by Sri Lanka's highly educated youth in the face of war, poverty, and the lack of opportunity at home and abroad are also likely to be exacerbating factors."

Source: Extracts from Eddleston et al. 1998. unpaginated

2.10 The tsunami and emotional trauma

One of the major concerns following the tsunami was the mental health of those who had been through the experience and those who had lost family and possessions. Children in particular were vulnerable to such trauma, and many found their world turned upside down and little normality to cling to. Schools in affected districts reported high levels of absenteeism and drop outs due to emotional trauma in the year following the tsunami (UNDP 2005) and there was a marked increase in alcohol consumption among men and teenage boys.

The sense of having lost everything made some children feel responsible for rebuilding the family's possessions and life as it was before. This can be seen as a positive motivating force for succeeding at school and in work, but it can also be a heavy burden on young children who have had to mature more quickly, and who may feel that they can no longer be children, but have to leave school earlier and help their family recover. However, an article by Dr Chandrarathna (2006) also argues that labelling and stereotyping tsunami-affected children as *victims* can cause them to become locked in a spiral of despair and self-destruction. He recommends that more psychosocial support is needed to help children recover a sense of independence and confidence.

The tsunami highlighted the severe lack of qualified and professionally trained social workers in Sri Lanka to undertake psychosocial work. There are too few trained social workers to spot those children who need help, and those who do need help have little to turn to as there is a lack of trained

psychiatrists. This lack of psychosocial support was also noted in a Christian Child Fund report immediately after the disaster (CCF, 2005). A government report in 2005 laid out plans for mainstreaming psychosocial care into the education system; assessing the number of psychologically affected children in schools, and providing teachers and children with tools to aid recovery (Government of Sri Lanka and Development Partners 2005: 21). No review of this policy has yet been undertaken.

2.11 Conclusion

Health services and the health of the population are areas in which Sri Lanka fares relatively well compared to most other developing countries. Access to medical personnel and infrastructure is relatively good in most areas, and awareness of health issues is rising. However this chapter has highlighted that there are still significant pockets where children do not have access to good health services and where health problems persist. The prevalence of health problems is affected by a range of factors, including:

- The state of health and education of the mother
- The size of the family
- Access to clean water and sanitation
- Infant feeding practices
- Living conditions
- Spatial location vulnerable areas include: the estate sector, conflict affected areas, the North and East, urban suburbs, and tsunami affected areas.

The chapter considered a very wide range of health issues, and it is difficult to generalise on the state of children's health as the issues are all very different. However, it is clear that deprivation is a key factor in most ill health; households deprived of adequate living standards, education and access to key infrastructure and markets are more likely to suffer ill health. But simplistic cause and effect relationships cannot be assumed in all cases. For example, whilst many health issues are related to parental education levels, not all variables were affected by mother's education. Equally, some health problems are not as severe as would be expected in areas of the country which are considered to be deprived and vulnerable, such as the North and East.

The data presented in this chapter was collated from a variety of sources, and comparisons should therefore be treated with some caution. This particularly applies to comparing data collected in the North and East and in the plantation sector with data from the rest of the country. Different sampling and data collection methods are used in different surveys, and this may explain some of the differences in the data. The DCS' Demographic and Health Survey is probably the most comprehensive and reliable source of information on social and health issues, but the lack of data from the North and East poses a significant problem.

There are also large gaps in the data collected, for example there is nothing available in the DHS on mental or physical disability, or mental health issues including suicide rates. Data from other sources on these areas is also patchy, although the Census of Population and Housing and the research undertaken for the Ministry of Social Services looking into a National Disability Policy did shed some light on the issues. The data paints a picture of severe social exclusion for disabled children and their families, and a lack of support from social services and educational institutions. Mental health still carries a heavy stigma with it, making it difficult to collect information. There are not enough trained psychologists and psycho-social workers to deal with children who need help, and there is a limited understanding of important factors, including the links with socio-economic poverty - particularly in depression leading to suicide.

The most detailed data collected only covers young children, usually under five year olds, leaving a rather blank picture on the health issues relevant to older children and adolescents, including issues such as teenage pregnancy which are for the most part only reported anecdotally and in small samples. This reflects a general bias towards "health as a physical condition" as highlighted by Feeny and Boyden (2003: 30). They assert that physical health indicators such as infant mortality and stunting often take precedence over mental health and concepts of wellbeing and quality of life. This reflects a wider problem with data collection which attempts to set benchmarks, particularly at an international level. Quantitative data is easier to collect and compare than qualitative issues such as perceptions of wellbeing, children's own priorities, patterns of ill health, and coping mechanisms. These are issues, however, which would convey more effectively children's experiences of poverty and health and the dynamics which affect health over a child's lifetime.

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CHAPTER 3

Nutrition

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3.1 Introduction

Child malnutrition continues to be a major problem in Sri Lanka. According to the latest Demographic and Health Survey (2000), between 1/3 and 1/4 of children under the age of five are underweight and one in ten suffers from chronic or acute malnutrition (Gunewardena 2003: unpaginated). Malnutrition rates are lower than other South Asian countries, but high compared to non-Asian countries. In fact, compared to other countries with similar rates of income Sri Lanka has a very high number of children underweight as a result of malnutrition. The malnutrition rate is three times that expected of a country with good infant mortality rates. Approximately 72,000 babies in Sri Lanka (about 19% of live births) are born moderately to severely malnourished every year; the median birth weight of Sri Lankan children is approximately 2.8kg, well below the reference median value of 3.2 kg (MRI 1998) (De Silva, S. 2000).

Malnutrition is usually measured in relation to the prevalence of three characteristics:

- Underweight – when a child doesn't weigh enough for their age
- Stunted – when a child is too short for their age
- Wasted – when a child doesn't weigh enough for their height

As a note of caution it should be highlighted that the extent of children who are underweight is contested by many health practitioners in Sri Lanka. They argue that the baseline standards used are based on standard, expected weights for Caucasian children in Western countries, and do not take into account the different characteristics of South Asian children who usually weigh less. In this context they argue that it is safer to use statistics on stunting and wasting which can more accurately reflect problems with normal development. The high figures of underweight children in Sri Lanka should therefore be considered cautiously as they may be exaggerating the extent of the problem.

It is also important to note that Sri Lanka is currently in what is termed a 'nutrition transition' phase, that is to say the problem of children suffering from being underweight or stunted is shifting rapidly towards a problem of overweight children and prevalence of chronic diet related diseases such as diabetes. This reflects a pattern seen in many other developed and developing countries; as a country's GDP rises, consumption and exercise habits change,

Table 3.1: Child Malnutrition rates by age and sex, 2000

Age in months	Moderate or severe malnutrition				Severe malnutrition			
	Weight for age		Height for age		Weight for age		Height for age	
	Males	Females	Males	Females	Males	Females	Males	Females
3-5	0.90	0.00	6.12	1.83	0.90	0.00	3.23	1.83
6-11	23.50	14.54	6.17	5.02	1.71	4.30	1.64	1.76
12-23	30.57	26.87	11.74	21.53	5.04	4.27	2.89	3.76
24-35	31.95	36.26	10.54	14.47	4.5	7.09	1.74	4.41
36-47	26.69	65.23	12.02	14.76	1.72	7.59	1.03	2.84
48-59	38.20	37.47	18.95	19.28	3.99	6.93	4.43	3.49
All	29.04	29.81	11.90	15.34	3.37	5.80	2.41	3.35

Source: Gunewardena calculations from DHS 2000 data. 2003: unpaginated

including increased consumption of fast food and sugary snacks and drinks. While in poorer countries obesity and chronic diet diseases are a problem associated with higher socio-economic classes, as GDP rises, the risk of obesity shifts down the income ladder and the inverse becomes true. Vulnerable, poor groups become more at risk of obesity than higher income groups, particularly as cheap, refined foods permeate rural markets and become an attractive, low cost option. Mass marketing is not currently strictly controlled and often food of low nutritional value is marketed as healthy and nutritious.

Sri Lanka is experiencing the beginning of this trend, with obesity levels rising fast in metropolitan areas, but also starting to be an issue in poorer rural areas. Unfortunately there is currently no national level data collected on over-nutrition as the focus has always been on under-nutrition. However, the government’s 2007 Nutrition Action Plan quotes rates of overweight adults as 16.4% of women and 9% of men in 2001 (Ministry of Healthcare and Nutrition 2007: 5). The action plan also refers to the likelihood that issues of diet related diseases including diabetes and coronary heart disease will increase significantly over the next few years.

3.2 Micronutrient deficiencies

Common manifestations of malnourishment are vitamin and mineral deficiencies, and there are three main deficiencies common in Sri Lanka: iodine, vitamin A and iron. These hamper healthy development, and in some cases cause serious illness.

3.2.1 Iodine deficiency

Iodine deficiency causes goitre and severe mental problems and was identified as a significant issue in Sri Lanka many years ago. Attempts have been made to combat this by the compulsory addition of iodine to all salt and it is now illegal in Sri Lanka to sell salt which has not been iodised. During the last DHS (2000) only 12.4% of households were found to be using untreated salt, although this figure was much higher at 18.7% in the estate sector. However, there is some debate about other factors causing goitre linked to diet and minerals in local water as there is a 'goitre belt' in Sri Lanka where it is most prevalent. No recent goitre statistics were found but earlier statistics from 1986 found that the prevalence of goitre in school children ranged from 6.5% in Matale to 30% in Kalutara, with 62% of pregnant women in Kalutara reported to suffer from goitre (De Silva 2000).

3.2.2 Vitamin A deficiency

Vitamin A deficiency is the single most important cause of childhood blindness in developing countries with symptoms including:

- Xerophthalmia (dry eye)
- Night Blindness (inability to see under low illumination)
- Bitot's spot (lesion or dry surface of the eye)

According to an MRI report in 1998 looking at Vitamin A status in children, 36% of children were found to have a low serum vitamin A concentration (below 20 micrograms per decilitre) and only 10% of children were equipped with adequate stores of Vitamin A. Deficiency is prevalent in low socio-economic groups, associated with poor housing, unclean environments, community water sources and no access to safe latrines. Children living in poor housing and with poor access to sanitation and safe drinking water were found to be one and half times more likely to be Vitamin A deficient than others. Most mothers questioned about their knowledge of dietary supplements knew about dark green leaves, but few knew about the importance of yellow fruits or vegetables and animal products. This illustrates the need for more education for mothers regarding nutrition.

Table 3.2: Percentage of children with low vitamin A Levels by age and sex

Age (months)	10 ug/dl	20 ug/dl	30 ug/dl
6-23	9.0	34.8	70.5
24-47	8.5	34.2	68.2
48-71	9.5	36.6	71.2
Sex	10 ug/dl	20 ug/dl	30 ug/dl
Male	9.6	36.0	70.2
Female	8.3	34.5	69.7

Source: MRI 1998: 29

*Note: Concentration below 10 ug/dl is considered to be a sign of severe vitamin A deficiency

3.2.3 Anaemia

Anaemia is the most widely distributed nutritional deficiency affecting individuals belonging to all age groups in Sri Lanka (Piyasena *et al.* 2001: 103), and there is emerging evidence to suggest that there is a link between iron deficiency anaemia and poor growth rates in children (*ibid.*: 88). The effects of anaemia include impaired cognitive development for children from infancy through to adolescence, stunted growth in children, impaired fat absorption, increased lead absorption, lower immunity, fatigue and reduced ability to undertake physical work, and ultimately increased mortality.

Infants, preschool children, adolescents, women of child bearing age and pregnant women are at particular risk of developing iron deficiency anaemia. The WHO estimates that around 50% of pregnant women in Sri Lanka suffer from anaemia (*ibid.* 2001: 59), threatening the normal development of the foetus. When a pregnant woman is anaemic, she is more likely to deliver a premature or a low weight baby (nearly 40% of pregnant women are anaemic) (De Silva 2000).

Box 3.1: A snapshot of anaemia in Sri Lanka

- 57.6% of children aged 6-11 months are anaemic. This could be linked to poor maternal health as these children are usually still breastfeeding, and may have been low weight babies if their mothers suffered from anaemia.
- 20.9% of primary school children aged 5-11 years are anaemic. Female children have the highest prevalence of anaemia at 5 years of age and males at 6 years. Whilst still high, this is a remarkable improvement from the previous National Health and Nutritional Survey in 1996 which recorded rates of 58%.
- 22.3% of adolescent children (11->18) are anaemic. Again, this is a reduction on the 1996 figure of 36%.
- The prevalence of anaemic girls (25.7%) is much greater than that of anaemic boys (18.1%). This is of concern as anaemic adolescent girls are more likely to be anaemic during pregnancy, and continue the cycle of anaemia by having low weigh, anaemic babies.
- Adolescents in the North Central province recorded the highest prevalence (27%).
- Overall, trends are going in the right direction with a substantial decline in anaemia prevalence observed compared to levels of around 70% in 1973 and 45% in 1996.

Source: Piyasena et al. 2001

3.3 Contributory factors to malnutrition

The underlying causes of malnutrition fall into three main clusters (De Silva 2000:211):

- 1) Household food security
- 2) Maternal and childcare
 - Expectant mothers do not receive proper nutrition
 - Breastfeeding procedures are often incorrect
- 3) Basic health services

Poverty influences all these underlying causes, reducing parents' ability to provide care and impairing access to health services and food. If a household falls below the poverty line in Sri Lanka this indicates that they do not have an adequate energy intake (the poverty line is based on the resources required to meet an agreed calorific intake necessary for healthy survival and is updated monthly and tailored for regional variations). 23.9% of households fell into this category in the 2002 Household Income and Expenditure Survey, which highlights the extent of the problem in Sri Lanka.

However poverty alone is not a sufficient explanation of all malnutrition in Sri Lanka as there is still a high rate of stunting even in the highest quintile of expenditure (De Silva 2000: 218). The issues around malnutrition are complex and highly interlinked. Low household income or low food security can lead to reduced amounts of food in the household, thereby leading to malnutrition. Low income also affects access to good housing, clean water and adequate sanitation which all contribute to the likelihood of catching infections, which also leads to malnutrition. Allocation of food within a household can also impact malnourishment within families, particularly large families where there is limited food to go around. Food security, income levels and access to infrastructure can all be influenced by geographical location, so malnutrition is also a spatial issue.

The level of mothers' education is also an important factor in malnutrition rates in children. Educated mothers are more likely to have a greater awareness of the importance of hygiene and a balanced diet and studies have shown that the more educated the parents, the less likely it is that their children will suffer stunted growth. Interestingly this positive correlation between any level of mothers' education and nutrition only stands for stunting; for other issues of malnourishment the correlation was valid only for mothers with O' and A' level education.

Some common **immediate and underlying causes** of malnutrition in children are:

- Age at pregnancy – teenagers or mothers in their late 30s to 40s are more likely to have an underweight child.
- Poor nutrition or health in the mother while pregnant, leading to low birth weight.

- Non-feeding of colostrum to the newborn baby and non-exclusive breast feeding in first 4 months (introduction of supplements can lead to infection and under-nutrition due to the introduction of water or weak tea). Levels of breastfeeding have vastly improved over the last decade, although exclusive breastfeeding for the first 4-6 months is still an issue in some areas.
- Insufficient and inappropriate complementary feeding of solids for babies and children over 6 months, leading to early malnutrition.
- Birth order, affecting availability of food which has to be shared between children, particularly if they are close together.
- Poor understanding of a balanced diet, or the seriousness of children refusing to eat.
- Infections; diarrhoea and respiratory particularly. A greater incidence of stunting was shown in children who had experienced a diarrhoeal episode in the two weeks preceding the Demographic and Health Survey in 2000, possibly indicating that they suffer frequent episodes, or that the reasons which led to them getting an infection are the same reasons which led to malnutrition (poor health care, lack of resources, low parental education etc.). Frequent illness and infections depress appetite and reduce the body's ability to absorb food effectively.
- Poor access to water and sanitation, often leading to illness (as above).

De Silva (2000) also highlights that there are certain overarching structural issues which underlie these factors:

- Inequitable food security
- Inadequate public education
- No national policy on food fortification
- Poverty – reduces ability of carer to access health services and food.

Some progress has been made over the last decade, particularly reducing disparities in weight between girls and boys, but malnutrition is still high in the plantation and rural sectors. Looking at trends by age, a pattern emerges which has remained constant since 1980/81, despite an overall drop in the numbers of children with long-term nutritional deficiencies. Incidences of

malnutrition start to develop during the weaning stages of childhood and rise sharply during the second year of a child's development. The situation improves somewhat during the third year, but then gets worse in the third and fourth years when the child starts to attend pre-school. This indicates that food given to weaning babies is not sufficiently nutritious (DCS 2003). The table below summarises the incidence of stunting, wasting and low weight in relation to a number of factors which are commonly associated with malnutrition.

Table 3.3: Factors in relation to prevalence of stunting, wasting and underweight

Variable	Stunting	Wasting	Underweight
Mother's educational level	Primary or below: 27% Secondary & above: 11%	Primary or below: 17% Secondary & above: 14%	Primary or below: 43% Secondary & above: 27%
Age of child	Under 6 months: 3% 6-11 months: 6% 12-23 months: 16% 24-35 months: 13% 36-47 months: 13% 48-59 months: 19%	Under 6 months: 1% 6-11 months: 10% 12-23 months: 18% 24-35 months: 13% 36-47 months: 14% 48-59 months: 16%	Under 6 months: 0% 6-11 months: 21% 12-23 months: 29% 24-35 months: 35% 36-47 months: 30% 48-59 months: 39%
Birth weight	<2.5kg: 23% >2.5kg: 11%	<2.5kg: 24% >2.5kg: 14%	<2.5kg: 47% >2.5kg: 25%
Family size	No. living children: < 2: 11% 3-4: 21% > 5: 27%	No. living children: < 2: 14% 3-4: 15% > 5: 19%	No. living children: < 2: 27% 3-4: 36% > 5: 46%
Source of drinking water	Safe: 11% Unsafe: 22%	Safe: 14% Unsafe: 15%	Safe: 27% Unsafe: 38%
Type of latrine	Sanitary: 0% Unsanitary: 20% None: 28%	Sanitary: 13% Unsanitary: 17% None: 16%	Sanitary: 25% Unsanitary: 38% None: 44%
Sex of child	Boys: 12% Girls: 15%	Boys: 15% Girls: 13%	Boys: 29% Girls: 30%
Work status of mother	White collar workers: 8% Non working: 11% Blue collar worker: 24%	White collar workers: 9% Non working: 14% Blue collar worker: 18%	White collar workers: 18% Non working: 28% Blue collar worker: 43%

Table 3.3: Factors in relation to prevalence of stunting, wasting and underweight (contd.)

Access to media by mother	Print & electronic: 9% Electronic only: 15% No access to media: 20%	Print & electronic: 13% Electronic only: 14% No access to media: 17%	Print & electronic: 22% Electronic only: 32% No access to media: 39%
Mother washes her hands with soap after child defecated	Uses soap: 13% Doesn't use soap: 26%	Uses soap: 14% Doesn't use soap: 18%	Uses soap: 28% Doesn't use soap: 49%
Mother washes her hands before feeding the child	Washes hands: 13% Does not wash: 27%	Washes hands: 14% Does not wash: 16%	Washes hands: 28% Does not wash: 48%
Exclusive breast-feeding	Exclusive: 12% Not exclusive: 36%	Exclusive: 13% Not exclusive: 16%	Exclusive: 28% Not exclusive: 48%
Child given colostrum	Received: 13% Not received: 17%	Received: 14% Not received: 16%	Received: 28% Not received: 34%
Body Mass Index of mother	BMI of mother: >25: 9% 18.5-25: 12% <18.5: 17%	BMI of mother: >25: 10% 18.5-25: 14% <18.5: 19%	BMI of mother: >25: 19% 18.5-25: 27% <18.5: 8%
Sector of residence	Colombo metro: 8% Other urban: 9% Rural: 13% Estate: 35%	Colombo metro: 10% Other urban: 7% Rural: 16% Estate: 12%	Colombo metro: 18% Other urban: 23% Rural: 31% Estate: 45%

Note: Excludes the North and East

Source: Regression analysis based on DHS 2000 data. DCS, 2003: v, vi

The importance of each of these variables can also be summarised according to each type of malnourishment issue:

Stunting

- Number of living children in the family
- Age of child
- Sector of residence
- Work status of mother
- Access to media by mother
- Mother's educational level
- Type of latrine
- Child given colostrum
- Mother washes her hands with soap after child defecated

Wasting

- Age of child
- Sector of residence (urban/rural/estate)
- Work status of mother
- Access to media by mother
- Mother's educational level
- Sex of child
- Access to safe drinking water
- Type of latrine

Underweight

- Number of living children in the family
- Age of child
- Sector of residence
- Work status of mother
- Access to media by mother
- Mother's educational level
- Mother washes her hands with soap after child defecated
- Type of latrine

3.3.1 Infant feeding practices

Between the last Demographic Health Survey conducted in 1993 and the most recent one in 2000 the percentage of women breastfeeding colostrum and exclusively breastfeeding for longer has increased sharply. The government made a concerted effort to improve communication on these issues to pregnant mothers through health workers and literature available in clinics. Access to specific information on childcare, pregnancy and nutrition was a significant determinant for weight-for-age scores, but did not significantly impact the probability of being underweight. The impact of breastfeeding practices is evident from the rates of malnutrition amongst the different categories in the statistics below.

Table 3.4: Patterns of breastfeeding 1993 and 2000

	2000	1993	
Percentage of children ever breastfed*	98.0	98.0	
Percentage of children received colostrum*	76.8	54.9	
Percentage of children exclusively breastfed**	0-1 months	83.9	34.5
	2-3 months	65.0	17.4
	0-4 months	57.6	

Note: Excludes the North and East

Source: DCS 2002(a) in Gunawardena 2003: unpaginated

* All children below 5 years of age

** Youngest living children below 3 years of age

Table 3.5: Rates of child malnutrition (%) among children aged 0-59 months by infant feeding practices, 2000

Breastfeeding practice	Moderate or severe malnutrition		Severe malnutrition		
	Underweight	Stunting	Underweight	Stunting	
Colostrum was:	Given to the baby	27.94	12.58	3.95	2.52
	Discarded	34.49	16.60	6.46	3.70
Breastfeeding was exclusively practiced	4 months or more	28.40	12.33	3.52	2.32
	Less than 4 months	32.37	15.42	6.30	3.34

Note: Excludes the North and East

Source: Calculations from DHS 2000 data, Gunawardena 2003: unpaginated

However, in poorer areas Samurdhi benefits are often not enough for a family to ensure it has the correct nutritional intake and breast milk may not therefore contain all the nutrients required. For older children, powdered milk is expensive and fresh milk rarely available.

“sometimes it appears almost ludicrous for various medical personnel and nutritionists to pontificate about the benefits of breast milk when a visit to one of the marginalised areas will show them the poverty conditions that exist and the inability of the family to have even one proper meal which will have a nutritional benefit for mother and child.” (Abhayaratna 2006: A9.)

In the North and East DHS (2001) the average duration of breastfeeding was 22 months. This duration is higher in the Eastern province and in the rural sector, and is negatively correlated with mother's education – the higher the educational level, the lower the duration of breastfeeding. This may be due to the fact that more educated mothers are more likely to return to work earlier.

The Ministry of Healthcare and Nutrition's Action Plan refers to certain issues suffered by the breastfeeding promotion programme which has affected its success, including the excessive workload of midwives meaning that they are unable to reach all mothers regularly and offer adequate counselling and advice. There has also been inadequate enforcement of the Breast Feeding Code which covers advertisement of supplements, and no clear policy on whether HIV positive mothers should breastfeed (Ministry of Healthcare and Nutrition 2007).

Birth order and spacing between children has some impact on malnutrition tendencies. First born children tend to be better nourished than those which follow. Children born four or more years after the previous child are also less likely to be malnourished than those born three or less years apart. In terms of gender and birth order, there is some association between girls and higher rates of stunting as the birth order goes up amongst moderately to severely malnourished children.

Table 3.6: Child malnutrition rates (%) by birth order and sex, 2000

Child's birth Order	Moderate or severe malnutrition				Severe malnutrition			
	Weight for age		Height for age		Weight for age		Height for age	
	Males	Females	Males	Females	Males	Females	Males	Females
Firstborn	23.50	25.46	8.55	10.42	3.27	4.96	1.32	2.25
Second	31.97	30.87	11.41	16.03	2.14	5.30	2.10	3.56
3-5	35.21	36.28	18.85	25.53	4.37	8.02	4.12	4.81
6th and above	48.16	47.79	25.07	33.88	15.88	10.00	15.88	11.77
All	29.04	29.81	11.90	15.34	3.37	5.80	2.41	3.35

Source: Calculations from DHS 2000 data, Gunawardena 2003: unpaginated

3.3.2 Living conditions

Links between living conditions and malnutrition are important, and analysis of the DHS data indicates that children living in better houses have a lower incidence of malnutrition. Gunawardena (2003) highlights that this association is less marked in the levels of severe stunting,

“This may be related to the fact that a high level of stunting prevails in estate areas, where poor estate workers are provided housing with brick walls and tiled roofs.” (Gunawardena 2003: unpaginated.)

Diarrhoea is a common cause of malnutrition, and is still widely prevalent in Sri Lanka, highest in the 6-11 months age range (13%) which is when solids are first introduced to the diet. Drinking water and sanitation are key factors, children drinking from unsafe sources and using unhygienic toilets are more likely to be malnourished. Children drinking from a mainline tap are best off, but this may be because access to mains water indicates location in an area where infrastructure is better, including health services. Similarly, those households which boil water have lower incidence of malnutrition, but this may be linked to better parental educational levels and therefore possibly higher income households. Boiling water also costs money, so those that boil water for the whole house are likely to be better off. Similarly flush toilets are an indication of wealth.

Table 3.7: Rates of child malnutrition (%) among children aged 0-59 months, by drinking water sources, type of toilet and housing conditions, 2000

Water, sanitation and housing indicator		Moderate or severe malnutrition		Severe malnutrition	
		Underweight	Stunting	Underweight	Stunting
Drinking water source	Tap (main line)	19.06	9.38	2.67	1.86
	Protected well or tube well	29.96	12.56	5.28	3.20
	Bowser, unprotected well, river, tank or stream	38.96	23.41	5.23	4.06
Boiled water used for drinking water	For all family members	27.81	15.01	4.45	3.05
	For children under 5 years	25.66	10.74	4.00	2.99
	Not used at all	40.11	19.38	6.39	3.69
Type of toilet	Flush or water seal	25.95	12.34	3.79	2.54
	Pit latrine	42.19	18.03	7.02	2.10
	Bucket or none	44.86	27.79	9.21	9.33
Type of roof material	Tile, asbestos or tin	28.37	14.13	4.52	3.04
	Cadjan/palmyrah/ straw/ waste materials or other	45.48	20.45	7.80	3.84
	Brick/cement/ stone/cabook	24.70	11.26	3.37	2.60
	Mud or wood	44.90	24.41	9.10	4.72
	Cadjan/palmyrah	51.59	18.76	7.58	3.32

Source: Calculations from DHS 2000 data, Gunawardena 2003: unpaginated

3.3.3 Mothers' education levels

Higher education is associated with better feeding practices, more hygienic habits, better living conditions and more resources for food. However, amongst educated mothers, the proportion of children moderately or severely underweight increases for mothers with a degree and above. Gunawardena suggests this may be linked to the fact that they are more likely to work outside the home and therefore rely on childcare.

Studies have identified a relationship between women's decision-making status in the household and malnutrition rates in children, but the DHS data does not offer enough information to test that hypothesis in Sri Lanka.

Table 3.8: Rates of malnutrition (%) among children aged 0-59 months, by mother's age, education, marital status, work status and decision making powers, 2000

Maternal characteristics		Moderate or severe malnutrition		Severe malnutrition	
		Underweight	Stunting	Underweight	Stunting
Age of mother at child-birth	14-18 years	35.56	9.96	3.82	1.40
	19-23 years	31.38	12.96	5.03	2.02
	24-29 years	23.26	10.95	3.75	2.32
	30-34 years	29.96	14.98	4.39	3.58
	35-50 years	32.72	13.55	4.84	2.82
Mother's years of schooling	None	48.37	39.90	15.32	15.71
	1-5 years	41.07	22.99	5.98	3.79
	6-10 years	32.49	14.23	4.73	2.72
	O/Level	25.04	10.65	3.75	1.99
	A/Level	10.17	6.68	1.34	2.21
	Degree and above	17.26	0.30	3.39	0.0
Mother's current marital status	Married	29.55	14.37	4.69	3.12
	Widowed, separated or divorced	30.02	15.82	0.94	0.0
Mother has ever engaged in an income generating activity	Yes	30.00	15.07	5.49	3.05
	No	28.42	11.34	3.36	2.52
Contraceptive decisions made solely by mother	Yes	33.87	14.19	3.24	2.32
	No	28.69	13.2	4.71	3.00

Source: Calculations from DHS 2000 data, Gunawardena 2003: unpaginated

3.3.4 Spatial prevalence of malnutrition

Disaggregated statistics show that malnutrition is much worse in some sectors than others, for example the estate sector has by far the highest rates of malnutrition. Gunawardena suggests that some of the factors accounting for this may be;

“low wages, overcrowding in line rooms, bad living conditions, low standards of hygiene, and low levels of mother’s education.” (Gunewardena 2003)

In the estate sector low birth weight was recorded at 11.9% in 2003. This is a reduction on previous years, but Kandy (14.7%), Kegalle (14.5%) and Nuwara Eliya (14.4%) still report high incidences of low birth weight (PHDT 2005: 16). Growth faltering statistics are considered to be inaccurate as estate statistics are consistently far below the national average – leading to suspicion over the methods used for measuring growth in estate clinics.

The highest rates of *underweight* children are in the irrigated and rainfed dry zones. Severe *stunting* is worst in the rainfed dry zone and the South Western coastal low lands. Children in the Central province, Uva province and Kalutara, Hambantota, Puttalam, Anuradhapura and Ratnapura districts are more likely to be underweight than children in Colombo. Children in Southern, Sabaragamuwa and Uva provinces and Gampaha, Matale, Nuwara Eliya, Puttalam and Polonnaruwa districts are more at risk of wasting.

Table 3.9: Child malnutrition rates by zone, 2000

Zone	Moderate or severe malnutrition %		Severe malnutrition %	
	Weight for age	Height for age	Weight for age	Height for age
1 Colombo Metropolitan	18.2	7.4	4.02	1.7
2 Colombo feeder	20.2	10.8	2.49	2.48
3 South Western coastal low lands	28.9	14.4	3.82	4.15
4 Lower South Central excluding estates	30.6	12	3.58	2.6
5 South Central, estates mainly	37.8	19	5.74	2.81
6 Irrigated Dry Zone	32.2	13.8	6.92	1.39
7 Rainfed Dry Zone	36.9	15	8	4.26

Source: DCS 2002(a) and calculations by Gunawardena 2003: unpaginated

There is a high prevalence of underweight children in the Northern and Eastern districts, particularly Ampara and Batticaloa.

Table 3.10: Percentage of children stunted, wasted and underweight in the North and East

Background characteristic	% Stunted	% Wasted	% Underweight
District			
Jaffna	15.8	13.4	35.7
Mannar	20.0	17.4	36.9
Vavuniya	17.3	15.2	31.1
Batticaloa	24.7	14.4	38.2
Ampara	16.9	16.9	37.6
Trincomalee	15.0	16.3	34.0
Sector			
Urban	15.7	11.0	26.3
Rural	19.0	16.6	38.7
Sex			
Male	17.6	15.7	35.3
Female	19.3	16.6	38.7
Age Group			
03-05 months	3.4	2.6	4.2
06-11 months	6.7	6.6	15.0
12-23 months	19.6	21.4	40.8
24-35 months	15.2	16.5	37.2
36-47 months	20.3	17.0	43.1
48-59 months	25.5	14.0	39.4
All children	18.4	15.5	36.4

Source: DCS/UNICEF 2004:117

Further information for the North and East is also available from a baseline survey carried out in July and August 2003 before a WFP supported Food for Education programme started (Kaufman 2003). The survey was conducted in the Northern and Eastern Province and a border district with children

between 5-7 years old. 41.8% of households sampled had access to a decent toilet. 31.2% had access to a protected water source, 62.9% used water from open wells, and 4.7% used natural water sources such as streams.

The results show high levels of wasting (30.3%), underweight (50.8%), stunting (26.7%) and both stunting and wasting together (10.1%). Girls fared better than boys:

Table 3.11: Percentage of malnourished children by gender

	Stunting	Wasting	Stunting & Wasting	Underweight
Girls	24.7%	28.9%	8.1%	44.7%
Boys	28.7%	31.7%	12.2%	57%

Source: Kaufman 2003:1

The sample studied showed much higher rates of all characteristics than for the rest of the country. 40.8% of children were diagnosed as anaemic, with worse rates among the younger children. Boys were found to only be taking in 71% of the Sri Lankan Recommended Dietary Allowance, and girls only 69%. Intake of calcium, Niacin and vitamin C were below RDA standards.

Table 3.12: Percentage of malnourished children in sample compared to national rates

	Stunting	Wasting	Underweight	Anaemia
Girls	26.7%	30.3%	50.8%	40.8%
Boys	17%	14.9%	30.8%	16.3%

Source: Kaufman 2003:2

Note: The age range for national statistics was wider, 5-9 years. This may explain some of the differences but is not sufficient to explain the extent of the wider discrepancies.

3.3.5 Food security

“In Sri Lanka, the average per capita energy intake per day is 2,078 kilo calories. The average per capita energy intake per day for households identified as ‘poor’ is reported as 1,778 kilo calories, while that for ‘non-poor’ households is 2,185 kilo calories. ‘Poor’ households in the urban sector have the lowest per capita energy intake. The recommended per capita energy intake is 2,200 kilo calories per day.” (Ministry of Healthcare and Nutrition 2007: 7)

Whilst food security at a national level may be adequate, this does not guarantee that all households have physical and economic access to the right types and quantities of food, and the quote above illustrates that poorer households tend to be vulnerable to food insecurity. Sri Lanka does not generally suffer from acute food insecurity, but some areas are vulnerable to poor distribution or scarcity of certain food items. There are three main types of food vulnerability which affect food security:

- Conflict-related vulnerabilities
- Market-related vulnerabilities
- Environment-related vulnerabilities

These vulnerabilities were examined in a study on community food security carried out by De Silva, Weeratunge and Iburguen in 2002, covering the Central, Dry and Conflict zones². This study reveals more about food practices in different areas, and how different groups cope with lack of food. The study found that food *availability* and *supply* is not the main problem in most areas, apart from the Conflict Zone where supply is less predictable. For the most vulnerable families the main issue is purchasing power – if they had the resources they would be able to access food, but purchasing power has decreased in all three zones due to increases in the price of food. This has become a greater problem since the study was carried out, with high rates of inflation in 2006 and 2007 pushing up the price of basic foodstuffs.

In the Conflict Zone food insecurity is a particular problem due to decreased food production, restrictions on the flow of goods from outside and disruption to social and physical infrastructure. This food insecurity has bred a dangerous dependence on food rations distributed by relief agencies which can affect communities' ability to cope independently when agencies withdraw. The escalation in the conflict and related displacement over 2006 and 2007 has exacerbated this situation, and a recent report (May-June 2007) carried out by UNOPS in the Vaharai Division of Batticaloa found that 74% of families who had returned following displacement were eating less now than before they were displaced (UNOPS 2007: 6). 33% of families also stated that the major risk now facing their children was not having enough to eat (*ibid*: 5).

² Dry Zone – Moneragala, N.E. Matale, Polonnaruwa, Anuradhapura, Hambantota, Ampara
 Conflict Zone – Trincomalee, Batticaloa, Jaffna, Vavuniya, Mannar, Mullaitivu, Puttalam
 Central Zone – Ratnapura, Kegalle, Nuwara Eliya, Badulla, Kandy

Rates of illness had also risen, with 30% of children suffering from diarrhoea, 27% from skin infections or rashes, and 6% from respiratory illnesses.

In the Dry Zone, problems are caused by a lack of land, water shortages, pest damage to crops and conflict-related disturbances in border villages. In these areas irrigation was considered to be the main priority to ensure that farmers were able to produce more food.

Acute food insecurity is not common across the zones, with most households managing to eat three meals a day. Households in all zones said they cut the number of meals down during times of scarcity, usually seasonal, although the number of households eating fewer meals or going hungry in the Conflict Zone is much higher. However, most households have poor nutritional intake, even if they are eating three meals a day. The predominant food is rice with vegetable curries, protein-rich food is only consumed when available and if financial resources allowed. If households cannot afford rice they substitute with a starchy vegetable. In the Dry Zone the substitution is mainly maize, and in the Conflict Zone mainly wheat flour based food such as bread. In the Central Zone this is usually jak or yams:

"Sometimes we only eat jak for days. Our children cry refusing to eat jak because they have been eating it for so long and can't see it anymore." (Kegalle, De Silva et al. 2002: 23)

Focus group discussions revealed that most women know what food is nutritious for children, citing milk, eggs, meat, fish, greens and fruit. However, they stated that they did not have the resources to give such food to their children.

"At the clinic mothers are told to give Anchor milk but there is no money so we have no choice but to provide the adult meal." (Vavuniya, ibid: 23)

Other key informants interviewed, however, stated that many households simply did not make the effort to have a more nutritious diet. Most could grow nutritional foods in their home gardens with some effort, and many wasted income on non-nutritious snacks for children and alcohol and cigarettes for the adults (*ibid*: 23).

Sanitation issues and access to clean drinking water are an issue in these areas and contribute to sickness which is a key factor in malnutrition.

"In general, food security in vulnerable communities is affected by utilisation... utilisation is clearly linked to access and the lack of purchasing power, especially in terms of child nutrition. While there is some possibility of increasing the capacity to utilise financial resources more effectively to provide households with more nutritious food, a corresponding increase in purchasing power is far more important." (*ibid*: 26)

The type of households which are vulnerable to food insecurity are ones that rely on casual wage labour. Those who had income from a reliable, stable job such as a government position were the most secure. The ratio of income earners to number of people in the household is also a key factor in insecurity. If a household has many workers to dependents, even if they are casual wage labourers, they can be considered secure. Households which have more than one source of income are the most secure:

"If a family has someone in the Middle East, is also receiving Samurdhi, has a small business and also does wage labour they are in a satisfactory situation. Those families that depend on casual wage labour or on this and Samurdhi are poor and have food problems." (*Arachchikattuwa, Puttalam, ibid*: 27)

Most households questioned relied on support from friends or relatives if they had difficulties accessing food. In the Dry Zone more people borrow from friends or relatives (62%) than from shops or money lenders (57%), whereas in the Central Zone both practices are equal (71%). In the Conflict Zone borrowing from shops and money lenders (73%) is more common than borrowing from friends and family (64%). This may reflect the breakdown in communities due to displacement (*ibid*: 21).

3.3.6 Intra-household food distribution

In all communities surveyed by De Silva *et al.* focus group discussions showed that women eat last in the household, and they eat less, and food of a lower quality. If there is food scarcity this problem is even worse. Children and husbands are prioritised over women, the priority being different in different areas. In the Conflict Zone 72% of households claimed to feed children before men. In the Central Zone 46% of households prioritised children as compared to 39% which prioritised men. However, in many cases it was also reported that male children were given food before female children. In the Dry Zone 44.3% of households prioritised men as compared to 39.2% which prioritised children.

"My husband has to be given before me. That is the culture." (Women's focus group discussion, Arachchikattuwa, Puttalam, ibid: 27)

"Wives are at home and they do not do so much hard work. Husbands have to work hard to run the family so they should be given first preference." (Women's focus group discussion, Arachchikattuwa, Puttalam, ibid: 28)

Justification for these practices fitted into four main reasons:

- Tradition and custom
- Male breadwinners have more physically demanding jobs
- Children can't wait and need food to grow
- Women can suppress appetite and are accustomed to being hungry

These practices would tend to affect adolescent girls rather than infants. Looking back to statistics on malnutrition, overall the percentage of female underweight children is only slightly higher than the percentage of male underweight children. However, in certain age groups there is a greater proportion of severely malnourished girls compared to boys. Amongst those children who are severely malnourished, girls suffer more stunting than boys between the ages of six and 47 months (Gunewardena 2003: unpaginated).

Food taboos and traditional cultural eating practices also affect people's diets. Animal protein is not eaten in many households, particularly beef and pork. However, eggs, chicken and fish are consumed when income allows. It is traditional practice among Sinhalese families to restrict certain foods for adolescent girls as they are thought to be bad for future health, such as meat and oily food. Pregnant and lactating women are also restricted from eating certain 'heating' foods, including some meats, vegetables and fruit such as brinjal, tomatoes, pineapple, papaya and mango. In the Dry Zone some Sinhalese communities also taboo certain foods which are rich in protein such as dark tuna fish, game, and meat. However, pregnant women are encouraged to eat dried fish, pulses, greens, fruit and milk (De Silva *et al.* 2002: 24).

Mothers' nutritional status has a strong bearing on the health of the child, and underweight children are likely to suffer poor health, vulnerability to infections, and a propensity to mental and physical retardation. In female

children malnutrition can lead to a tendency to anaemia in later years, which if experienced during pregnancy can affect the health of the unborn child, thereby contributing to a vicious cycle of malnutrition and ill health.

3.3.7 Malnutrition and the tsunami

The massive population displacement, loss of natural food sources and exposure to additional environmental risks such as inadequate water supply, sanitation and hygiene following the tsunami greatly increased the risk of malnutrition, particularly amongst women and children. Although large scale health problems were avoided, there is evidence that malnutrition rates increased dramatically temporarily in some areas, and continued to remain high in other areas, primarily the North and East, where reconstruction and rehabilitation processes have taken longer and people have remained in camps. A UNICEF study undertaken a year after the tsunami found that instances of underweight, stunting, and wasting in children increased after the tsunami (UNICEF, 2005a: 21). However, the incidence of diarrhoeal disease in tsunami affected children reduced from 17.6% in January 2005 to 10.4% in May 2005, and acute respiratory infection dropped from 69.2% to 41.3% (UNICEF, 2005: 12).

Another report on nutrition conducted in May 2005 (based on January 2005 baseline data) by UNICEF, MRI and the Ministry of Healthcare and Nutrition found that the nutritional status of children displaced by the tsunami had improved slightly since January, but the figures were still high – mainly due to poor dietary intake and disease prevalence. 16.8% and 37.6% of children living in the camps suffered from wasting and were underweight compared to the baseline figure of 16.1% and 34.7% respectively. Children living in camps showed the highest prevalence of wasting between 12 and 23.9 months of age. The prevalence of stunting was also significantly higher in children living in camps (20.6%) and children affected by the tsunami but not living in camps (20%) than children not affected by the tsunami (12%). The prevalence of underweight showed a similar pattern. Boys living in the camps appeared to suffer a higher prevalence of wasting than girls (UNICEF, MRI & MHN 2005: 16-19).

A Save the Children study on the tsunami-affected area of Trincomalee (2005) found that a recurring theme was the continuing shortage of food and lack of quality nourishment after the tsunami. In most families, women

said that they sacrificed their meals so that children and men were able to eat reasonably. These statistics and qualitative evidence of malnutrition highlight the extreme vulnerability of those affected by the tsunami, and the longer-term difficulties of returning to a state of nutritional independence. Many families lost farmland and home gardens as well as other livelihood opportunities, and re-establishing this regular income and access to food was a major difficulty. Although nutrition levels have improved in tsunami affected areas, the loss of vital nutrients and vitamins during that period may have longer term deleterious effects on children, making them more vulnerable to nutrition-related problems in the future.

3.4 Conclusion

While great progress has been made in the area of nutrition, Sri Lanka still suffers from poor maternal nutrition, low birth weight, under nutrition in children under five years and micronutrient deficiencies in all population groups. In addition to this there are issues of household food insecurity in some areas, and low levels of knowledge about adequate and appropriate nutrition. As Sri Lankan food and lifestyle habits change, there is also the growing risk of 'over-nutrition' and the chronic diseases associated with obesity.

The government's action plan on nutrition (Ministry of Healthcare and Nutrition 2007) highlights what has been achieved so far through government and NGO interventions, but stresses that efforts have not been adequately designed or coordinated to have maximum impact. Interventions such as the Thripasha supplementary food programme for pregnant mothers and undernourished children, and subsidy or food stamp programmes have often failed to target those most in need with resources going to groups who are not poor or necessarily at risk.

Interventions for children of school-going age are fairly numerous, including medical examinations at school and some school feeding programmes, although the latter are not comprehensive and run by different organisations including the Ministry of Education, Provincial Councils, NGOs and UN agencies. Without a coordinated effort these are unlikely to have a sustained impact. For older children there are few interventions to address nutrition issues. In some districts iron tablets and Vitamin C tablets are distributed once a week to girls over 10 years old (Ministry of Healthcare and Nutrition 2007:9).

Nutrition education has not received enough attention, and even at clinics where it is available, few people stay long enough to learn much. Mothers who have travelled long distances to get to the clinic usually leave as soon as treatment has been offered, and do not have time to benefit from any information offered regarding nutrition.

The Ministry of Healthcare and Nutrition's Action Plan lays out ten main policy objectives which it has prioritised:

- 1) Promotion of feeding among infants and preschool children
- 2) Promotion of nutritional status among pregnant and lactating mothers
- 3) Promotion of nutritional status among school children and out of school adolescents
- 4) Promotion of nutritional status among youths, adults and elderly
- 5) Food and nutrition education
- 6) Nutrition care in illness
- 7) Monitoring and surveillance of nutritional status of the population
- 8) Food security
- 9) Food safety
- 10) Promotion of nutrition research

Amongst the many activities listed there are plans to incorporate nutrition education into the school curriculum much more substantially, improve the midday meal programme, promote healthy eating and lifestyles and establish an integrated national nutrition surveillance system. However, the action plan as it stands lacks any level of detail about implementation strategies for the various activities listed. The activities suggested would require a great deal of extra personnel and resources, and the time frames are very short. In order for the wide range of activities suggested to be effective alliances between government and non-governmental agencies need to be coordinated and mutually reinforcing rather than working independently as is often currently the case.

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CHAPTER 4

Education

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4.1 Introduction

Education is one area in which Sri Lanka has famously excelled, making a significant impact on the country's development. Over the last fifty years a free education policy and a national commitment to the value and benefit of education has led to some of the highest literacy and enrolment rates in the region. Free education from pre-school to university was introduced in 1945 and aimed to eliminate differences based on families' ability to pay for education. Adult literacy is 92.1%, and combined gross enrolment rates for primary, secondary and tertiary education stand at 65%, with net enrolment in the first grade at 97% (World Bank 2005: 2). However, despite these headline figures raising Sri Lanka's Human Development Index ranking and painting a picture of a well educated nation, there are fundamental problems in the system which is now outdated, and there is evidence that a significant proportion of children are not benefiting from a decent, complete education.

Despite high initial enrolment rates, around 18% of children fail to complete Grade 9, demonstrating relatively high levels of drop out (World Bank 2005: 2). UNICEF (2001) estimated that between 80,000 – 100,000 children between 5-14 years do not attend school. The children who fail to complete schooling are mainly those from poor and marginalised homes in poor geographical areas, including the rural sector, conflict affected areas, border villages and the estate sector. Despite the provision of free education, poor households may not be able to pay for the extra essentials for school such as books, bus fares, meals etc. Additionally vulnerable groups include children who suffer from a disability, and children left behind by migrant mothers where the father may not be managing the household income well.

Enrolment and learning levels are lowest in the conflict affected areas, which have been seriously affected by damage to infrastructure as well as a lack of skilled teachers. UNICEF and the World Bank estimated in 2003 that the areas affected by conflict needed approximately US\$140 million to reconstruct education infrastructure. This figure is now out of date since the tsunami, and the recent escalation in the conflict has restricted access to undertake assessment and improvements.

There are also issues with quality of education for those who do attend. Although 90% of children finish primary school less than 20% reach mastery in numeracy, literacy and life skills (NEC 1995: 52). Teaching standards are

low in many rural areas, with the government finding it difficult to recruit trained teachers. While the ratio of pupils to trained teachers has improved, the ratio of pupils to *graduate* trained teachers remains high - the highest rates from the 2005 School Census were recorded in the Trincomalee District at 142 pupils per graduate trained teacher, and in Nuwara Eliya District at 132 pupils per graduate trained teacher (Ministry of Education 2007).

Young people are leaving school with few marketable skills as the curriculum has not been updated to reflect the skills young people need to enter the job market in the 21st century. Efforts are being made to increase the availability of vocational training, but many young people have to resort to expensive private sector training provision. Tertiary education enrolment rates are low, with insufficient places available for young people who wish to further their education.

A good education can often be a passport to moving a new generation out of poverty, so denial of such an asset can be considered a serious deprivation. It is also evident from statistics on health, nutrition and child abuse that children with more educated parents are less likely to be vulnerable to problems in these areas, therefore educating the next generation can have a knock-on impact on a variety of socio-economic indicators. Investment in education leads to many different economic and social benefits, including higher earnings, better prospects, increased social mobility, higher levels of female workers, and, importantly, better family health and child nutrition levels. The social rate of return to education is high in Sri Lanka, especially at the compulsory basic and senior secondary education grade cycles. Among men, social rates of return to education are 20% at the senior secondary schooling level and 15% at the compulsory basic education level. Among women, social rates of return to education are 20% at the compulsory schooling level and 18% at the senior secondary schooling level (World Bank 2005:3). This is a strong incentive for further investment in education at primary and secondary levels.

This chapter will examine the structure and quality of the modern education system, going on to look at factors outside of the school system which contribute to lower levels of achievement - highlighting the impacts of deprivation, exclusion and vulnerability.

4.2 The education system and results

Major reform of the education system was announced in the late 1990s, with ambitious aims to change teaching practices, target underserved areas with qualified teachers (mainly in the rural and plantation sectors), improve school management practices and infrastructure, improve English teaching, and put more focus on vocational and practical learning skills, better provision of career guidance. The reforms began with primary education in 1999, and moved up through the grades gradually. It is still early to measure impacts of the reforms, but already it would appear that resourcing them is proving to be a challenge. The education system consists of the following levels:

- Primary Level - 5 years - Grades 1-5
- Junior Secondary Level - 4 years - Grades 6-9
- Senior Secondary Level (O' Levels) - 2 years - Grades 10-11
- Collegiate Level (A' Levels) - 2 years - Grades 12-13

There are three 'types' of schools, with Type 1 split into three:

- Type 1A/B school with classes up to grade 13 including A' Level Science Stream;
- Type 1C school with classes up to grade 13 but without A' Level science stream;
- Type 2 school with classes up to grade 11
- Type 3 school with classes up to grade 5

The administrative management structure for education was decentralised following the establishment of the Provincial Council System in 1987 and is split into the following five layers:

- The Ministry of Human Resources Development, Education and Cultural Affairs as the Line Ministry
- The Provincial Ministries / Departments of Education
- The Zonal Education Offices
- The Divisional Education Offices
- Schools (Provincial and National)

In addition to the Cabinet Ministry there are two new non-cabinet level Ministries, the Ministry of School Education and Ministry of Tertiary Education and Training.

Education is provided free of charge from primary through to tertiary (graduate) level but the education system has come under attack over the last two decades as it has failed to keep up with demand (particularly in tertiary education where demand far outstrips supply (13,000 places are available in the public university system per year), and has failed to modernise the curriculum sufficiently to prepare students for work and life in the 21st century. Skills are particularly lacking in English language fluency and IT as well as softer skills such as good team work, problem solving, creativity, flexibility and adaptability (Rupasinghe 2003). Unemployment levels amongst educated school leavers and graduates are high as they struggle to find jobs which they are suitably qualified for.

4.2.1 Primary schooling

The trend for sending children to pre-schools has grown at a very fast rate in recent years, with the number of pre-schools standing at between 11,000 and 12,500 in 2003 (World Bank 2005: 10). 80% of these schools are privately managed. The government has set a target of reaching 80% attendance at pre-schools by 2008; by 2001 attendance had already reached about 60% of the eligible population. This rapid growth now needs to be complemented by more focus on appropriate training for teachers and curriculum development.

The primary school system was first to benefit from reforms, and following the Five Year Plan for Primary Education (2000-2004), the Medium Term Primary Education Plan (2005-2008) is currently in effect. The key areas covered by the plan are (Seel 2005):

- The extension of educational opportunity
- Quality improvement in education
- Professionalisation of teachers
- Management of education and the provision of resources

The primary level sector remains seriously under-funded and there is inequity across the system in the way funds are allocated. A detailed study by Seel (2005) into the resources available in the primary sector found that there is still dissatisfaction with the situation of education on the ground, and that even basic resources and facilities are lacking in many schools, particularly Type III schools (only up to grade 5). The study covered 179 schools in Central, Uva and North-East Provinces and both parents and children were consulted

(around 3,600 children). Within particular geographic areas, children and parents perceived that there is considerable inequality in resourcing and quality of provision between the local (neighbouring) schools. Additionally, parents from poorer socio-economic backgrounds commented that they felt there has been an increase in the financial contributions they are expected to make to their children's education for essentials. Children are expected to pay for their own pencils and exercise books. The study found that in some schools many children did not have any materials due to the excessive cost. This puts poor children at a disadvantage, and also puts schools in poorer areas at a disadvantage as they cannot expect pupils to provide the same inputs as in better off areas, nor do they have the same level of access to donations or political influence and patronage.

Most children were found not to have access to enough textbooks at the right time, particularly in the North-East. This is due to lack of sufficient provision rather than distribution, particularly in areas where the language is a minority one. Library books were also lacking; in the North-East 17% of schools had no library books available. Lack of library books is put down to a lack of funding and poor management and prioritisation. 75% of schools did have books, but these were not freely available to children.

Smaller schools were found to be very underresourced (particularly Type III) and in the North-East many schools had been stripped of material resources during the conflict. In Mannar educational zone only 17% of sample schools had a computer and none were available for students' use (Seel 2005: 9). Poorer schools suffer from lack of electricity or interrupted supply which prohibits them from using more modern equipment.

As well as issues with materials, acute problems were found with infrastructure. In Killinochchi Zone some schools still did not have buildings at the time of the study. This and another two zones (Wattegama and Wellaya) have many temporary buildings, and in seven out of the nine zones risky and unsafe buildings were found. One of the aims of the reforms was to ensure schools have additional resource buildings, for libraries, sports or language centres for example. Few schools were found to have these yet – particularly smaller Type III schools, and schools in the estate sector. In the majority of schools in five zones schools did not have any school playground. This was a particular problem in the North-East where security issues mean that children are often kept inside all day. No plantation schools had play areas and few had playgrounds (Seel 2005: 13).

Around 30% of schools surveyed did not have useable toilets (Seel 2005: 12). Of those schools that did have toilets, around 16% did not have separate facilities for boys and girls, a figure as high as nearly 60% (Seel 2005: 12). Over 80% of the toilets were unclean. Over half the schools sampled did not have access to safe water, particularly bad in the North-East and in Moneragala (rural and plantation schools worst off).

In terms of human resources the overall situation in schools was assessed to be fairly good. Most schools sampled classified their situation as 'good' or 'very good'. When looking at the qualifications of teachers working in these schools, the study demonstrated that some improvements have been made; 60% of schools scored over 80% on a suitability scale. This could be attributed to the policy of requiring all new teachers to work in rural areas. However, almost a quarter of primary school teachers were found to be unsuitably qualified (Seel 2005: 16). The quality of teacher was seen to go down in the lower grade classes. Specialist teachers are still in short supply, particularly English language teachers. This was identified as a serious problem by students, teachers and parents as English is perceived as very important for future opportunities.

Subject knowledge and teaching ability were also issues, with many teachers not able to implement the new curriculum and new learning centred teaching methods. This is closely correlated with issues of under-qualified teachers, poor physical resources available in schools and inadequate supply of teachers for the subjects being taught.

Grade Five teachers in the sampled schools were also assessed for their commitment and competence, looking at attendance, punctuality, class management, teaching skills and communication with students. Two thirds of teachers scored over the median score of 7, but this leaves a third of teachers who are considered to have significant weaknesses by pupils – across all districts. The most important factor for pupils was the attitude of teachers.

“Children highly valued teachers who show ‘affection and attention’. Many study informants pointed out that some children suffer in their learning because of harsh punishment, or because of dismissive attitudes towards less able students.” (Seel 2005:17)

Analysis of the study results provides a picture of the schools which are most disadvantaged, geographically and by school type. Overall, primary schools

continue to be the disadvantaged in funding terms compared to secondary schools, receiving 25% of funds despite accounting for over 40% of students (Seel 2005:24). The report recommends that primary education be given priority.

“Equity implies putting primary education first, since the very poorest children are not yet getting beyond this stage.” (Seel 2005:26)

At a specific level, Type II and particularly Type III schools are also disadvantaged in the system, these are schools usually found in rural areas. Rural schools performed worse than urban schools, but plantation schools were the worst performers. However, within zones there was a great variation in performance, for example some schools in urban slum communities or in coastal communities experienced as many problems as more remote schools. Geographically, the North-East province was worst off.

The National Education Commission carried out tests on a sample of pupils in 2003 to determine achievement levels, with worrying results for pupils coming towards the end of the primary school system, (Grade 4). They found that in first language (Sinhalese and Tamil), pupils that reached a level referred to as ‘mastery’ of their mother tongue language is only 37%. Children fare worst at writing (28%) and syntax (30%), and one in three children does not even have a good command of the spoken language. In mathematics levels of mastery are 38% with poor understanding of concepts and problem solving. The level of English language skills is extremely low with only 10% of primary children achieving mastery. Only 1% of children have sufficient English writing skills and two out of three children lack basic vocabulary for speaking (World Bank 2005:9). These low results do not provide a good foundation for children moving into the secondary system.

4.2.2 Secondary education

Less detailed information is available on the resources available to secondary schools and the specific issues that they are facing. However it is clear that concerns are also focused on the quality of teaching and results in the secondary system. A recent news investigation highlighted the severe shortage of suitably qualified teachers and the poor levels of pass rates at O’ and A’ Level exams (Weerasinghe 2007). The lack of teachers has led some unqualified graduate trainees to be authorised to learn whilst teaching, and even amongst qualified teachers few are conversant in more modern methods and techniques.

Teacher shortages are particularly acute in rural areas. Teachers should serve in different regions throughout their career, but the trend is for urban schools to be overstaffed, whereas rural and estate sector schools find it difficult to attract staff. Data on the poorest 119 DS Divisions (DCS 2006) highlights the percentage of teachers who are *untrained* working in some areas;

- Walapane, Nuwara Eliya – 13.3%
- Lunugala, Badulla – 13.3%
- Eravar Pattu, Batticaloa – 14.5%
- Navithanveli, Ampara – 14.7%
- Irakkamam, Ampara – 17.7%
- Gomarankadawala, Trincomalee – 18.9%
- Kalpitiya, Puttalam – 19.1%
- Hanguranketha, Nuwara Eliya – 21.1%
- Wanathavilluwa, Puttalam – 21.4%

Examination results are relatively low, despite high literacy rates. The latest results from 2006 show that only 49% of students passed the General Certificate of Education Ordinary Level, and this was the highest rate achieved in the recent past. Around 22,000 students (8.5%) did not pass a single subject. In 57 Educational Zones over 50% of candidates failed, and in around 150 schools not one candidate passed the GCE. The all-island pass rate (including about 20% Simple Passes in each case) in critical subjects were: English 37%, Mathematics 43%, Science 48% and Sinhala 80%. The best GCE O' Level results are in the Western Province (48%), whereas the North-Eastern, North-Central, Uva and Central Provinces suffer from much lower pass rates of around 31%-32%.

Ariyaratne Hewage, Secretary to the Ministry of Education, acknowledged the urgent need to improve teaching standards.

“We can't be happy with the 48.7% pass rate. We need to improve the performance standards in Mathematics, English and Science which are very low today,” he says. “This is because of the quality of teachers. We don't have enough trained professional teachers. We need to improve these areas particularly.” (Weerasinghe 2007)

GCE A' Level pass rates are on average 56% which is worrying as it is the higher level students who pursue their education beyond O' Level, so they should be achieving good results. However, the fact that pass rates at A' Level are similar across the country, reflects this variable that only more able students are allowed to continue to A' Level standard.

For many children going through the secondary system, this will be their last opportunity for training and education to prepare them for the job market. However, the outdated curriculum leaves high school graduates with few marketable skills and little choices. The private sector has many vacancies for those with the right skills, but these are skills which graduates are often not getting from their education in Sri Lanka. As well as technical skills such as IT, and language skills, students also require more preparation of soft skills for the modern world of work.

“For all children, the examination-oriented curriculum in Sri Lanka schools and the competitive ethos it engenders in both the primary and secondary education have overshadowed the function of education in promoting creativity, critical thinking, flexibility, co-operation, appreciation of national unity and cultural diversity, and values.” (Jayaweera and Goonesekere 1993: 6)

4.2.3 Further education and training

According to World Bank figures in 2005, enrolment in tertiary level education stands at around 11% of the eligible population, a comparable figure to similar countries in the region³. Around 6% are engaged in courses outside the public university system and in the vocational education sector, following subject such as IT, management, accounting, marketing, law, business and finance, or are at overseas universities. Domestic, public university enrolment is approximately 3%, and advanced technical education enrolment about 2%. This means that around 70% of tertiary education enrolment is in the private sector, and the balance in the public sector. The Ministry of Vocational and Technical Training oversees all the major government vocational training providers and National Vocational Qualifications.

³ A recent news report suggested that only 5% of students who pass GCE A/L are admitted to state universities in Sri Lanka annually which is the world's lowest intake ratio, but this statistic was not sourced. (Lanka Business Online 2007)

There is a severe shortage of places for students who wish to attend university, and even those who are successful and obtain marks above the 'cut off' decided for that year often have to wait more than a year following A' Levels to be taken into university. However, it is interesting to note that *social* returns on tertiary education are much lower than primary and secondary returns (11% for men and 10% for women, World Bank 2005:4) with the main returns going to *individuals* instead, with private returns of 26% to men and 24% to women. This suggests that public investment is better prioritised in the primary and secondary sectors. Currently, social benefits from primary and secondary education are well spread across different sectors of the population, but benefits from tertiary education are disproportionately going to the highest economic and social classes.

4.3 Important variables in educational attainment

There has been a great deal of research on the variables *outside of the school environment* which affect children's educational achievement, with models citing other factors such as; parental background and achievement, the physical home environment, personal characteristics, number of children in the house, health, attitude and motivation, reading outside school, occupation and income of parents, parental visits to school, parents' expectations etc.

Many studies draw different conclusions about the key variables, and the interdependence between variables, but a significant number of studies have all found a clear correlation between student achievement and parental education levels. The link is significant in terms of parents' encouragement and expectation of children's educational activities, the extent to which they contribute family resources to children's education, and also in terms of their likely socio-economic status (better educated parents are likely to have higher incomes) which affects the home environment.

However, a recent, large scale NEC study (De Silva *et al.* 2005) found that while parental achievement and socio-economic characteristics were important, the school environment was by far the most significant variable. Therefore as a precursor to this section, one should be wary of placing too much emphasis on the child's learning environment at home when a great deal can be achieved if the school learning environment is of a high standard.

4.3.1 Household factors

This section focuses on the closely interlinked variables of health, socio-economic background and the education levels of parents. The variables are almost impossible to consider in isolation since they are so dependent upon each other. Parents who are more educated are more likely to have higher incomes, and are also more likely to have families with higher health levels. Similarly, better health is correlated with higher socio-economic status, even in parents with lower education levels. The three interlinked variables are all significant in terms of the impact on children's attendance and achievement at school.

Whilst there is a great deal of anecdotal evidence on the links, the 2005 National Education Commission study, *Health for Education* (De Silva *et al.* 2005), has the most up to date and rigorous statistics on the relationship between these variables and education, therefore this section is drawn mainly from this study. The study used a specific test set by the National Education Research and Evaluation Centre (NEREC) in First Language (Sinhala or Tamil), Mathematics and Second Language (English). Pupils were also examined for health and nutrition levels, and households were visited for a socio-economic survey.

The achievement of children in the NEREC tests varied widely (a score of 80% or higher was required to have achieved mastery of a subject);

- 48.5% attained mastery in Sinhala (First Language)
- 42.3% attained mastery in Maths
- 25.6% attained mastery in Tamil (First Language)
- 15% attained mastery in English

In relation to household income, 66% of parents spent 5% or less of their income on expenses related to their child's education, 91.2% spent 10% or less. Poor families spent a higher proportion of household income on education.

The amount of time that children spent studying or reading at home was closely correlated to parental education levels and to parental income. Most respondents said that they discuss schoolwork with children regularly, and a majority of mothers (68.8%) help their children in their homework. Only around a quarter of children received help from their fathers. Parents who

had education to at least GCE O' level were significantly more likely to help their children in their homework, and more likely to have books at home.

- 53% of children spent more than 6 hours a week studying at home, and 32.3% spent over 6 hours a week in extra tuition classes. Only 26.5% did not attend any extra tuition classes.
- 39.4% of children did not spend any time reading at home and only 18.8% spent more than 3 hours a week on reading. Girls spent more time reading than boys.
- 44.5% of households had up to 10 books which children could read, 35.1% had none at all.

Test results in all subjects demonstrated a positive correlation with the number of books available at home and the involvement and interest of parents in their child's education. The correlation was also significant between parents' education levels and their child's achievement in tests.

The study found that poor health was closely correlated to lower achievement in all subjects, particularly those who were ill enough to miss four or more days of school per month. Over 80% of pupils had attendance rates of over 80%; the average percentage of children missing school frequently due to illness was 15.4%. In state schools the percentage ranged from 10% on the Central Province to 20% in the Northern Province. In fact, attendance rates were found to be one of the most significant predictors of achievement,

“even after inclusion of household socio-economic variables, and the school, children who had over 80% attendance during the previous year were almost 4 times as likely to attain success compared with those who had less than 80% attendance.” (De Silva *et al.* 2005: 7)

What is important to note from this study is that whilst poor health factors were significant in children's achievement, when health variables were controlled for the socio-economic level of the household, they were no longer found to be significant. This demonstrates that there is not a simple cause and effect relationship between poor health and educational achievement, but that household factors are very significant. In the context of socio-economic characteristics and personal characteristics, parental educational achievement and regular school attendance were the most important factors. If household and school characteristics were controlled, gender became a significant factor with girls more than twice as likely to achieve mastery of

their first language than boys. Ethnically, children of Sinhala parents were more likely to achieve mastery of their first language than children of Tamil, Muslim or Malay parents.

Controlling for all variables, the statistical analysis revealed that the school environment is the main determinant of learning achievement, with regard to both first language and mathematics, overshadowing all other factors (De Silva et al. 2005: 6). This shows that **high quality schooling** can compensate for deficiencies and is the most important variable in achievement levels. However, the socio-economic context in which the child lives, and his/her personal characteristics are also important determinants of learning achievement, and health factors are critical variables that are associated with both learning achievement and the socio-economic context

4.3.2 Sectoral and ethnic variables

The NEC data (2005) referred to ethnicity as one factor in educational achievement, and other statistics cut along sectoral and ethnic lines do demonstrate clear differences, indicating that in some areas/groups children are more deprived of good educational prospects than in other areas/groups.

Sectorally, NEC results from 2003 (World Bank 2005: 9) highlight significant disparities in achievement between urban and rural areas. Mastery of the first language (Sinhalese or Tamil) in urban areas is 51%, but this falls to 34% in rural areas. In English language skills, 23% of children in urban areas achieve mastery, but in rural areas only 7% of children reach mastery. In mathematics, 52% of urban children attain mastery, while just 35% of rural children achieve the required level of competence.

A study by C. Gunawardena and S. Jayaweera of the Open University and Centre for Women's Research (Perera 2006) looked at the reasons for children not attending school in 22 districts from 6 different community types. The study found that 15.7% of children had never been to school, and 44.7% had dropped out (mainly in the 10-14 age group). 36% of those who had dropped out left before the end of primary school. 44.5% of children had missed school for more than 5 out of the 10 school days in the two weeks prior to the survey. The levels of non-schooling were higher amongst Sri Lankan Tamils and in the estate sector. Reasons cited by the authors for such high rates of absenteeism were:

Household factors

- Poverty and low income
- Indifference of parents
- Unstable family environment
- Chronic ill health
- Peer pressure
- Learning difficulties

School factors

- Refusal of schools to admit children who were poor or who didn't have a birth certificate
- Inadequate facilities for disabled children
- Harsh punishment
- Lack of transport

The fact that prevalence of absenteeism was higher in the estate sector implies that these factors are more prevalent for those living in the estate sector, who tend to have a poorer socio-economic background, and lower educated parents. These factors could also apply to other sectors, however the quality of education services in rural and estate areas is lower, there is weaker parental capability and support, and poorer opportunities for child activities that promote learning in the disadvantaged estate sector and some rural areas.

Average learning achievements also show high regional variations, with first language mastery varying from 23% in the North-Eastern Province to 51% in the Western Province. In mathematics levels ranged from 25% in the North-Eastern Province to 52% in the Western Province, and mastery of English language competencies varies from 5% in the North-Eastern Province to 20% in the Western Province. The Central, Uva and North-Central Provinces also tend to have low achievement levels in language and mathematics (World Bank 2005: 9).

The Central Province is an interesting case study as it contains a significant mixture of children from urban, rural and estate backgrounds. Disaggregated data within the Central Province reveals patchy and uneven results between districts, ethnic groups and sectors. There has been a recent increase in the

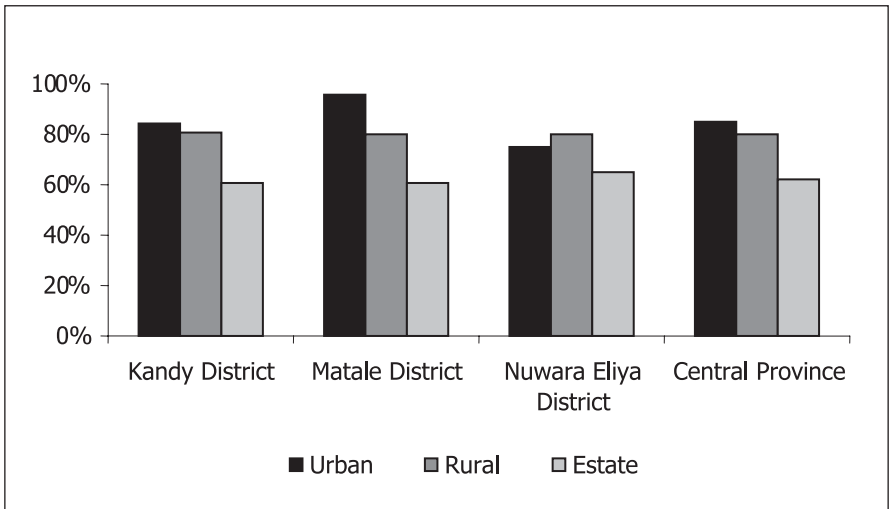
number of estate sector children enrolling and staying in primary education, however, drop-out rates in the district after junior secondary level are high. Nuwara Eliya and the estate sector have the lowest literacy rates in the country, and evidence suggests that facilities and teaching methods are particularly poor in the estate sector. Only 18% of children within the estate sector gain a secondary education (Weeratunge, 2003: 4). For parents in this sector, a high value is placed on education in order to give their children better employment prospects,

"We send them to school so that they won't have to suffer like us in the rain with the tea bushes in the hills. They can get jobs." Jayanthi, Nuwara Eliya District, Estate Sector (Weeratunge, 2003: 24).

Classroom studies have shown that the quality of teaching is of a low standard in the province, with teachers not planning lessons, disciplining students effectively or creating a school environment conducive to learning (Jayasena, 2000). Trained and graduate teachers are particularly lacking in the Nuwara Eliya district, as the government has found it hard to attract trained teachers to the area.

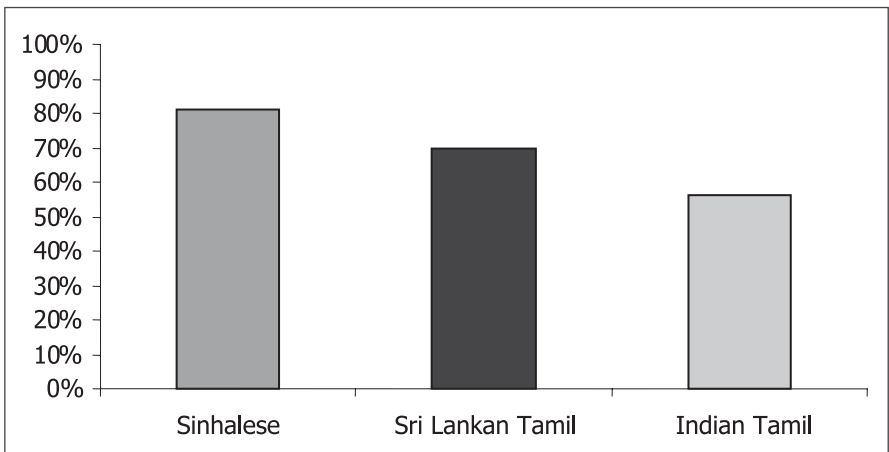
The Weeratunge study (2003) used its own literacy test to ensure that children could 'prove' their literacy rather than relying on their responses to the question of whether or not they were literate. The results in the figures below highlight the huge disparity between the sectors and between the different ethnic groups. It is important to note, however, that the high population of Indian Tamils in the estate sector mean that sector and ethnicity are closely correlated in this case.

Figure 4.1: Central Province 'proven' literacy rates by district and sector



Source: Weeratunge, 2003: 3, 4

Figure 4.2: Central Province 'proven' literacy rates by ethnicity



Source: Weeratunge, 2003b: 3, 4

Statistics from the National Education Research and Evaluation Centre (Perera & Navaratne, 2004) also highlight the very stark differences between Sinhala and Tamil medium schools (most schools in the estate areas are Tamil medium). In Tamil medium schools in the Central province only 19% of students have reached the expected level in their first language, as compared to 41.7% of those schooled in the Sinhala medium (*ibid*: 8). In mathematics and English as a second language there is also a large gap between the abilities of Tamil and Sinhala students.

Table 4.1: Percentage of children reaching expected level by teaching medium

Subject	Mastery in Sinhala Medium	Mastery in Tamil Medium
First language (Sinhala/ Tamil)	41.7%	19%
Mathematics	40.9%	17%
English as a second language	4.9%	1.5%

Source: Perera & Navaratne 2004: 8-19

4.3.3 Conflict affected areas

Education in conflict affected areas has been seriously impacted by the conflict and by lack of development and investment over a significant period. Some studies were undertaken following the Cease Fire Agreement in 2002, but these are now somewhat outdated. Assessment on the ground in certain areas is ongoing, but any assessment is liable to change rapidly in the current situation of increased conflict. The main issues, however, remain the same. Returning children to a normal education pattern is a priority in conflict affected areas. Children who have grown up in an environment of violence have experienced stress that can be reduced with regular good schooling and school-based psychosocial interventions. They can also look to a better future with higher educational achievement.

A study undertaken by the National Institute of Education and UNICEF in 2003 found that in conflict affected areas there were 162 non-functioning schools, 321 schools functioning in temporary sheds, and 199 schools that had only been partially constructed. These figures are now out of date and would have been affected by the tsunami, by reconstruction efforts following the tsunami, and by recent fighting. However, they illustrate the scale of the infrastructure problem. Lack of proper sanitation and safe drinking water in

schools is also a problem. The study estimated that 65%-75% of schools needed toilets, urinals and wells, in addition to school furniture is another problem. Children in some schools in Mannar learn sitting on wet sand, which affects their health. A recent report (May-June 2007) carried out by UNOPS in the Vaharai Division of Batticaloa found that parent's educational priorities were mainly related to infrastructure and equipment; e.g. desks, stationery, footwear, school buildings, transport, energy and water supplies. The second highest priority was teachers (UNOPS 2007: 10). One positive finding was that 94% of school-going children received schools supplies while they were displaced, affording them some sort of continuity.

Estimated dropout rates for the North East province are also much higher at 15.8%, compared to the 3.9% national non-enrolment rate. This drop-out rate is influenced by poor nutrition and health status, psychosocial problems, difficulty and fear of travelling to school, poverty and low motivation to gain an education. The latter problem is exacerbated by poverty as poor families often fail to see the benefit of education which will put a strain their financial resources. Lower educated parents see more benefit from supplementing their family income by employing children in jobs at home or outside. The value of education is not realised in a number of children and parents who see more lucrative employment prospects in foreign countries in jobs where little or no education is needed.

4.3.4 Gender

Gender bias in education is not as evident as in many other countries in South Asia; literacy and attendance rates are similar. The high priority placed on education in Sri Lanka has helped to ensure this. Girls tend to stay on longer in schools and achieve a higher level of education, partly to mitigate their increased vulnerability to unemployment when they leave compared to boys. Gunawardena and Jayaweera's study into drop-out rates (Perera 2006) found that the incidence of drop-out was higher among boys, but more girls than boys had never attended school at all. Boys' results continue to be lower than girls in examinations and this is an area which needs to be looked at more closely.

Table 4.2: Decline in illiteracy among youth aged 15-24

Youth Illiteracy Rate (%)				Percentage Decline	
Male		Female		Male	Female
1990	2001	1990	2001		
4	3	6	3	25	50

Source: World Bank, 2003 [WORLD BANK. 2003. *World Development Indicators 2003*. Washington, D.C.: World Bank.]

The social importance and benefit of educating girls is well documented. Women spend more time caring for children so their education levels have a greater impact on the next generation. In wage potential terms girls' economic returns to secondary education are higher than boys'. Boys benefit more from primary education than girls, but the inverse is true for girls (Herz 2006).

"Providing girls one extra year of education beyond the average boosts eventual wage rates by 13% to 18%." (Herz 2006: 1)

Despite equal access, there is some evidence of gender bias in the curriculum and in the way girls and boys are treated differently at school,

"Gender role stereotyping in the curriculum prevails as much as behavioural expectations and self-perceptions of educators, women and their families regarding 'culturally appropriate' courses. Policy level changes including policy analysis are woefully lacking in this regard." (CENWOR 2001: 2)

Jayaweera and Goonesekere also refer to this bias in their 1993 study,

"Curriculum developers should eliminate gender role stereotypes in educational materials and reflect them in concepts of gender equality and equitable sharing of responsibilities and tasks in the family, household and society." (Jayaweera & Goonesekere 1993: 300)

They recommend that more activities should be based on equal participation of girls and boys to encourage children to be exposed to a variety of skills and develop a range of abilities and aptitudes, and that teacher training institutions should include a gender sensitisation component in their curriculum.

4.3.5 Education in tsunami affected areas

One of the great achievements often quoted following the tsunami was the speed at which children living in tsunami affected areas returned to school, even if in temporary accommodation. Education was considered to be a vital part of restoring normality, and priority was placed on disrupting children's education as little as possible. However, the areas affected by the tsunami suffered a huge loss of physical and human resources in the education system. The number of educational institutions damaged or destroyed was:

- 182 schools
- 4 universities
- 3 technical institutes
- 13 vocational institutes

This impacted approximately 100,000 children. 94 schools were earmarked for relocation as they are situated in close proximity to the sea and therefore within the 'buffer zone' (Government of Sri Lanka 2005). A rebuilding programme is taking place, and the aim is to build new and improved educational establishments in all affected areas. Research by Save the Children in June 2006 revealed that over 70% of school children in tsunami-affected areas were still experiencing difficulties and shortages in educational provision. Schools in the Southern, Northern and Eastern provinces continued to suffer a lack of basic items such as furniture, books, water taps and sanitation as well as a shortage of teachers.

Children living in temporary camps were the worst affected in the aftermath of the tsunami, with many having to travel long distances to school, reducing their motivation to continue schooling. Neither the welfare centres nor the temporary schools had environments conducive to learning, and drop-out levels increased in tsunami-affected areas. Apart from displacement, one of the other main reasons cited for increased dropouts was the need for supplementary income in families which had lost livelihoods. Studies found that some children were undertaking menial labour, or taking on household chores in order to provide support to the family while parents sought supplementary incomes (Save the Children 2006). In some cases parents were unable to support their children and in others the children are no longer interested in studying, preferring to earn rather than learn (UNDP 2005). Having worked to provide extra resources for their family in the immediate aftermath, the opportunities offered by livelihood assistance projects and the

ability to increase the household resources has meant that the aspirations of some children and youth have changed towards income earning activities at the cost of education (IPS 2006).

This is reflected in statistics from IPS (2006) which show that in 34% of households who have yet recovered pre-tsunami income levels, children have not restarted schooling. Children in around 46% of households whose heads remain unemployed have also not started schooling. For those children who have returned to school, in around 31% of the households children's performance at school was found to have declined after the tsunami (IPS 2006).

4.4 Conclusion

Children's access to education in Sri Lanka is relatively good, and a history of commitment to education has built strong foundations. However, lack of investment and modernisation over recent years, and in particular sectors, means that the value of education in state schools is diminishing. Plans are in place to address this, but a lack of physical and human resources is hampering the speed at which measures can be taken to mitigate current problems.

One major factor which puts children off from studying longer is the lack of livelihood opportunities they see at the end of their education. Curriculum modernisation is vital to incorporate more relevant and up to date skills which will help young people find work when they leave. However, for many children an academic path after GCE O' Level may not be appropriate, and investment also needs to be targeted at vocational and technical institutes around the country which are also in need of modernisation.

This chapter highlighted certain key variables which make children vulnerable to poor educational attainment, many of which are interlinked. Socio-economic status is key to many of the variables, with poorer families often suffering many of the interlinked variables which have an impact on schooling; health levels may be lower, they are more likely to live in poorer areas where school facilities and the quality of teaching are lower, the parents are less likely to have good levels of education, and there is less likely to be a conducive learning environment at home with added resources. Children in tsunami-affected families which continue to suffer low income levels are also more

likely to drop out of school or have poor attendance levels, mainly to support their families at home or in paid labour.

Given the importance of regular school attendance, and the relatively high rate of dropouts, there needs to be more focus on communicating the benefits of education, particularly to poorer families in conflict affected areas. This should include the importance of reading outside of school, as this was found to have a significant impact on achievement levels, but does not occur in many households (De Silva *et al.* 2005).

As well as household factors, the importance of the quality of the school was emphasised, as this can compensate for negative household factors. This is significant as socio-economic vulnerability can be overcome if school standards are high enough. In certain areas school standards are particularly poor quality and children are more vulnerable to suffer poor education:

- Rural and estate sectors
- Tamil medium schools
- Disadvantaged provinces; North-Eastern, Central, Uva and North-Central Provinces.
- Conflict affected areas

This implies a large number of schools and a high proportion of students, and reinforces the importance of targeting these disadvantaged areas to raise the standard of education and improve children's future prospects.

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CHAPTER 5

Children Affected by Armed Conflict

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5.1 Introduction

I Ask for a World without War

- I ask for a world without war.
- I ask for a life without bloodshed.
- I ask for a heart without grief.
- I ask for a home with happiness.
- I ask for a chance to learn.
- I ask for relationships that last.

ZOA (Undated)

The civil conflict in Sri Lanka involves two main actors: the Government of Sri Lanka (GOSL) and the Liberation Tigers of Tamil Eelam (LTTE). The underlying tensions between the two main ethnic communities, the Sinhala majority and a Tamil minority, have existed since independence in 1948 and the North and the East parts of the country have seen most of the destruction. The GOSL and the LTTE signed a Cease Fire Agreement (CFA) in 2002 that temporarily halted the fighting although at the time of writing underlying tensions continue between government forces and the LTTE.

This section will focus on the impact of the conflict on children living in conflict-affected areas in Sri Lanka. While the main focus will be on the geographical areas of the North and East, the review will also touch on relevant aspects of conflict outside this region and its implications for children affected by armed conflict. This analysis uses studies that have focused on the issues that arise in conflict and highlights figures only when available. Whilst there is a great deal of research on the effects of conflict on children, reliable quantitative data on children is limited and dated.

This section starts by considering children's experiences of war and violence, moving on to consider how they are often deprived of their basic needs in income, health and education. It will then look at the threat posed to children by light weaponry and small arms, the issue of child soldier recruitment by the LTTE and Karuna faction – also looking at impacts on girl child soldiers, and impacts of displacement. Finally, there is some brief consideration of conflict outside the North and East, before looking at the legal framework which exists to protect children from the worst effects of conflict.

5.2 Children experiencing war and violence

The effect of conflict in Sri Lanka on children has been vastly studied. These studies show that children have been both directly and indirectly affected by the conflict with destruction to their support networks and threats to their familiar environment. The prolonged effects of the conflict which is over two decades old has meant that today's children have grown up experiencing only a conflict situation with insecurity, violence, physical and emotional trauma and material deprivation. This has not been a one-off experience but a continuous and dynamic process that has affected their lives as well as making them resilient. The following quote is testament to the effects of war and the helplessness that children face. It highlights the inescapability of this context for many children who are trapped in poverty and points to the need for people to build survival strategies.

As Amarakoon (2002) indicates, children lose their very childhood as a result of being faced with fears, worries, frustrations and insecurities.

"The war affects us directly and indirectly... whatever we do, it is with us. We cannot escape from its reach. Like a rubber ball pushed under water, it will surface again and again." Mahesh, 16 yrs, Colombo (Amarakoon 2002)

These feelings of helplessness are compounded by the destruction of familiarity in a child's life or rather that the conflict scenario is what becomes familiar to a child. A conflict situation destroys children's support structures such as family and community and changes the manner in which children perceive such stability. Children cannot be seen in isolation of their families nor of their community or peer groups, and conflict serves to destroy this source of physical and emotional security.

"They shot at everybody... Everything was full with blood. We thought the baby too was dead. We waited until my father came home. He saw that the baby was still alive. My mother was loaded on to a tractor. Now, we live with my aunt... My father lives elsewhere. At first, I missed him, but now I do not want to see him anymore. He never does anything for us, because he is always drunk." Boys aged 7 and 9 (ZOA undated)

Children need close trusting bonds, to feel a sense of dignity and belonging. The emotional security derived from this helps them to cope with stress and trauma that a conflict scenario can pose (UNICEF 1990). A situation of violence and insecurity often disregards the rights of children as an affected group. The fulfilment of children's basic needs becomes secondary and less significant and the healthy development of children is often less important than the need to defend an enemy.

While a whole generation has grown up with war and violence, a Situation Report (Save the Children 1998) recognises that each region and sub-district has its own unique dynamic. It highlights that because there are upsurges and decreases in violence the conflict is not static and the geography of the regions can change (Save the Children 1998). Although the figures in this report are dated, in the present context it still serves to highlight a pertinent factor when trying to understand the effects of conflict on children. There are specificities that need to be understood when trying to address conflict affectedness as these highlight the vulnerabilities of children.

In trying to deal with the way children experience conflict and its resulting violence Mathieu (2006) stresses that children are not a homogenous group and their vulnerabilities in emergencies will be a function of many factors; their age, whether they live in urban or rural settings, their ethnicity or tribe and whether they are boys or girls. Accordingly their vulnerability will also depend on the traditional role in society, whether that role and position has become worse or better as a result of the disaster. Furthermore the conflict experience can affect children at all phases of their lifecycle; impacting on childhood, youth and adulthood.

Thus blanket solutions are ineffective but what needs to be understood is that conflict affects all aspects of children's lives. It is a changing process that has evolved over time and as a result the effects will also change and strategies to address the conditions of conflict affected children need to take this into account.

5.3 Deprivation of basic needs of children

This section will focus on the deprivation of the needs of a child in conflict and the impediments it creates to lead a fulfilled life. The discussion will include insights into the difficulties that arise in a conflict situation when trying to

access livelihoods and income sources, shelter, water and sanitation, health, and education facilities considered necessary.

As some authors (Wimaladharm, de Silva and de Silva 2005 and Saravananthan 2005) have indicated there is a close linkage between conflict and poverty. While the nexus between the two is complex it is undisputed that poverty can be caused by conflict and that conflict can be created as a result of poverty. The space is created for the marginalisation and exploitation of groups that are considered poor in a situation of conflict.

"My father had a small canoe. During 1985 riots somebody had stolen the canoe, now he does not have his own canoe so he works in other peoples' boats as wage labour." Muslim family, Ampara (Wimaladharm, De Silva and De Silva 2005: 8)

"My father died in the 1990 conflict... His death was a great loss to our family. That day my father went to work and we got the news that our father died. After father's death my mother went for wage labour." Tamil family, Ampara (*ibid*)

5.3.1 Income

According to the Department of Census and Statistics (DCS) 50% of the population of the North received an income less than Rs.5,858 per month for 2002 while the same proportion of households in the East received less than Rs.5,500. In terms of the share of household income the poorest 20% of the households in the North receive less than Rs.3000 per month (holding only 4.1% of the total income share as opposed to the richest 20% holding 51.5%) while in the East it is even lower (Rs.2,890, holding only 4.7% of the total income share as opposed to the richest 20% holding 50.2%) (DCS 2003).

Table 5.1: Monthly household income and expenditure 2002

	Northern	Eastern	Sri Lanka
Average household income	Rs.8,155	Rs.7,640	Rs.12,803
Average household expenditure	Rs.9,614	Rs.10,769	Rs.13,147
Average expenditure on food	Rs.67.8	Rs.58.8	Rs.44.5

Source: Household Income and Expenditure Survey DCS 2003

Table 5.2: Mean household income/month & percentage share by source of income - 2002

Source of Income	Northern province		Eastern Province	
	Mean Income	Share of Income %	Mean Income	Share of Income %
Total household Income	Rs.8155	100	Rs.7640	100
Monetary Income				
Wages & Salaries	Rs.3894	47.7	Rs.3790	49.6
Other cash Income	Rs.1582	19.4	Rs.1240	16.2
Income from non-agricultural activities	Rs.1308	16.0	Rs.927	12.1
Income from agricultural activities	Rs.734	9.0	Rs.620	8.1
Non-monetary Income				
Agricultural activities	Rs.139	1.7	Rs.215	2.8
Other non-monetary income	Rs.498	6.1	Rs.848	11.1

Source: Household Income and Expenditure Survey DCS 2003

Household income in conflict affected regions, as in other regions, comprises both monetary and non-monetary (in-kind) income. The latter could include earned or donated income sources. The largest proportion of income is from wages and salaries as well as from other cash income⁴. It should be noted that the DCS has not produced a poverty line for the districts in the North East Province due to limitations in data coverage, hence determining the proportion of poor households is not possible.

⁴ The stress on wages and salaries could be as a result of the urban focus in the sample. It must be noted that the study did not include Kilinochchi and Mulathivu districts.

However, according to Saravananthan (2005) the Household Income and Expenditure Survey (HIES) indicates that the Eastern and Northern Provinces are the poorest when it comes to household income and per capita income. Although the Consumer Finance Survey (CFS) produced by the Central Bank of Sri Lanka does indicate that the Uva and Sabaragamuwa provinces are the poorest, the fact that these studies cover a limited area of the North and East and anecdotal evidence also shows lower real incomes and purchasing power in these regions (Saravananthan 2005).⁵

A study on the experiences of children affected by armed conflict in the East (Wimaladharmasiri, *et al.* 2005) highlights the loss of property - as a result of destruction to housing, forceful acquisition of property, displacement of owners leading to occupation by others, abandonment of property - as one way that households have been affected by the conflict and become poorer. The loss of property has also meant that people have lost income generating sources, such as agricultural land and fishing equipment.

The loss of property has been compounded by displacement. Families have experienced long term or short term displacement because of the insecure situation. Short term displaced leave their homes at night and stay with relatives or in public places such as schools, returning home during day time whilst longer term displaced are away from their homes for longer periods and may never return (Wimaladharmasiri, *et al.* 2005). Conflict induced displacement means having to leave behind most of their property and belongings that are destroyed in the fighting or lost to others.

The levels of deprivation in the region are also compounded by the accessibility to safe water sources and sanitation facilities, all of which are necessary in maintaining an acceptable level of health that can help people tackle poverty. Accordingly only 40% households in the North and 62.5% in the East have access to safe drinking water Saravananthan (2005). Similarly 49% in the East (the second lowest in Sri Lanka) and 46% in the North (the lowest) have access to water seal latrines while nearly 30% of households in the East and 15% of the households in the North do not have any sanitation facilities

⁵ HIES in the Northern Province covers Jaffna district, Mannar Town Divisional Secretariat area in Mannar District and Vavuniya District except Vavuniya North Divisional Secretariat area. CFS in the Northern Province does not cover Kilinochchi, Mannar, and Mullaitivu districts. IDP Welfare Centres in Jaffna district are not covered.

(Sarvananthan 2005). The limited opportunity to meet needs leaves such populations vulnerable to disease and death, affecting the health conditions of more vulnerable populations such as children.

Table 5.3: Selected Social Indicators – Water and sanitation 2003

Indicator	Sri Lanka (%)	Eastern Province (%)	Northern Province (%)
Access to safe drinking water	61.9	62.5	39.8
Access to water seal latrine	79.9	49.4	45.6
No latrine	5.6	29.2	14.4

Note: Northern Province excludes Kilinochchi, Mannar, and Mullaitivu districts. Adapted from Sarvananthan 2005

Sources: Central Bank of Sri Lanka (2005), *Consumer Finances and Socio Economic Survey 2003/04*.

The Province also has the lowest labour force participation rates in the country with only 33% and 37% in the North and East being included in the labour force (Sarvananthan 2005). Unemployment rates in the Province are higher than the national average (9%); 16% in the East and 13% in the North with the female unemployment rate being higher than the male unemployment rate (Sarvananthan 2005). This indicates that families have limited capacity to provide for their children's needs.

Table 5.4: Selected Social Indicators – Employment 2003

Indicator	Sri Lanka (%)	Eastern Province (%)	Northern Province (%)
Labour Force	46.4	37.2	32.9
Female	29.5	18.2	17.5
Male	65.3	59.2	51.9
Unemployment (2002)	8.9	15.9	13.0
Female	14.2	38.0	31.5
Male	6.3	9.3	6.9

Note: Northern Province excludes Kilinochchi, Mannar, and Mullaitivu districts. Adapted from Sarvananthan 2005

Sources: Central Bank of Sri Lanka (2005), *Consumer Finances and Socio Economic Survey 2003/04*. Unemployment figures from the Department of Census and Statistics (2004), *Poverty Statistics/Indicators for Sri Lanka*, Colombo, pp44.

Local economies have been undermined by restrictions on fishing, delays in agricultural inputs reducing agricultural production and decreasing jobs and income. Another study focusing on the Eastern Province by Wimaladharmma *et al.* (2005) shows that household income is linked to the type of household occupation, for example the livelihoods of a large proportion comprise agriculture and fishing. While these occupations are constrained by conflict related restrictions that do not enable people to access farm land and water bodies they are also faced with problems of limited inputs, production related costs, seasonality issues of droughts and floods.

The limited opportunity to livelihood creation and access, availability of employment opportunities, and access to safe water and sanitation will have its own effects on children. The limited income sources can push children to take on more household chores that give adults more time to seek employment opportunities, but it can also push children into the labour market. Such factors lead to children being deprived of an education in order to meet household income needs.⁶

A situation report by Save the Children (1998) highlights some issues that affect the overall wellbeing of children in uncleared areas. It states that children are deprived of adequate food, clothes, medication, school books, and medical facilities due to the prevailing economic embargo. These findings can also be used to understand the conditions within the more recent conflict situation. It also points to the restrictions that undermined the local economy and result in food shortages for children and the dependence on government rations. The report also raises the issue of LTTE taxes that pose an added burden on households, which in turn prevents children from gaining an education and creates the need for children to bring in an income into the household.

Wimaladharmma *et al.* (2005) also highlight the issue of child work in their study on children in the East. Their study indicates that children are required to make economic contributions to the household and that many children have also had to take on more work in the household as unpaid household labour. Girls engage in domestic chores, such as cooking, cleaning and childcare while boys contribute by working in the garden and helping with

⁶ For more discussion on the linkages between labour depriving children's access to education please refer the section on child labour in this report.

animal husbandry. The study notes that children's activities were not rigidly segregated by gender and there were instances when boys were taking care of younger siblings and cooking. Some children also juggle housework with school while others drop out of school to engage in full time paid work.

5.3.2 Health

Other research highlights the health implications of conflict on children. The limited availability of income sources, the restrictions to access livelihood sources, and the dependency on food rations has meant that the health conditions of children in conflict areas have suffered. As is indicated in one study (Amarakoon 2002) children have less to eat and become dependent on government food rations. Such disruption in food supplies and the inadequacy of these supplies make children more vulnerable to incidents of disease and malnourishment which in turn increases the severity of their deprivation as this pattern continues.

The Situation Report by Save the Children (1998) highlights that restrictions especially in uncleared areas have impacted on the public health systems although many of these restrictions are relevant in the current context and in relation to other conflict affected areas. It points to the shortages of chlorine for wells and limited mosquito control that increases the incidence of malaria. Children become even more vulnerable when public health campaigns are suspended due to the prevailing uncertainty and insecurity. Children with special needs are also affected by restrictions because they are unable to gain access to prosthetic care and rehabilitative material/assistance. Conflict affected areas also suffer from a lack of trained health staff and facilities, particularly in treatment of trauma and other psychosocial needs.

5.3.3 Education

Sri Lanka has been seen as a country that has high achievements in gender parity with boys and girls having equal access to schooling. However a disaggregation of this picture is not as positive. National figures tend to shroud issues of quality and accessibility of educational facilities in the country and do not bring to light specific issues within particular contexts, such as the conflict.

Such an insight is provided in the studies by Saravananthan (2005) and Mathieu (2006). In the North and East province it is estimated that one-third

of school aged children have dropped out or never attended school (year not stated). Approximately 50,000 school aged children are absent from school and four times the national average of students (15%) have dropped out of school (year not stated) (Mathieu 2006). Accordingly Saravananthan highlights that the Eastern Province has the lowest literacy rate (87%) in the country, with a larger proportion of that being amongst females. Further, the largest share of population with no schooling (13.8%) is in the East. A Census of Schools undertaken in 2003 indicates that the repetition rate and dropout rate in the North and East are high in relation to the rest of the country.

Table 5.5: Selected social indicators - Education 2003

Indicator	Sri Lanka (%)	Eastern Province (%)	Northern Province (%)
Literacy Rate	92.5	86.6	92.5
Female	90.6	90.0	91.8
Male	94.5	83.5	93.5
Education	7.9	13.8	7.6
No Schooling	29.9	37.9	32.1
Primary	41.0	31.3	31.8
Secondary	21.2	17.0	28.5
Tertiary			

Note: Northern Province excludes Kilinochchi, Mannar, and Mullaitivu districts. Adapted from Saravananthan 2005

Sources: Central Bank of Sri Lanka (2005), *Consumer Finances and Socio Economic Survey 2003/04*. Unemployment figures from the Department of Census and Statistics (2004), *Poverty Statistics/Indicators for Sri Lanka*, Colombo, pp44.

Education is seen as having a role to play in mitigating conflict. At times of conflict while all is in chaos schools can represent a state of normalcy and perform a protective function for children (Mathieu 2006). However, inaccessibility leads to the deprivation of education and many schools in the conflict affected areas are situated at a distance from home that may make them unsafe to travel to and have minimal staff and resources. Schools have been forced to close because of the insecurity and the need to establish army camps in school compounds (Save the Children 1998). Schools have also been damaged by government shelling and air strikes, making some unusable and leaving children afraid to return to school (UN Secretary General 2006: 12). Mathieu (2006) and the UN Secretary General's report

(2006) note the location of many schools in the vicinity of army checkpoints and political offices. This makes school children more vulnerable since these are often the target of attacks. Further, the occupation of schools by the armed forces creates the space for girls to be subject to sexual harassment and other forms of gender based violence.

There is also evidence that suggests that even where access to school is possible many children choose not to go to school as they are too far behind and are embarrassed or frustrated by their lost learning (Save the Children 1998). Not only do these factors deprive children of a school environment as a place that represents a sense of normalcy but they exclude children from the mainstream educational system. Children do not feel they are at the same level as their peers; a feeling brought on by no fault of their own.

The inability to access educational facilities is hindered by the lack of transport facilities, the harassment that children face at checkpoints, and the insecurity and fear of being attacked or abducted on the way to school. Children express the uncertainty resulting in such a situation and every day can bring a different experience which they have to cope with.

Box 5.1: Question from Kumar in Colombo to students in Vavuniya and Seruwila on going to school:

“I get to school every day in the school van, which picks me up from home. How do you get to school?” **Kumar, Colombo**

“We have to start very early because we have to walk part of the way and the buses are not always regular. Apart from that we have so many checkpoints to go through. At most of these, everyone has to get off the bus and go through body searches. If there is a bomb blast, we end up arriving at school very late. We live and travel in fear. There are white vans without registration numbers which come around and take children away. They never come back. Some say these children are abducted to become child soldiers by some faction. One of our relatives was shot recently. My parents took me out of school that day. I missed two days of school because of that incident. When a bomb or something goes off, the checkpoints become more of a problem. The military increases its checks. I have to pass two military checkpoints on the way to school. We all hate going through them. Now I have a bicycle so I can be away from them faster. I ride quickly without looking back. We are intimidated by army checkpoints.

Box 5.1: Question from Kumar in Colombo to students in Vavuniya and Seruwila on going to school: (contd.)

Our relatives in the village were taken by the army and have never come back.”
Eelavarni, Vavuniya

“We also have difficulties getting to school. Sometimes we are an hour or two late. But since the recent operations by the army, our lives have become a bit more secure. Actually we feel secure because of the increased checkpoints because it gives us a feeling that we are protected by the government. ” **Deepika, Seruwila**

Source: BBC. School Day 24: Sri Lanka. A conversation between students in the Sri Lankan capital Colombo, Tamil youth in Vavuniya in the North and Sinhala pupils in Seruwila in the East. 7 December 2006. http://news.bbc.co.uk/2/hi/south_asia/6217122.stm

Children are also excluded from attending school when they are displaced. Sometimes displaced children are unable to attend school in host communities because they do not have school uniforms and are not allowed to attend unless they are dressed in uniform (Save the Children 1998). When mass displacement takes place, schools in the host communities are used as welfare centres or temporary refugee camps. This results in children in both host and displaced communities being unable to attend school (Amarakoon 2002). This can add to the sense of resentment between host and displaced communities.

The Save the Children situation report (1998) highlights other issues that are related to children affected by conflict. It points to the need to understand the situation of children who have been born in camps in India but are not considered citizens of Sri Lanka or India. The lack of proof of an identity has denied some children the right to an education, freedom of movement and the right to vote. This aspect raises issues of deprivation and exclusion, where children are made to feel that they do not belong and hence cannot access certain rights availed by their peers.

The following quote also illustrates the disruption that insecurity presents and points to the frustration towards a situation that is beyond the control of children. They have been excluded from a process (in this case education) that could improve their current situation by virtue of an event that is beyond their control.

“Every time we were displaced we studied in different schools... I have studied in seven schools so far. We are good in our studies, but without money we are unable to go to big schools. We have no one to help.” Bamini, 14 years, Jaffna (Amarakoon 2002)

Mathieu (2006) stresses the need to highlight the gendered impact of conflict on education and this is mentioned especially in relation to the impact of conflict on girls which she claims has not been analysed in sufficient depth. Organisations working in preventive and emergency efforts need to understand how girls' education is affected by such adversities and develop alternative programmes that mitigate the impact of emergencies on girls' right to an education.

There is also a perceived notion that the LTTE does not recruit from among married persons and evidence suggests that some boys and girls are married to protect themselves from being recruited (Mathieu 2006). This analysis highlights the need to understand the impact of conflict on education not only in relation to access but also in the context of what the educational environment presents for children. This is relevant for both girls and boys and a 'gendered' analysis of education in conflict and other emergencies needs to take into account the efforts and realities that both boys and girls face.

Addressing issues of education in the context of conflict should include the provision of psychosocial support to children. In this regard the capacities of children should be strengthened to assist children and parents in dealing with their reactions to the violence and destruction around them and develop more adaptive responses. Children need to be able to restore a sense of routine and normalcy and this is when the provision of catch-up or 'second chance' education mechanisms could be useful (Wijetunge 2005). Apart from lacking educational facilities children in the conflict regions also lack recreational opportunities. Box 5.2 illustrates the extent to which the movement of children is curtailed.

Box 5.2: Question from Deepika in Seruwila to Kumar in Colombo on recreational activities:

“What do you do when you are not at school?” **Deepika, Seruwila**

“We go out to the cinema or get a DVD and watch it at home. At least once a month, we go away somewhere for the weekend. What about you?” **Kumar, Colombo**

“We are too poor to do that. We do not have facilities to watch movies. The cinema is so far away and we do not have any way of getting back if we go that far. Also, it is not safe to go out in the dark.” **Deepika, Seruwila**

“We can’t do anything like that. We never leave home after we return from school. Our parents do not let us go out because it is not safe. No one leaves home after dark in this area.” **Ganeshalingam, Vavunia**

Source: BBC. School Day 24: Sri Lanka. A conversation between students in the Sri Lankan capital Colombo, Tamil youth in Vavuniya in the north and Sinhala pupils in Seruwila in the east. 7 December 2006. http://news.bbc.co.uk/2/hi/south_asia/6217122.stm

5.4 Threat of small arms and light weaponry

A discussion of the conflict in Sri Lanka needs to take into account and acknowledge the impact of small arms and light weapons proliferation and arms circulation. Moonesinghe’s article points out that the availability of small arms and light weaponry results in violence and contributes to the creation of a militarised society and culture of violence in which children take to arms, participate directly in war and are perpetrators of violence (2002).

Box 5.3: Characteristics of small arms and light weaponry that encourage its use by children

- *Categories of small arms and light weaponry* include clubs, knives, machetes, pistols, rifles, assault rifles and submachine guns, (HGM) anti-aircraft and anti-tank missiles, light mortars and grenades.
- Weapons have certain *technical and utilitarian characteristics* that facilitate usage such as the low rate of expiry, rarely need spare parts, no need to elaborate infrastructure to manufacture, difficult to maintain control and regulation, easily movable, less expensive, and easy to use without extensive training and being light it can be carried on the person.
- *Most popular weapons* used by children are the AK47 and T56 rifles and grenades.

Source: MOONESINGHE, S., 2002. The Role of Small arms and Light Weapons in Sri Lanka: Understanding Children of a Gun-culture. *Nethra* 5 (3&4), pp.7-25.

While this is a good entry point to understand the impact and experience of the conflict on child soldiers it is also relevant in examining the conflict effects on children as a larger affected group. Women and children are considered the highest casualties to small arms and light weaponry and the increasing availability and use is considered the primary or sole tools of violence in many recent conflicts, including Sri Lanka. In addition to consuming a large proportion of financial resources they have drastic and negative impact on the socio-economic and political security at national, regional and global levels (Moonesinghe 2002).

Moonesinghe (2002) notes that the diffusion of these weapons (dispersion of arms within societies, extending to governments, state owned entities, private armies and militias, insurgent groups, criminal organisations and other non-state actors including child soldiers) is as important as proliferation (increase in the number of weapons possessed by certain governments/states). The huge diffusion of weapons has contributed to and exacerbated violent political turmoil in Sri Lanka which has seen an overall increase in crime. In an environment conducive to conflict, society tends to turn to conflict as a means of settling differences and the availability and easy access to weapons contributes to the intensity and duration of the violence.

The effects of small arms on children are linked to the broader impact of armed conflict on children. Yet certain factors link children directly with the impact of small arms in perpetrating violence. Children suffer both directly and indirectly as a result of arms flows. The availability facilitates the use of children as combatants and have resulted in the deaths and disability of many more caught in the conflict that have also increased the vulnerabilities of such children (Moonesinghe 2002).

The issue of small arms and light weaponry requires urgent attention and a way to go about this is to address the root causes of war. As Moonesinghe (2002) concludes, the protection of children is in trying to prevent the outbreak of war and addressing elements that contribute to the climate of violence.

The conflict situation has increased poverty in the affected population. The basic needs of affected children are not always met and the deprivations that these populations face are brought on by many factors that increase its severity. The burdens on children have also increased and many are required to provide for their families and take on adult responsibilities. Children live in deplorable conditions and have been forced out of their homes and may also have limited access to education and other facilities.

5.5 Child soldiers

A child soldier is defined as 'any person below the age of 18 years who is a member of or attached to the armed forces or an armed group, whether or not there is an armed conflict' (Moonesinghe 2002: 16). The first documentation of child recruitment within the LTTE was in the early 1980s in Pondicherry, India, where a camp was in existence for children below the age of 18 years, who were referred to as the 'tiger cubs'. These children were to be provided with training mainly based on education and physical exercise, rather than on military engagement. However it has been reported that many returned to Sri Lanka to use this training to gain power over Jaffna where children were used to monitor the movements of the Sri Lankan army. These children were also provided with grenades (Diphorn 2006).

The enlistment of children increased in 1987 with the arrival, and resulting fighting, with the Indian Peace Keeping Force (IPKF). The withdrawal of these troops also saw the institutionalisation of children into the ranks of

the LTTE and their involvement in undertaking a number of offensives and engaging in the killing of Sri Lankan forces.

“According to Singer (2006), ‘60% of the LTTE cadres killed during the armed conflict since 1995 were children between the ages of ten to sixteen [years], of which approximately 20% were girls younger than sixteen.’” (Diphorn 2006: 30)

With the signing of the Ceasefire Agreement in 2002 an Action Plan was signed in March 2003 between the LTTE and the Government pledging to address the issue of child recruitment. However the situation was compounded by the split within the LTTE in 2004 with the Karuna faction that led to further deaths within the group, including many children. Some children were released and returned home while others were re-captured by the LTTE (Diphorn 2006) or the Karuna faction.

Recruitment continued after the CFA, and LTTE cadres were lawfully entering government controlled areas to recruit children. Figures of new recruits during this period are elusive. In October 2004 UNICEF had documented 3,516 new cases of underage recruitment since the signing of the CFA, including re-recruitment of formerly released soldiers. The LTTE formally released 1,206 during this time.

A report prepared by the UN Secretary-General for the UN Security Council in December 2006 documented that out of the 5,794 cases verified by UNICEF 1,598 recruited children were believed to remain with LTTE. Of those 649 children were under the age of 18, and 949 were now over 18 but were recruited when they were under the age of 18 (UN Secretary-General 2006: 5).

Although all children in the provinces of the North and East have been potential targets, recruitment largely took place from the poor Tamil families,

“partially a result of middle class and financially equipped families being able to pay off the LTTE to keep their children, and to send their children abroad or to the South of Sri Lanka to live with relatives, etc.” (Diphorn 2006: 32).

Parents are threatened and forced into giving up their children to the movement. The sentiment of fear and helplessness that make children vulnerable to recruitment is reflected in the following quote.

"My parents refused to give me to the LTTE so about 15 of them came to my house - it was both men and women, in uniforms, with rifles, and guns in holsters...I was fast asleep when they came to get me at one in the morning.... These people dragged me out of the house. My father shouted at them, saying, 'What is going on?', but some of the LTTE soldiers took my father away towards the woods and beat him... They also pushed my mother onto the ground when she tried to stop them." Rangini, a girl recruited by the LTTE in 2003 at age 16 (Human Rights Watch 2004)

Many of the recruits are reported to have been orphans living in orphanages run by the LTTE, such as *Chencholai*. The LTTE set up a unit of orphans, known as the elite *Sirasu Puli*, or the Leopard Brigade. There have been claims that a majority of the child recruits were from the East, rather than from the educated centre of the North (Diphorn 2006). These aspects highlight the situation of vulnerability that the LTTE seems to prey on when enlisting child recruits and the following quote highlights the sense of desperation that makes the alternative of joining the LTTE more appealing.

"I went to school to grade 5. I dropped out because my mother and father died. No one cared for me, I had no parents, so I was willing to join. I lived with my aunt after my parents died. I cooked for her family. I had frustration in my life, so I was willing to join the LTTE. I wanted to live in this world without anyone's help. When I joined the LTTE, I went to the political office, and told the LTTE I wanted to join. They agreed. I told them I was sixteen, but they didn't care." Vanmathi, a girl who joined the LTTE in 2003 at age 16 (Human Rights Watch 2004)

A number of factors are identified that make children vulnerable to recruitment (Centre for Society and Religion 2001). Some of these are caused by the changing conflict environment, such as the need for more manpower, and the development of light, automatic hand-weapons. The nature and physique of children mean they are more likely to obey orders from adults, easier to control, and less conspicuous. Moonesinghe (2002) also includes the fearlessness of children as they do not understand the dangers they face, as well as their small physique and agility as qualities that make them easy targets for recruitment.

The LTTE adopts a number of recruitment techniques (Diphorn 2006). They target school children by giving lectures about the movement and the fundamental role of the LTTE in the light of the atrocities that have been conducted by the Sri Lanka Army. They use propaganda by teaching children patriotic songs, distributing posters and photos of 'martyrs', organising street plays that glorify the LTTE and highlight the evil nature of the Sinhalese, and produce films that glorify previous battles and other LTTE achievements. Moonesinghe (2002) includes public displays of war paraphernalia, and speeches and videos shows in schools to this list. There have also been reports of a quota system, established in LTTE controlled areas that forced every family to provide a child for the movement.

Furthermore an expression of the desire to leave the organisation is met with punishments and hard labour, which was also used as a tactic to discourage others to leave, further exemplified through the following quote. Children are vulnerable to more abuse and know that death or being caught by the forces is an inevitability.

"Lots of people tried to escape. But if you get caught, they take you back and beat you. Some children die. If you do it twice, they shoot you. In my wing, if someone escaped, the whole group was lined up to watch them get beaten. I saw it happen, and know of cases from other groups. If the person dies, they don't tell you, but we know it happens." Nirmala, a girl recruited in 2001 at age 14 (Human Rights Watch 2004)

Life as a child soldier is taxing on the physical abilities of children and is harmful to their physical and psychological wellbeing. The following stories illustrate the vulnerabilities of children in the midst of being a child soldier.

"After four months I was sent to a landmines unit. I learned to handle landmines, to place them. I did this for four months. I couldn't concentrate. Sometime a landmine would explode and children would be injured. Their fingers, hands, face. One time we were working in a line, and the last girl made a mistake when removing a landmine. It exploded and she lost a finger. She was 17. I was scared to handle them." Vimala, a girl recruited in 2003 at age 17 (Human Rights Watch 2004)

"The training was very difficult. They don't care if it's a rainy or sunny day. If you get too tired and can't continue, they will beat you. Once when I first joined, I was dizzy. I couldn't continue and asked for a

rest. They said, "This is the LTTE. You have to face problems. You can't take a rest." They hit me four or five times with their hands." Selvamani, a girl recruited in 2002 at age 15 (Human Rights Watch 2004)

Enlisted cadres had their hair cut very short, which has been described by many to be a process of branding and labelling. The importance of this is evident when the cadres escape as it makes them easily identifiable. This is particularly significant in the case of Tamil girls as it is customary for them to have long hair (Diphorn 2006). This feature makes children even more vulnerable to being re-conscripted as well as being arrested and harassed by the forces. Children who return to their communities and families may be stigmatised and find it difficult to reintegrate back into society.

While these are some of the push factors there are a number of pull factors that lead to children joining the LTTE. Some children are attracted by the heroic image of the LTTE or want revenge for the repression of the government and subsequently join the LTTE. Research indicates that the children most likely to be child soldiers are those separated from their families, economically and socially deprived and members of marginalised groups, such as minorities (Centre for Society and Religion 2001).

Diphorn (2006) identifies the inability to relate to a non-conflict situation as important in the creation of an ideology that encourages children to join the movement, as they stand for particular political goals which they aspire to attain. Keethaponcalan (2003) also brings up the issue of ideology and talks about nationalism. It is assumed that many children believe in what they are fighting for because in one way or another they understand the stated objectives of their organisation. However this author argues that children can be attracted by the black and white version of the world offered by the LTTE, which presents itself as sacred and infallible. Hence they are unable to gauge the complexity of the situation that they are absorbed into.

Social values are likely to play a huge role in encouraging or discouraging children to be recruited as such values are likely to be central to children's own perceptions. Military activities are glorified, attracting children to the 'glamour' of military life and the prestige of a military uniform (Keethaponcalan 2003). Keethaponcalan refers to the 'cult of martyrdom' which plays a crucial role in forcing children to choose violence in addition to the peer pressure from friends and other members of the community. There have been further reports that parents who lose a child are treated with special care and given

the status of 'a martyr family', entitling them to a tax free life, job preferences and special treatment during public events by the LTTE (Diphorn 2006).

Keethaponcalan (2003) further highlights issues of security and power. Membership in an armed group and access to weapons ensure protection from threat and harassment. Many children who have joined armed groups have experienced violence in their personal lives, so taking up arms is a means of being safe from threat. Membership in an armed group ensures power to otherwise powerless children who come mostly from weaker social groups. Being a child soldier offers the child the 'excitement' of being a soldier for young people who are trapped in an existence that offers them little alternative. Moonesinghe (2002) cites this as the 'Pied Piper' enticement which uses psychological methods to play on the immaturity, curiosity and sense of adventure of children.

Child soldiers may not be able to return home while others refuse to return, fearing ridicule or punishment. These children need to be assisted to reintegrate into their communities. However factors like stigmatisation, peer pressure and the reluctance of schools to admit these children back to school make the process of reintegration difficult (Stalker 2003).

This brings to the fore the question of volunteering which the LTTE has repeatedly denied but is a violation of international law. The distinction between volunteering, by compulsion, and being forced is not clear cut. There are degrees of compulsion, but one cannot accept it as a free and rational choice. Many do not realise the irrevocable nature of their decision that they have no opportunity to exercise further choice (Wijetunge 2005). The frustration, remorse and helplessness are evident in the following reflection by a child soldier.

"I want to advise people who want to be rebel fighters, young soldiers, that they should learn from what we have gone through which is too sad an experience. Those children younger than we are should never again be involved in such a life anymore. What I have seen and undergone is not for a child to experience." (Wijetunge 2005).

A more common pull factor is the lure of escape from poverty; children join the movement to improve their lives and gain from their limited prospects. Children living in conflict zones who are from poor families who cannot escape poverty, or those who have been separated from their families or

otherwise marginalised by society are vulnerable candidates. Deprived of a family, an education and overall stability and security these children find it almost impossible to conceive of a life without war.

5.5.1 Recruitment of child soldiers by the Karuna faction

It is also important to highlight the breakaway militant group the Karuna faction's role in recruiting and abducting child soldiers in the Eastern district of Sri Lanka - a subject less documented than the LTTE's role, but recently brought to the fore by UNICEF reports in 2006, a Human Rights Watch report in January 2007 and in the Rock report submitted to the Special Representative of the Secretary-General for Children and Armed Conflict on Sri Lanka in February 2007. This report states that;

“from November 2005 to October 2006, there were 164 reports of children having been abducted by the Karuna faction, 142 of whom still remain in its ranks. Since May 2006, the number of abductions has increased sharply. In the space of one week in mid-June 2006 alone, UNICEF received 30 reports alleging that children had been abducted by the Karuna faction in the areas of Santhiveli, Kiran, Mankerni, Valachchenai and Iruthayapuram (Manmunai North) of Batticaloa district.” (Rock 2007: Paragraph 24).

“From the time of my visit in November until the 31st of January 2007, 55 new cases of child abductions by the Karuna faction in Government-controlled areas were reported to UNICEF.” (Rock 2007: Paragraph 31).

Reported abductions appear to have rapidly increased from March 2006, before which reports were sporadic. There was a particular peak in abductions in June 2006 when 23 abductions took place on one day and 17 on another (Human Rights Watch 2007: 22). Human Rights Watch documented a link between the opening of Tamil Makkal Viduthalai Pulikal (TMVP) political party offices (the political wing of the Karuna faction) in towns and a sudden increase in abductions of boys and young men in the area.

Up to December 31st 2006 UNICEF had documented 208 underage abductions with the vast majority occurring in Batticaloa district. The age distribution, according to November 2006 statistics, was;

Ages 10 to 12: two abductions
Ages 12 to 14: eight abductions
Ages 14 to 16: 59 abductions
Ages 16 to 18: 109 abductions
(Human Rights Watch 2007: 32)

However, UNICEF estimates that actual numbers of abducted children are three times higher when unreported cases are taken into account.

The Rock report and the Human Rights Watch report documented that families of abducted children claimed that children were not picked at random but were targeted and their identities appeared to be known to the abductors before the abduction. Families often recognised the Karuna cadres from the area and had also often visited abducted children at TMVP offices or at a Karuna faction camp in Wellikanda. Particularly vulnerable targets appear to be boys or young men in families where another family member has been recruited by the LTTE, or where children had previously been recruited by the LTTE and then released by the Karuna faction when they split from the LTTE in March 2004.

Children are reportedly taken to TMVP offices, and then on to camps in the Welikanda area in the Polonnaruwa district where there are four or five camps. Some children were subsequently allowed some limited supervised contact with their families, and some families were sent a payment for their son's services of around Rs.6,000 a month.

There are few reports of escapes or releases, with few options for children once they escape since they are so vulnerable to re-abduction by Karuna or LTTE cadres.

"If my son escaped or was released I would be unable to keep him at home, it would be too dangerous," the mother of an abducted 18-year-old said. 'Depending on the case, either the Karuna group, the army, or the LTTE would look for him. I really don't know where he could go to get protection. If there were more efficient protection programs, maybe more kids would escape from the Karuna camps.'" Human Rights Watch interview, Batticaloa district, October 2006. (2007: 31)

TMVP spokespeople deny the abduction or recruitment of any children, and the UNICEF has not been given access to Karuna faction camps for monitoring or training purposes.

Reports have also drawn attention to the claim that all abductions were carried out in government controlled areas and that the white vans typically used to take children away were often seen going through government checkpoints without being stopped or searched.

"I have concluded that certain elements of the Sri Lankan security forces are complicit in the abduction of children by the Karuna faction, and that at least some elements of the security forces have facilitated and sometimes participated in those abductions." (Rock 2007: Paragraph 33).

The Human Rights Watch report also cites eye witness accounts of Karuna cadres working with the army and police at checkpoints and of Sri Lankan security forces being openly aware of Karuna training camps in the areas they worked in, but this has been denied by the government (Human Rights Watch 2007: 38). The report highlights that there are 14 government checkpoints between Batticaloa town and Welikanda where the camps are, all opportunities for abducted children being transported to be discovered.

This explicit implication of the government in such activities has been vehemently denied by the Sri Lankan government, but reports by Rock, UNICEF and Human Rights Watch have all questioned why the government did not do more to investigate reports of abductions in these areas and to protect children. Many incidents of reported complaints were not adequately followed up by police and were apparently rude and aggressive to complainants.

"The Karuna group took your child so why don't you complain to them?" the police allegedly told another family who tried to register a complaint. Aside from this being a shirking of police responsibilities to the public, a local human rights activist pointed out the speciousness of such a police response. 'Where do you go to seek redress with Karuna?' he asked. 'With the police or the STF [Special Task Force] there is a mechanism, and with the LTTE too. But with Karuna there is no one with authority anywhere.'" Human Rights Watch interview with aid worker, Ampara district, October 2006. (2007: 37)

The government pledged to conduct an enquiry into the allegations based on the evidence provided.

In response to a press release by Human Rights Watch V. Muralitharan, also known as Colonel Karuna, made the following statement to Human Rights Watch by telephone;

"'I do not like these things,' he said. 'I don't like child recruitment and abduction.' He said the minimum age to join the Karuna group was 20, and that the group would take action against any commander who recruited a person below that age. 'We would send him out of the movement,' he said." Human Rights Watch 2007: 48)

However, this contradicts statements made by other TMVP spokespersons.

5.6 Girl child soldiers

The LTTE is well known for recruiting relatively high levels of girl child soldiers; UNICEF's figures documented the gender split of child soldier as 68% boys and 32% girls during the period November 2005 – October 2006 (UN Secretary-General 2006: 6). The LTTE claims that the recruitment of girls and women, known as Birds of Freedom is a way of;

"assisting women's liberation and counteracting the oppressive traditionalism of the present system" (Mathieu 2006: 10).

There have been very few reported cases of recruitment of girl child soldiers to the Karuna faction.

According to Human Rights Watch (Mathieu 2006) in many other conflict situations recruited girl soldiers are subject to sexual abuse. However, this phenomenon is rare in the LTTE where relationships between the sexes are generally prohibited. Girls are recruited because they are considered less conspicuous than boys and can get easy passage through searchers at checkpoints.

A study undertaken to highlight the voices of girl soldiers concludes that becoming a child soldier is very dependent on a combination of the local environment and the personal circumstances surrounding the girl's life. Poverty was identified as a key enabler of girls joining a movement or being abducted (Keairns 2003).

Box 5.4: A day in the life of a girl child soldier

Training – very rigorous and demanding, 3-5 months of basic training and 5-6 months of rigorous training. Specific training schedule carried out 7 days a week. Punishment for failure to comply lead to punishments that include extra rounds of exercises. Randomly hit and kicked.

- 4-5 am : Morning ablutions. Older girls tell them what to do at the beginning, they have to use water sparingly and protect water supplies. Older girls act as guards enforcing policies of the movement.
- 7-8 am : Breakfast
- 8-12 noon : Physical exercise including weight lifting, jumping, running, crawling over sharp terrain, karate, rope climbing and climbing heights (one short break for a drink of water was allowed).
- 12.30 pm : Lunch (food included soup, marmite, eggs which were drunk raw, bread, lentils, rice and curry, apples, water and on some special occasions ice cream.)
- 1.30-4 pm : Training in special skills including map reading, identification of particular geographical locations, use of compass, knot tying, use of special codes, use of the walkie-talkie, shooting and killing animals. Each girl had to write a personal report.
- 4 pm : Tea
- 5-6 pm : Parade
- 6 pm : Gather to say oath
- 10 pm : Sent to bed in small sheds on the ground on fertilizer sacks without pillows. Sometimes they used their cloth bag for a pillow.

Note: This representation was constructed based on the 6 interviews with girl soldiers.
Source: KEAIRNS, Y. 2003, *The Voices of Girl Child Soldiers: Sri Lanka*, United Nations

The above illustration is indicative of the regimented lifestyle that child soldiers lead. It's a continuous, monotonous and rigorous routine that evidently displays aspects of consistent deprivation (lack of freedom of movement, constant supervision and not having a decent place to sleep after a long day in training).

Girls join the movement because they want to escape the life their family had chosen for them which they had limited control over, including forced schooling, arranged marriages, a high incidence of domestic violence and exploitation. They also do not feel that people listen to them or that they have a real voice in deciding their own future. While some had been motivated by LTTE propaganda, they also wanted to do something for their people in order to change the current status quo. These girls display a strong will and want to have some control over the decisions that affect their lives (Keairns 2003 and Wijetunge 2005).

The following experiences also point to girls having to deal with different aspects of integration into their communities and families once they leave the movement. It appears that committing atrocities has wider implications on girls than boys when they try to lead a normal life once free.

"I ran away to escape a marriage I didn't like. I ended up in a worse set-up now and that's what I have earned" (Wijetunge 2005)

"My problem in facing the world is beginning only now. The man I have decided to marry might leave me, I have some doubts – will he accept me the way I am?" (Wijetunge 2005)

"When I was captured I was beaten badly for information and left for dead. One officer asked the soldiers to send me to hospital. I am rejected, even by my family and cannot go back. I am considered a traitor. I cannot even get married to one of my own people. I wake up with dreams of the battlefield and often cannot go back to sleep. I keep on counting the holes in the mosquito net." Girl, 19 years (de Silva 2003)

This places a burden on the minds of these children and may even serve as reason for them to remain in the movement. The study by Keairns (2003) shows that these children are afraid of the future and worry how others in their communities will view them once they return. They want to be able to redeem themselves, and to help and improve their relationships with members of their families.

"All that I want now is to study and study well. Anything to study anything... maybe dancing, I like dancing and music... but will I ever get a chance. I like to study but I am now older." (Keairns 2003)

Moonesinghe (2002) highlights the need to examine and address the socio-political, economic and cultural pressures that child soldiers face. These provide children with little alternatives and these are the factors that have led to the violence and ethnic conflict in the first instance. Mere condemnation and prohibition are insufficient and the local conditions and environment of these children need to be investigated.

On a more specific level there are a number of issues that need to be dealt with in relation to child soldiers. Some of them are gender specific and effects on boys and girls need separate attention. A gendered analysis in the literature seems to focus on girl child soldiers, particularly the separate issues of integration back into their communities. This also calls for a holistic approach to address issues of trauma and integration on the one hand but also family and community acceptance once these children leave the movement.

5.7 The legal framework protecting children in conflict

The International Labour Organisation (ILO) prohibits the recruitment of children under the age of 18 years in armed conflict and identifies this as one of the worst forms of child labour (Wijetunge 2005). Sri Lanka ratified the Worst Forms of Child Labour Convention on March 1, 2001.

The Convention of the Rights of the Child 1998 (CRC) is the global charter for the survival, protection and wellbeing of children which is most often disregarded in a situation of conflict. In 2000, two additional Optional Protocols for the CRC were adopted during the General Assembly of the United Nations. The second deals with children involved in armed conflict and establishes 18 years as the minimum age for all participation in hostilities, for compulsory and forced recruitment by non-state armed groups and requires states to undertake and implement policies to prevent children under the age of 18 from being involved in conflicts (Wijetunge 2005 and Diphorn 2006). This protocol entered into force in 2002 and Sri Lanka is party to the standards set therein.

While Sri Lanka has signed and ratified the CRC and its Optional Protocols, much needs to be done to incorporate the standards of CRC into aspects of policy as well as amend existing laws that are enforced.

The CRC is not a binding law but a policy document, although Article 27 of the Sri Lanka Constitution contains a directive principle of state policy which recognises that children's welfare and interests should be protected (Wijetunge 2005).

Table 5.6: Ratification of International Conventions/Treaties as of 16 July, 2001

	Refugee Convention	CESCR	CCPR	CEDAW	CRC	CRC-OP-AC	CAT	CERD	Ottawa Landmine Treaty
Afghanistan*	NO	YES	YES	YES	YES	NO	YES	YES	NO
Bangladesh	NO	YES	YES	YES	YES	YES	YES	YES	YES
Bhutan	NO	NO	NO	YES	YES	NO	NO	Sign.	NO
India	NO	YES	YES	YES	YES	NO	Sign.	YES	NO
Nepal	NO	YES	YES	YES	YES	Sign.	YES	YES	NO
Pakistan	NO	YES	YES	YES	YES	NO	NO	YES	NO
Sri Lanka	NO	YES	YES	YES	YES	YES	YES	YES	NO

Notes:

CESCR International Covenant on Economic, Social and Cultural Rights

CCPR International Covenant on Civil and Political Rights

CEDAW Convention on the Elimination of all forms of Discrimination Against Women

CRC Convention on the Rights of the Child

CRC-OP-AC CRC Optional Protocol on the involvement of children in Armed Conflict

CAT Convention Against Torture and all other Cruel, Inhuman or Degrading Treatment or Punishment

CERD International Convention on the Elimination of all forms of Racial Discrimination

'Sign.': Indicates that the state party is a signatory but has not yet moved to full ratification

Sources: UNHCHR, UNHCR, Landmine Monitor in Boyden, Berry, Feeny and Hart 2002

The LTTE, on the other hand, upholds its position of voluntary recruitment and argues that as they are not recognised as a state, they are not bound to the CRC, nor the Optional Protocol. However, the Optional Protocol contains

provision for armed forces operating outside of the state. Article 4 of the protocol says;

“armed groups that are distinct from the armed forces of a state should not, under any circumstances, recruit or use in hostilities persons under the age of eighteen.” (Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict, adopted May 25, 2000, G.A. Res. 54/263, Annex I, 54 U.N. GAOR Supp. (No. 49) at 7, U.N. Doc. A/54/49, Vol. III (2000), entered into force February 12, 2002.)

The prohibition on the recruitment and use of children below 15 years old is considered customary international law, and is therefore binding on all parties to armed conflict (Human Rights Watch 2007: 82). However, although in many instances the LTTE have recognised the injustice in child recruitment they argue that as a non-state actor they cannot be attacked on the basis of the standards of international law (Diphorn 2006).

Human Rights Watch cites LTTE recruitment as a violation of international human rights laws, the CRC and the additional Optional Protocols. The 1949 Geneva Convention prohibits recruitment of anyone under the age of 15 years and defines it as a war crime in the statute of the International Criminal Court (Wijetunge 2005). However, these conventions and legal standards have yet to find ways of making armed groups such as the LTTE accountable.

One attempt to address child recruitment was attempted when the government and the LTTE signed an Action Plan for Children Affected by War in 2003 that included the LTTE pledging to end recruitment and release recruited children to families and to new transit centres. The United Nations Children's Fund (UNICEF) played the primary role in negotiating the Action Plan and is the main implementing partner (Wijetunge 2005).

The Action Plan for Children Affected by War included a pledge by the LTTE to end all recruitment of children and to release children from its forces directly to their families as well as to three new transit centres constructed for this purpose. The Action Plan provided for these transit centres as well as vocational training, education, health and nutritional services, psychosocial care and other programmes. However one centre opened in October 2003 and received only 172 children in the first year, and reported very low numbers of children during mid-2004. Two other centres were never opened

because of this low number (Wijetunge 2005). In 2006 UNICEF expressed concern about the fact that 'released' children were being transferred to an educational skills development centre without their parent's consent and where UNICEF and parental access is limited (UN Secretary-General 2006: 7).

Recent reference was made to the progress of the Action Plan in Allan Rock's report on the situation of child soldiers in Sri Lanka (see below for details of this report), where he stated:

"The Action Plan did produce some progress. There was significant improvement in the reintegration of children affected by war. The average age of children recruited by the LTTE rose during the implementation period from 14 to 16 years. But at no time did LTTE recruitment cease altogether. Importantly, the number of children released by the LTTE has always been significantly lower than new recruitment. And with the deteriorating security situation, even the modest advances that were achieved under the Action Plan are now imperilled." (Rock 2007: Paragraph 11).

UNICEF monitors and reports on underage recruitment in Sri Lanka through reports made by parents and visits to camps. UNICEF follows up and verifies all reported cases and has maintained a database tracking recruitment of child soldiers since 2001. While this database has proved to be a useful tool in providing substance for accusations levelled at the LTTE, it has proved difficult to maintain during times of escalated conflict.

5.7.1 Resolution 1612 on Children and Armed Conflict and the Rock report

In 2005 the Security Council unanimously adopted Resolution 1612 on Children and Armed Conflict which established monitoring and reporting mechanisms on the use of child soldiers. Sri Lanka was one of the seven countries scheduled to be included in the initial phase of reporting as part of this resolution. Sri Lanka has repeatedly expressed its commitment to achieve the objectives set out in this resolution which requires national governments to co-operate with the collection of "timely, objective, accurate and reliable information of the recruitment and use of child soldiers in violation of applicable international law". There has, however, been some controversy around the collection and reporting of information with relation to Sri Lanka, particularly since the government feels that its activities are

subject to unfair scrutiny in comparison to the activities of the LTTE which falls outside 'state' responsibilities;

"The human rights records of States come under strict scrutiny at periodic reviews held by treaty bodies to monitor the implementation of obligations undertaken by States at national and international level. It is therefore necessary that the Security Council Working Group must place its primary focus on non-state actors who are not bound by, nor have any respect for, international treaty obligations. This, Mr. President, will help ensure that States are not burdened with multiple reporting responsibilities while non-state actors are brought under a punitive regime." *Statement by Ambassador Prasad Kariyawasam, Permanent Representative of Sri Lanka to the United Nations, at the Security Council meeting on 'Children and Armed Conflict', New York, July 24 2006.*

On 21st September 2007 Radhika Coomaraswamy, Under-Secretary-General, Special Representative of the Secretary-General for Children and Armed Conflict, presented her report to the Human Rights Council in Geneva. The report included the findings of her Special Adviser Allan Rock's visit to Sri Lanka in November 2006. Coomaraswamy and Rock both stated that he received the full cooperation of the Sri Lankan government and was able to access all areas of the country including the North and the East in order to assess the situation on the ground.

In the report Rock refers to a meeting with LTTE Political Wing Leader Mr. S.P. Tamilselvan during which they discussed the lack of progress on the part of the LTTE to cease recruitment of under-age children. The LTTE cited the planned implementation of its own 'Child Protection Act' which prohibits the recruitment and use of children. However, this act was rejected in Rock's report.

"I stressed to Mr. Tamilselvan and CPA officials that the LTTE's "Child Protection Act" does not respect international law and norms applicable to the protection of children in armed conflict, because it establishes 17 as the minimum age for recruitment. It is therefore in contravention of the Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict, which Sri Lanka has signed and ratified, and which establishes 18 as the minimum age for recruitment." (Rock 2007: Paragraph 14)

The LTTE rejected this argument since the organisation does not consider itself to be a 'non-state actor' and therefore will not comply with the CRC's Optional Protocol on the involvement of children in armed conflict. The report was highly critical of the LTTE and called upon it to immediately stop all recruitment of soldiers under the age of 18, and to allow UNICEF and other international agencies access to camps to monitor recruitment activity.

As documented earlier, Rock also wrote extensively on the child recruitment activities of the Karuna faction, a breakaway LTTE group, but since they denied all child recruitment there is little scope for discussions within the legal framework. The report laid much responsibility at the door of the Sri Lankan government to enquire into the circumstances of the abductions and to take further action.

Rock also highlighted the responsibilities of the government to adequately care for the rehabilitation of children who have surrendered from the LTTE. The report claimed that 27 out of 105 five surrendeeds were being held in an open prison in Kandy (Rock 2007: Paragraph 59). Questions have also been raised by UNICEF about the treatment of child soldiers who surrender to the Sri Lankan security forces as they are often made the subject of inappropriate media attention;

“Insensitive media exposure of former child recruits has led to stigmatizationsic and increased vulnerability on the part of the child and his/her family.” (UN Secretary-General 2006: 10)

The Rock report also raised questions about humanitarian access, questioning the conduct of both the LTTE and the government in obstructing access of necessary supplies to camps with vulnerable displaced populations, including children.

A statement by Shirani Goonatilleke of the Sri Lankan Delegation to the Human Rights Council on 27th September 2007 made the following response to the report's requests:

“As a follow up to the UN Secretary General's recommendations in his report of December 2006, on Children and Armed conflict in Sri Lanka, a multi disciplinary Task Force on children affected by the armed conflict was established in April 2007. Issues being addressed include harmonisation of the Convention on the Rights of the Child (CRC)/

Optional Protocol with national legislation, strengthening education to prevent child recruitment, promotion of birth registration in conflict areas, the protection, and rehabilitation of child “surrendees” and strengthening law enforcement in conflict areas to also ensure the protection of children in IDP camps... The Human Rights Commission of Sri Lanka (HRC) has widened its mandate to include child rights violations. However Lack of resources remains a barrier and the government is seeking funding to strengthen the capacity of relevant local institutions such as the Human Rights Commission (HRC) and the National Commission for the Protection of Children (NCPA established in 1999).”

5.8 Displacement

In Sri Lanka it is estimated that 900,000 children in the country have been affected by the conflict and as many as one-third have been displaced (Save the Children 1998 and 2000 in Wimaladharma, *et al.* 2005). The Scope and Purpose of the Guiding Principles on Internal Displacement (1998) distinguishes Internally Displaced Persons (IDPs) from refugees on the basis that the former group is confined within the borders of a country not being able to completely move away from the site of conflict while the latter crosses borders.

The Guiding Principles (1998) also identify children as a vulnerable group needing particular protection and include a number of principles specifying areas for protection from displacement and during displacement. Children are identified as being entitled to protection and assistance taking into account their special needs (Principle 4.2). Children are required to be protected from acts of violence that infringe on their personal dignity and forced labour (Principle 11.2) and the recruitment of children and/or taking part in hostilities is prohibited (Principle 13.1).

The Guiding Principles try to address the needs of support structures of children such as families. They stress that families which are separated by displacement should be reunited as quickly as possible. The authorities are responsible for facilitating this process (Principle 17.3) and are mandated to provide displaced children with free and compulsory primary level education facilities (Principle 23.2).

Current figures on the number of people displaced by the conflict are difficult to establish as the situation is constantly changing, and there is a significant

overlap between those displaced by the conflict at different times in the past as well as the 2004 tsunami. Figures from the Internal Displacement Monitoring Centre from August 2007 estimate that 460,000 people remained displaced in Sri Lanka as a result of conflict and violence, including over 181,000 people, or 49,000 families, displaced by fighting since the escalation in April 2006 (Shukla 2007: 11).

The sudden increase in internally displaced persons (IDPs) put great pressure on the humanitarian agencies dealing with the provision of aid to the camps. In March 2007 the World Food Programme announced that it had put on hold its mother-and-child nutrition and school feeding programmes in order to prioritise the provision of resources to the newly displaced. This demonstrates the knock-on impacts that massive displacement can have. There were also reports of rising malnutrition levels in areas that were hard to reach such as northern Jaffna.

As of 2003 270,000 children were considered to be internally displaced as a result of the conflict in Sri Lanka (Stalker 2003). Many of these children have lost parents in the fighting, lost proof of identity (lack of birth certificates) which deprives them of a right to a legal identity that in turn cause problems when they try to gain access to schooling (LST 2003).

Displacement has led to the discontinuation of schooling for children and creates an environment that deprives children from gaining a meaningful education. In certain areas up to 50% of children are not enrolled in school, while enrolled children miss up to 30% of their education through irregular attendance. During the worst points of the conflict during 2006 in the East more than 250,000 children experienced some sort of disruption to their schooling (Shukla 2007: 13). Some schools have closed due to lack of trained teaching staff, lack of educational supplies and teaching aids and infrastructure which has hampered children's access to education (LST 2003). However, in IDP areas schools are often used to house IDPs disrupting the education of the host communities as well. In some areas morning and afternoon shifts have been set up in schools to try and accommodate the local and IDP communities' needs.

However, the lack of school uniforms, identification documents, social stigmatisation in host communities and the resistance of local communities to the presence of internally displaced children in their schools (LST 2003) can lead to displaced children being excluded from the mainstream educational system.

The conflict has resulted in a significant number of people having to live in welfare camps to escape the fighting, as a result of being unable to return to and/or due to the loss of dwellings. Stalker (2003) claimed that 75% of inhabitants of welfare centres were children and women who are deprived of privacy, security, sanitation, and health facilities. According to the State of Human Rights report of 2003 one in five displaced children is malnourished. Table 5.7 provides more recent figures.

Table 5.7: North East population in welfare camps as a result of conflict and tsunami

District	Conflict (end 2003)	Tsunami (Jan 2005)
Ampara	7,055	62,727
Batticaloa	1,964 (end 2002)	26,827
Trincomalee	4,630	19,515
Eastern Province	13,649	109,069
Jaffna	8,194	10,198
Kilinochchi	7,282 (end 2004)	305
Mannar	8,361 (end 2002)	0
Mullaitivu	8,529	11,993
Vavuniya	12,803	0
Northern Province	45,169	22,496
Total	58,818	131,565

Note: The figures for tsunami displaced in refugee camps could be inflated by non-affected inmates.

Sources: Column 1- District Statistical Handbook, various districts, latest year available. Column 2 - http://www.tafren.gov.lk/pdf/ActionPlanDraft_new.pdf. Saravananthan (2005)

Wijetunge (2005) provides some insight into the problems faced by displaced children living in welfare centres. The camps lack pre-school and early childhood support facilities for infants, and older children are denied recreation facilities. Life in the camps also presents an abnormal living environment for children.

His research indicates a variance in the ability to cope with the situation of displacement. Poorer IDPs find it harder to re-establish their lives in the event of losing property, livelihoods and support structures. There is mention of such IDPs having to move into ethnic enclaves which enhances their segregation and exclusion while inhibiting their integration within the social mainstreams of host communities (Wijetunge 2005).

It is interesting to note that these studies fail to highlight the situation of host community children and their experiences in the event of the displaced settling in their communities. This highlights another dynamic in the conflict environment that needs to be explored further as it would hold insights into how such children perceive guest children and envisage the longer term interaction.

5.9 Conflicts outside the North and East

The JVP insurgencies that took place in 1971 and 1987 are other significant conflict affected periods in Sri Lanka's history. The conflict affectedness on children during this time has significant parallels on the present conflict in the North East of the country. The issues highlighted in this section are indicative of the effects on children as only one study was found that attempted to understand the issues related to the effects of the JVP insurgencies on children.

The study done by Bulankulame (2005) indicates that children who lost the main income earner in their families were put under greater pressure to play 'adult' roles in the household. The author suggests that this would have placed an added burden to children trying to deal with their loss. This could have possibly placed a greater burden on boys in trying to fill their father's place.

"In the absence of the father, they have to adjust to the change in the role of the breadwinner, and the 'masculine' father role, which is important to patriarchal societies such as Sri Lanka." (Bulankulame 2005: 86)

Girls on the other hand seem to have to take on more maternal roles of taking care of younger siblings, especially on the case of mothers leaving as migrant workers.

"Indrani lost her father at age 10 and has 2 young sisters and 2 younger brothers: 'Yes, I feel I have a great responsibility towards my younger siblings. I have to look after their education and guide them. Moreover, because they are girls I have to protect them. I have to think about a lot of things. What my mother should have done, I have to do... I feel sad about this, if she was here it wouldn't be like this.'" (ibid: 86)

Children have also been faced with atrocities, killing and brutalities of family members. These children have seen their parents being murdered or found the bodies, or they know that they were tortured.

“Biso’s father who portrayed a certain sense of heroism in the village was *un-killable* to her. He was also very popular and never dreamed that he would be killed. For a long time she thought he was hiding somewhere and he would come back to them. She only acknowledged the death when she saw some photographs of her father’s disfigured dead body.” (*ibid*: 88)

A paper by Ganepola and Thalayasingam (2004) points to Muslim and Tamil ethnic group rivalries, especially in the Central Province, based on community resources such educational facilities. Apart from community biases amongst teachers there are incidents of school children who wear special items of clothing or religious symbols (such as head scarves for Muslim girls and *pottu* or caste marks for Tamil girls) being bullied and ridiculed.

The paper indicates that conflict against Muslims appears to be increasing caused by commercial rivalry. There is some resentment around the perception that Muslims tend to congregate in a neighbourhood together and develop their own facilities such as shops, mosques etc (Ganepola and Thalayasingam 2004). Such an approach can have a bearing on social integration and increase the exclusion children within these communities.

The review was not able to find many studies on conflicts outside the present North East conflict. However the studies on such conflicts show that the effects can prolong the deprivation, exclusion and vulnerability of affected populations. The cause of the conflicts can remain and continue to impact the lives of affected people, placing greater burdens on children and giving rise to renewed conflict.

5.10 Conclusion

As the literature referred to in this section shows, children have been both directly and indirectly affected by the conflict that have destroyed their support networks and threatened their familiar environment. The prolonged effects of the conflict have meant that a whole generation has grown up experiencing only conflict with the accompanying insecurity, violence, physical and emotional trauma and material deprivation. For those children trapped in poverty they have had to turn to alternative survival strategies, and despite the destruction that comes with conflict the research shows how children have tried to overcome these situations. The resilience of children stands out

in the face of the trauma, hopelessness and destruction and mapping out these coping mechanisms could certainly offer solutions to helping children deal with the longer term trauma of conflict. However, the research also highlights the need to consider the specific dynamics of children's experiences in different areas and to note that children are not a homogenous group. The nature of vulnerability is captured in conflict contexts but the research does not show how children overcome poverty i.e. the dynamisms and the success stories are missing.

The inadequacies in services and facilities in conflict affected areas are evident not only in terms of availability but in terms of factors which affect children's access. For example, even in areas where education facilities have not been destroyed other factors affect accessibility for children, including fear and difficulties in making the journey to school, armed forces turning schools into camps, a lack of documentation, host and displaced community tensions etc.

The issue of child soldiers in Sri Lanka is critical considering the significant numbers of children who have been affected and killed as a result of underage recruitment. The effects on the poor are profound especially since it seems like they are more vulnerable to recruitment. In areas under government control greater efforts need to go into understanding and addressing the 'push' factors for children (and young men in particular) joining armed groups by offering them other choices to improve their living conditions. At community level there is a desire and a need to build greater awareness of how children's right can be protected in the context of a conflict situation.

One gap that is evident in the literature is that the available studies on conflict induced displacement tend to focus inwardly on the displaced communities and only touch briefly on the effect on the host communities and their children. Issues around integration need to be further explored.

In terms of interventions to support conflict-affected children and help them reintegrate into a normal environment, the literature highlights the importance of involving children in the process of rebuilding their lives. Programmes need be community based, and promote self-esteem and the personal growth of children. Recent years have seen an increasing amount of investment in peace-building activities, yet little has been done to evaluate their impact on the attitudes and behaviour of participants.

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CHAPTER 6

Child Labour

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6.1 Introduction

This section deals with the sometimes controversial issue of child labour, seen from different perspectives as a symptom and cause of poverty but also as a potential way out of poverty for extremely poor households. Child labourers suffer multiple deprivations; they are overworked, have little leisure, are denied education, suffer bad working conditions, cruel treatment by employers, sexual harassment and are paid low wages. Often children are not provided the stimulation for proper physical and mental development, and full time child labour in particular affects the health and personal development of the child (Rajendran 2004).

Precise and up to date statistics on children in child labour are limited. Many of the studies used in this literature review focus on a select area and hence the numbers that are produced have limited representation. The only national level survey conducted in 1999 by the Department of Census and Statistics (DCS 1999) attempted to provide data on child employment. It revealed that 21% of Sri Lankan children between the ages 5 and 17 were engaged in some form of economic activity. 2.9% of children in the age group 5-14 and 29.3% in the 15-17 age group were not engaged in education. Among children below 18 years, 5.3% were involved in economic activities and 7.1% in housekeeping and they were not attending school (CPA 2003).

The Child Activity Survey also indicates that 25,333 children in the 5-14 year age group were engaged in economic activities without engaging in education (IPEC 2001-2002:78). An ILO/IPEC study carried out in 2004 attempted a sectoral breakdown of the prevalence of child labour, revealing that the estate sector had the largest prevalence of child labour followed by the conflict and border regions and lastly the coastal areas.

Child labour is highlighted as a main cause of child exploitation and child abuse in Sri Lanka today. The Child Activity Survey (1999) found that there are 19,110 child domestic workers in the Northern and Eastern provinces and that urban households have a high employment rate of child domestic workers (DCS 1999). The ILO/IPEC study (2004) indicates that 60% of all child labourers work in the agricultural sector in Sri Lanka. A majority of child domestic workers come from rural areas, plantations and city slums (Kannangara, De Silva and Parndigamage 2003).

The section begins with a discussion on definitions of child labour, then moving on to consider different areas of work where child labour is prevalent. The relationship between trafficking and child labour is also considered, as well as an overview of the relevant international and national legislation.

6.2 Defining child labour

The International Labour Organisation (ILO) defines child labour as engaging in;

“both paid and unpaid work and activities that are mentally, physically, socially or morally dangerous and harmful to children. It is work that deprives them of opportunities for schooling or that requires them to assume the multiple burdens of schooling and work at home and in other work places; and work that enslaves them and separates them from their family. It involves work carried out to the detriment and endangerment of the child, in violation of international law and national legislation.” (Jayaweera, Sanmugam, Ratnapala 2002: 1-2).

Child labour has been defined in much of the literature as work performed by a child that would have a bearing on their physical and mental health (Centre for Policy Alternatives (CPA) 2003). The age of 14 years is cited as the lowest age limit for any child to work in Sri Lanka and it is considered illegal for any child below this age to work (Rajendran 2004).

The ILO Minimum Age Convention No.138 stipulates 15 years as the minimum age for employment and 14 years in countries whose economy or education facilities are not developed, while children between 13 to 15 years can engage in light work that is not harmful to the health or development of children and does not prejudice their school attendance (Jayaweera *et al.* 2002).

The legal review undertaken for a study on the worst forms of child labour in select sectors in Sri Lanka (CPA 2003) tries to make a distinction between child labour and work that a child should do. It states that children engage in many activities in the house and in school that do not affect their mental or physical wellbeing and work towards benefiting their development. Child labour on the other hand does not benefit children and has a bearing on their physical and mental wellbeing. It involves exploitation of children by

adults who see them as weak, naïve and vulnerable. It points to the lack of consideration on the part of adults on the long term effects of child labour on children and their ability to take on such work when they are hired.

A sector specific definition to child labour has been attempted by Rejendran (2004) who attempts to highlight the nature of employment undertaken by children in the estates including part-time child labour in the estate sector, full time and paid and unpaid child workers.

These definitions take note of the deprivations that children can face when engaging in child labour as well as factors that make them prone to falling into child labour. However most of these factors are based around the difficulty of attaining an education and limited income sources and fail to highlight other complexities that result in children having to work. The definitions should note the specific nature of the context that children live within and how this impacts upon the need to take on child labour as a strategy. The definitions lean towards the elimination of child labour but do not seem to recognise the realities of the context that these children often live within, where elimination may not prove such a clear cut answer to resolve the related issues.

6.3 Types of child labour

This section will focus on describing some of the types of child labour in the literature. It will highlight the activities that children are required to undertake within these different types of labour, provide information on the regions in which these types of labour seem to be prevalent (where available), and the specific and common push and pull factors that lead to children having to undertake such labour. The analysis will also attempt to draw aspects of deprivation, exclusion and vulnerability that children face as a result of engaging in child labour.

The review will present insights into child labour within the household, select worst forms of child labour in the construction, fireworks and motor garage industries, domestic labour, and estate sector work as types of labour evident in the literature.

6.3.1 Child labour within the household

There availability of research on child labour within the household is minimal. This may be for reasons of difficulty in capturing such a form of labour.

However it is worth noting the involvement of children within the household because such tasks can deprive children of an education, recreational activities and spare time when they have to take on adult tasks to assist their parents/caregivers in running the household. Children's involvement in home-based income generation activities can also go unnoticed as it is seen as a part of their duty towards the household income generation.

A study undertaken by IPEC (2001-2002) illustrates how children help their fathers in the fishing trade. Fathers view this as providing their child with a skill. Children are required to work at pulling fishing nets, cleaning them, separating out the fish and drying them. They are expected to assist in the family business or working for other businesses. Similarly children engage in seasonal labour where they would stay at home from school during the rainy season to help with *chena* ('slash and burn') cultivation (IPEC 2001-2002). These illustrations point to a number of issues, including health and safety. Children handling adult equipment could pose their own hazards. Parents' view that they are learning a skill and contributing to the family income as opposed to attending school adds to the intensity of their deprivation.

A study undertaken by Save the Children (2006) points to the gendered nature of activities undertaken within the home. Boys appear to have significantly more time than girls for leisure activities, such as playing and watching TV. Girls are observed to be more involved in domestic activities during those times, particularly helping their mother with cleaning, cooking and other domestic activities (Save the Children 2006 and Gunewardena, Lekamge, Dissanayake, Bulumulla & Jalmert 2005). Boys were expected to undertake activities outside the house, such as shopping duties (Gunewardena *et al.* 2005). This presents a gendered analysis of cultural factors impinging on the rights of girl children and increasing the burden of their chores within the household. This increasing involvement can serve to infringe on both recreational/leisure time and on learning.

Gunewardena *et al.* (2005) also point to an interesting finding on lower class children which is worth further investigation. The data revealed that the boys and girls in the lower class are expected to work less than the other classes, which is contrary to the popular perception that children in the lower classes are more involved with household chores.

The issues raised in this section point to the household's inability to afford external labour for home-based economic activity or children taking on more tasks within the household to assist parents to engage in external economic activity. These can increase child activity and lead to child labour within the household.

Parents may feel that their children are learning a skill that can assist them in the future and they do not see it as doing them any harm. However such an involvement can be harmful when children are deprived of a childhood; enjoying recreation and leisure time and gaining an education. Children's involvement in adult tasks can also be a hazard to their safety and they could suffer long term effects on their health.

6.3.2 Construction

The construction sector has become attractive to child labourers for a number of reasons. There has been an increase in small-scale construction activities that has increased the availability of semi-skilled job opportunities, especially for younger workers who are willing to work for less. Jobs in the sector are contractual and mobile, ending upon the completion of a construction and creating an enabling environment for children to find work. There is the space to gain work and receive on-the-job training where basic skills are not a prerequisite (CPA 2003).

A majority of these children work as helpers providing assistance to the mason and other builders and undertake fetching and carrying tools, mixing cement, putting up scaffolds etc. They may also specialise in aspects of construction work. Most worked between 7-8 hours a day or more than 8 hours a day for 5-7 days a week (CPA 2003).

The study identifies a series of push factors that make children take up work in this sector. Many children are school dropouts, i.e. they leave school before sitting O' Levels. They state economic reasons, a lack of interest and ignorance on the part of their parents and simply not liking studying as factors which influenced their dropping out. Some did not feel that the teachers lacked the training to handle and encourage weak students to remain in school without dropping out if they failed (CPA 2003).

Many children also said they were better at construction work than at schoolwork. There was also an opinion among parents that working was

better than the children idling with their friends and getting into trouble and that skills learnt on construction sites would not go to waste (CPA 2003).

Children were attracted by the quick money which was identified as a pull factor although children received lower wages than adults. The study found that many children are paid monthly or weekly rather than the common belief that they were paid daily. Some were paid when going home. They were able to gain such work because they had family members already working in the sector and were able to find work easily. Children often have a brother or a parent in the trade that they followed into the trade (CPA 2003). Since this acts as a pull factor, having family members or friends working in the sector clearly places other children at risk of entering child labour.

Box 6.1: Reasons for leaving school

Priyantha's story

Priyantha is a 17 year old from Galle and has never been to school. His parents have not been to school either and do not know the value of education according to him. His mother works as a labourer on a tea estate and his father is unemployed. Whatever money his father earns, when he does, he spends on alcohol. He has five siblings and has to share the responsibility of looking after the family with his mother. Therefore even though he would like to go to school he has to work.

Amila's story

From Anuradhapura, Amila is 16 years old and has been working for four months on the construction site. Though he has not worked previously, he left school about two years ago because he was weak in studies and could not keep up. he was cornered in school and got fed up and left.

Source: CENTRE FOR POLICY ALTERNATIVES, 2003, A Rapid Assessment on Children in Exploitative Employment in Sri Lanka

Children who have links with people already working in the industry are vulnerable to being drawn into such work. Children who are already working in the sector often live on the site because they come from other places and not from the vicinity of the site. During this time they are exposed to completely different lifestyles and also live with adults. This limits any interaction with children their own age and they tend to gain habits and mannerisms of an adult (CPA 2003).

Box 6.2: AccidentsSunsantha's story

He was working as a helper on a construction site and was injured when he fell off the scaffolding which had been built on top of an un-constructed well covered by some planks. When he fell off the scaffolding he fell into the well that had about 10 feet of water. He was asked to apply some *siddhalepa* by the head mason.

Source: CENTRE FOR POLICY ALTERNATIVES, 2003, A Rapid Assessment on Children in Exploitative Employment in Sri Lanka

Children appear to lack adequate health care and knowledge about injuries they could sustain while they work in this sector. Most brushed off 'small injuries' and did not view them as damaging to their health. Children are exposed to hazardous building materials and machinery, involved in mixing cement and lime-washing walls which leads to skin peeling on hands and feet. Injuries from iron nails and falling off scaffolding are also common (CPA 2003).

This description of children working in the construction industry highlights issues within the deprivation, exclusion and vulnerability dimensions. Children are pushed into finding work in the industry largely as a result of poverty. However the work that they take on involves health risks as they have to carry heavy loads and work with harmful building material. They are deprived of time for rest and often have to work long hours every week. The industry attracts children who have dropped out of school as it requires a limited skill base and work experience.

The research used in this section indicates that children drop out of school because they are made to feel inadequate. These children are sometime slow learners and teachers do not make the effort to help these children remain in school. Instead they seem to be marginalised and pushed out of the system.

There are a number of factors within the sector that make it attractive to children thus increasing their vulnerability to being drawn in. At the lower rungs there is a demand for semi-skilled labour and these jobs are easily available for people who are willing to work for less. The view that children can

learn a skill and even avoid their present troubled environment makes them open to recruitment. Children have also seen employment in such a sector as a means of escaping broken homes, dysfunctional family environments and alcoholism although working in the sector exposes them to similar threats in an adult environment.

6.3.3 Fireworks industry

The fireworks industry is seasonal, with production levels peaking during Christmas and Sinhala and Tamil New Year. Production is carried out at two levels; at the household (medium to low production involving household members) and the factory (medium to high production employing external sources of labour) (CPA 2003).

The industry is not mechanised and thus has a high demand for labour. These children are often deprived of safe and protective work environments. The CPA study (2003) highlights that working conditions expose children to chemicals and gunpowder residue, and the work space is poorly lit and constraining with children having to sit on the floor in the same position, performing repetitive tasks. The industry is not mechanised with basic work areas with a low stool or only the floor to work on. There is no safety equipment or fire extinguishers. Children fill gunpowder into firecracker shells covering their noses and mouths with cloth or a handkerchief to protect them from the 'dust'. They do not use gloves and their hands and feet are coated in fine dust, gunpowder and other chemicals (sulphur and sodium nitrate).

There is a high risk of fire, especially in home based industries because of the nature of the infrastructure; small huts constructed from mud or cement with thatched or corrugated iron roofs (CPA 2003). This could have serious health implications on children and lead to disabilities that would further jeopardise their wellbeing.

Each child carries out a particular task for the entire day making the work repetitive and monotonous. A majority of child workers in the industry are male, spending more than 8 hours a day working, 5-7 days a week. Payments vary from daily to monthly or per piece while some get paid during the season. Children who work in home based industries tend to not get paid because they are seen as helping the family business (CPA 2003).

Many children attend school and work part-time at home in the case of family business. If a business is run by the family it is a major pull factor as children consider it part of their duty towards their parents to help out in the business at home. Children who come from outside the village are drawn into employment through friends or known people and many come from the estate sector or poorer districts (CPA 2003). Since the technology used in the production of fireworks is rudimentary, children do not work in this sector to learn a skill or become proficient in a trade. This is especially true for children who come from outside the sector. For family run industries children may inherit the business although their working conditions remain the same (CPA 2003).

Children who live in the workplace are often from distant places and do not have family living nearby. The children who live at the workplace often live in shabby huts, which are often over-crowded. Employers prefer to give them time-off during the week rather than on weekends so as to minimise interaction with the villagers. Their interactions are limited to those with adults and are therefore exposed to habits such as alcoholism (CPA 2003).

All these issues raise have implications on deprivation, exclusion and vulnerability of these children. Children are deprived of the safety of their surroundings, lack family support structures and time to be children. They are prevented from mixing with other villagers which excludes them further from society and learning to interact with other members in society. Such exposure also makes them vulnerable to adult behaviour and even alcohol induced abuse.

The labour intensiveness, monotony and basic facilities available and the facilities for accommodation for children also have serious health implications. Parents whose children work with them in the family enterprise stated that the child was not working but merely 'assisting' in the business and showed a liking to learn how to make fireworks. They also noted that they needed their children to work to supplement the family income (CPA 2003). However this rationalisation only serves to increase the vulnerability of children in home-based industries. Parents seem to believe children will continue in the trade and hence might be more willing to discourage their education and ignore poor health conditions. They do not seem to be aware of, or are indifferent to the long term health implications of being exposed to such chemicals.

The industry is politicised, even obtaining a license to buy gunpowder is politically controlled. This implies that the issue of children working in deplorable and dangerous conditions to produce fireworks is simply ignored by the authorities. Factory owners object to mechanisation of the industry because they fear the industry will be taken over by big businessmen (CPA 2003). The political nature of the industry and the resistance by owners to regulate the sector make children even more vulnerable. The lack of monitoring and scrutiny will continue to hide the conditions that these children work within.

6.3.4 Motor vehicle garages

The third industry that the CPA (2003) study focused on was motor vehicle garages where many children can be found to be working on three-wheelers, bicycles and other light vehicles. The sector is dominated by male children between the ages of 8-16 years. Children undertook such work as a part-time source of income which they take on after school. Most children come to work from home while some stay in boarding houses, with the employer or at the workplace itself.

Box 6.3: Away from home

Somapala's story

Somapala is 14 years old from Kekirawa and lives in Colombo at a boarding house with about 25 others who work in shops in the city. He repairs and cleans vehicles, especially three-wheelers in a garage in Colombo 10. He stopped schooling about a year ago because he believes that education would not help him find employment.

Source: CENTRE FOR POLICY ALTERNATIVES, 2003, A Rapid Assessment on Children in Exploitative Employment in Sri Lanka

Children engage in general repair work, painting work, as helpers, fetching and carrying tools and assisting other mechanics. They work in unclean surroundings, high temperatures, inadequate lighting, without safety equipment like goggles, and welding shields. The study found that a majority work more than 8 hours a day for 5-7 days a week but payment largely depends on the work they do. They are paid very little, on average Rs.150

a day. The study draws on the lack of proper space to work within noting some instances where children were required to work on the pavements (CPA 2003).

The children who attend school and work at the same time do so for economic reasons. Children prefer to stay away from home because of conflicts within the family and parental addiction to alcoholism. Parents and children both felt that they can learn valuable skills and earn money for their own spending or to support the household. Working in the garage is seen as a safety mechanism that can protect children from their surroundings. They said that the social environment in those parts of the city were simply not conducive to allow their children any free time (CPA 2003).

Social networks are used to secure employment in this sector. The study (CPA 2003) found that children working in garages have been introduced into the trade by their families and relatives or sons were found to be working in their father's garage.

The study (CPA 2003) notes that living in boarding houses or with employers exposes them to the negative influence of the workplace as well as those who they work with. Children who live away from home are influenced by older children who use abusive language and are exposed to pornography. The garage environment also exposes children to smoking and alcohol.

The heavy underworld presence in this sector was highlighted considerably within this study. These children live in urban, low income areas and parents did not consider their living space or their school environment to be a safe environment. As such parents see working in a garage as a safety net for their children, despite the risks. It appears that these risks are minimal in comparison to the risks that they could face within their social environment. However this overlooks working conditions, long hours, lack of time to devote to education, and health risks as well as issues of abuse when living in boarding houses or with owners which make children vulnerable within the sector.

The use of machinery, working in unclean environments, and having insufficient protective gear have health implications on these children in addition to balancing work with school work and having to work long hours and increases deprivation.

6.3.5 Child labour in the estate sector

Child domestic labour is cited in the literature as one of the main forms of child labour prevalent amongst children in the estate sector. Recent numbers on child domestic workers are elusive but studies in past years are indicative of the magnitude of the problem. In 1997 a study of nearly 700 households in urban areas in southern Sri Lanka revealed that one in every 12 households had employed a child domestic worker (De Silva undated)⁷. A study undertaken in 2002 estimated the number to be between 100,000 and 150,000 children (Jayaweera, Sanmugam, Ratnapala 2002).

A study done by Rajendran (2004) on child labour in the plantation section focusing on the Badulla District indicates that child labour in the sector can be observed amongst two levels of intensity; full time labour which involves productive activities or household work and part-time labour where the child, while attending school, works after school in productive or household work which is harmful to the child's health and development. This work may be paid or unpaid.

The study found that 77.3% of the respondents are in school while 20% are engaged in fulltime child labour. 31.8% were employed in housework and did not receive any payment and have been forced to give up their education to engage in such work, including activities such as collecting firewood, cooking, washing, caring for younger siblings etc. (Rajendran 2004).

30.9% of fully employed children were found to be working as domestic workers, a majority of them being girls. Such work is often outside the estate and they worked from 6am to 9pm with a 45 to 60 minute break for lunch. Children were also found to be working in shops and boutiques with bad working conditions and long working hours for minimal pay. 17.7% work in restaurants, textile and retail shops, and boutiques as casual daily paid labourers, a majority of whom are boys. Nearly 30% of these children come from single parent homes (Rajendran 2004) and this is indicative of the fact that certain family structures could place more of a strain on children to become child labourers in order to contribute to the household's income.

⁷ Legislation was passed in 2000 increasing the minimum age of employment for children to 14 years and the incidence of child employment was seen to have decreased dramatically (De Silva undated).

Children who engage in domestic service do not often engage in activities solely within the household. De Silva (undated) shows that although most youth were classified as 'domestic workers' a number of them were engaged in other chores; including working as a bus conductor and taking children to tuition classes.

A study by Kannangara, De Silva and Parndigamage (2003) was able to identify 'sending communities' i.e. communities in which children were vulnerable to being recruited as domestic workers. These include estate areas, conflict affected areas, rural areas and inner city slums. While this provides a broad/general geographical spread it could be useful to identify the prevalence of domestic child labour in other sectors such as the coconut and rubber estate sectors.

The study highlights the means of finding employment, through parents and relatives and through brokers. While a majority of child labourers were paid for their work the payment was received mainly by their parents or the broker (Kannangara, De Silva and Parndigamage 2003). Rajendran (2004) identifies an additional feature of prospective employers directly approached the family to employ a child.

Children in informal sector occupations are subject to extreme exploitation as they receive minimum or less than minimum wages since they are easier to intimidate and cannot legally form unions. In most cases child workers do not collect their own payments but their parents collect the wage and/or the brokers getting a portion of it (Rajendran 2004). There is a need for more regulation of the informal sector and as Rajendran states, the need to encourage the formation of unions to protect children's rights within the informal sector. Parents also need to be made aware of the impacts and made culpable if they force children to work.

An analysis of children who had been domestic workers in urban households revealed that the majority of domestic workers were between the ages of 14-17 years while the majority of children under 14 in domestic work were between 11 and 13 years. A majority of domestic workers are girls from Tamil speaking backgrounds who work on household chores related to cleaning and cooking. The chores undertaken by the child domestic worker were reported as cleaning the household, cooking, washing clothes, gardening, washing dishes, looking after children, scraping coconuts, helping the mistress, cleaning toilets and playing with children, looking after animals, and grooming household pets (Kannangara *et al.* 2003).

People in the estate sector have low education attainment rates in comparison to other sectors and drop out rates in schools for plantation children is very high. These factors have contributed to the labour supply of plantation children in the informal labour market. Children who are full time child workers offer a number of reasons that lead to school drop outs; financial difficulties faced by the family, parents asking them to leave school, dislike of school, personal/family problems, lack of school facilities, and being offered employment for leaving school (Rajendran 2004). Only one study was found that mentions children who are neither employed nor attending school. While the study blames the lack of balance in family support structure for the education of children in these households (Jayaweera, Sanmugam, Ratnapala 2002), it is worth noting that these children seem to be hidden from the numbers and the issues discussed around child labour in this sector. They point to a group that is on the border of moving into child labour and are at risk.

The poor quality of education in the sector has been much discussed in the literature and is used here to highlight the dire need for improvement. Children in the estate sector are disadvantaged because they face problems of accessibility to education and health facilities. These children are marginalised by not having sufficient access to the educational system but also because the attitude of teachers. Children are excluded from admission to schools because they lack birth certificates (Jayaweera, Sanmugam, Ratnapala 2002) which also denies them an identity.

This analysis would like to highlight a few aspects that may be worth further exploration in attempts to address push factors that lead to child labour in the estate sector. Clearly economic factors are the most prevalent factor where parents pull children out of school and into child labour. However it may be worth exploring whether this is just for economic reasons. Could parents feel that the existing education system is insufficient especially if their level of education is minimal? Rajendran (2004) points to the level of education of the mother being related a child's educational attainment, but this cannot be the only linkage given that a child is open to other influences, such as the influence of both parents as well as siblings. This leads to another question of how divergent or similar these influences may be for girls and boys.

There is also a need to identify the correlation between disliking school and its linkages to children dropping out. This aspect comes out strongly in much of the discussion surrounding child labour but none of these studies tries

to explore the reasons behind this dislike in detail. Rajendran (2004) notes the linkage to non-availability of adequate school but does not explore this inadequacy.

The plantation sector in Sri Lanka includes tea, rubber and coconut industries. It is hence pertinent to investigate the prevalence of child labour in all these sectors in relation to the provision of labourers and the prevalence of child labour within the sectors. It appears that much of this focus has been on the tea plantation sector rather than including the other two sectors into a similar analysis.

The unofficial nature of child labour (be it in the household or outside of it) often ignores issues of health and safety and involves exploitation of children as an economic asset. There is a limited balance in the development needs of the child and economic needs of the family. For those who work with parents or relatives, personal relationships may be strengthened due to shared work. However these children are exploited as financial assets and the economic needs of the family are always put before the development needs of the child (Rajendran 2004).

The research on domestic labour highlighted the cruel attitude towards child workers by their masters and the lack of concern on the part of the parents. The situation for the child was exacerbated by the legal system which removed children and put them into state children's homes – the children felt they were being punished. Some were treated as offenders if they ran away from employers. There is a question as to whether the state is in fact giving children their rights back by putting them in state homes where children feel powerless and trapped in some cases. Children are resented and stigmatised as a delinquent and often are not given a fair chance but instead face punishment while the adult offender is not punished. The child is unable to build a life because this will always be on his record (MARGA 2004).

“The boy's resentment led him to steal a camera, necklace and ring and run away. He was apprehended and is now in the Home as a juvenile offender. He has been there for two years – he is fourteen years now, and is being sent to school. He is angry and resentful about the circumstances that has given him the label of an offender when – he maintains – the real offender was the employer.” (MARGA 2004: 41)

6.4 Child trafficking and child labour

Some of the literature explores the links between trafficking and child labour, noting that the movement of individuals, including children, is often not undertaken in a regulated fashion especially when it is illegal. This creates a space for children to be exploited and their security and safety to be threatened. This section will highlight the conditions that children face in the event of being trafficked, how their rights are infringed and who can pose the biggest threat to these children.

In Sri Lanka children are mostly trafficked from rural to urban and tourist areas for domestic labour and sexual exploitation. Estimates indicate that the total number of children trafficked in this manner range from 10,000 to 12,000. The trafficking of children to be used as combatants by the LTTE is also common and UNICEF puts this number at 4,811 at the end of January 2005 (Coomaraswamy and Sathkunanathan 2006).

The ILO/IPEC study (2004) illustrates the root causes for trafficking in the estates, coastal areas, conflict areas and regions bordering the conflict. Poverty and poor living conditions are the underlying cause in all these areas. 25% of plantation parents have at one time sent their children for employment as bondage for a debt. There is an increasing reluctance amongst young people in the estate sector to be employed within the sector as wages outside can be more attractive than that within. The study also shows that there is a higher demand for estate labour in urban centres. In border areas the dissatisfaction with their living conditions in refugee camps, difficult access to schools leaves children vulnerable to traffickers. The school system therefore becomes a 'push' factor (IPEC 2001-2002).

They see trafficking as a way of improving their living conditions and may be more willing to endure unsafe conditions. However, poverty is the foremost cause of children's vulnerability in these regions. The demand for cheap labour in urban centres is a major pull factor that attracts young people from the estate sector and leaves them open to accepting unfavourable working conditions.

Parents in the estate sector are sometimes ignorant of the often exploitative nature of the work children are subjected to. The study gives some indication of parents' willingness to allow their children into sexual activity in coastal areas in return for money. However the study stresses the need to realise

that these families are economically marginalised and use this as a way of gaining an extra income. Some parents in the border areas and in the conflict areas believed that children should work and contribute to the household income (IPEC 2001-2002). These factors illustrate how parents can create the space for the exploitation of their children as a result of overall material deprivation.

Traffickers in estate areas often come from outside the estate but have networks within; such as family working in the estate. Parents encourage children to leave with traffickers to avoid their present situation; for instance the fishing *vadiyas* or camps operating from Kalpitiya employ children from the East who have left the region to avoid being conscription by the LTTE. There is also a great demand for servants from refugee camps; brokers visit the camps to collect children. Children below the age of 18 are brought in by sub-contractors to work in the firecracker industry. They normally come from remote villages and estates, with most of the village boys being from the same village or related. Girls in border areas above 15 years seeking employment are found working in brothels in Anuradhapura lured by the promise of work in garment factories. These children face sexual abuse and are stigmatised from their communities. They have no other option for survival (IPEC 2001-2002).

The movement of children over international borders is considered a crime under international humanitarian law. A study on trafficking in South Asia notes that often the consent of children to be moved from one place to another is not sought and often children are not aware of what they are hired to do (Coomaraswamy and Sathkunanathan 2006). The lack of information of what will happen to them once trafficked and their lack of consent excludes children from knowing what they should expect.

The conflict and tsunami having orphaned many children and has provided easy prey for traffickers from refugee camps and temporary shelters. The Tsunami (Special Provisions) Act 2005, Part II sets out a protective regime for affected children. Similarly an amendment proposed in 2005 criminalises forcible or compulsory child recruitment for armed conflict (Coomaraswamy and Sathkunanathan 2006)⁸. The external conditionalities as a result of the tsunami and the conflict have created the space to exploit children.

⁸ The authors question why the provision only criminalises forcible or compulsory recruitment when mere recruitment should be considered a crime

The study also notes the lack of conceptual clarity in the legislation concerning child trafficking which has led to some confusion with regards to the understanding of what constitutes a child for the purpose of trafficking. The study calls for greater training, awareness raising and sharing of information at international, regional and national levels to ensue that the trafficking of children both within and over borders is addressed (Coomaraswamy and Sathkunanathan 2006).

Interestingly the study calls for the need for *regulation* as opposed to *prohibition* in the light of *survival* as opposed to *exploitation*. In this case it points to the need for recognising that some children may need to be employed in order to survive and notes that in such cases arrangements should be made for the education of these children (Coomaraswamy and Sathkunanathan 2006). However does such an approach leave greater room for children to be exploited? A rights-based perspective would argue that children have a right to contribute to the economic welfare of their households and many households depend on this contribution. Children need to be protected against adults who exploit them, but judgement needs to be taken in the light of economic realities and mere prohibition is unlikely to resolve their exploitation.

There is evidence that once trafficked and working in exploitative labour these children become traffickers themselves (IPEC 2001-2002). This does not only mean that these children are deprived of ways of overcoming their situation but also places other children within their contact (such as siblings) under risk of being trafficked and exploited.

6.5 The legal framework to address child labour

This section will focus on two main areas; the international framework put in place to address child labour at a global level and its relevance to Sri Lanka as well as national legislation that has been highlighted in the literature. The analysis will focus on providing an overview of how such a legal framework attempts to address child labour⁹.

⁹ This analysis does not attempt to provide a detailed analysis of conventions and legislation available in Sri Lanka to address child labour.

6.5.1 The international framework

Sri Lanka is a signatory to a number of international conventions which address child labour. Sri Lanka ratified the **Convention on the Rights of the Child (CRC)** in 1991 and the **Optional Protocol on Children in Armed Conflict** in 2002 (Coomaraswamy and Sathkunanathan 2006). Critics of the CRC argue that the civil rights accorded to children are not proportionate to their role as a 'minor' in society. Their dependence upon adults, and upon the state to a certain extent, makes it difficult for children to exercise the rights and freedoms accorded to them independently. There is a certain fear around the idea of children being seen as independent citizens with rights, but no concomitant responsibilities and duties (MARGA 2004).

"A much needed companion treaty is a Convention on Responsibilities of Children and perhaps of parents as all rights relate to obligations. Rights unrelated to obligations are unreal and ineffective in themselves as they do not lead to action." (MARGA 2004:5)

Sri Lanka is also party to the **ILO Convention on Minimum Age for Admission to Employment** which requires the abolition of child labour and the progressive raising of the minimum age for employment. This minimum age should be greater than the age of completion of compulsory school, greater than 15 (Coomaraswamy and Sathkunanathan 2006).

SL ratified the **Worst Forms of Child Labour Convention (WFCLC)** No. 182 in 2001 and is bound to implement a programme of action with a timetable towards elimination of these forms of labour. Member states are required to identify which activities pose a threat to safety, health and morals of a child by the very nature of the employment or the circumstances under which they are carried out. The convention proposed steps to prevent more hazardous forms of labour, rehabilitation and reintegration into society and provision of free basic education and vocational training for vulnerable children, with a special focus on girls (ILO/IPEC 2005).

The **SAARC Convention on Preventing and Combating Trafficking in Women and Children for Prostitution** was drafted in 2002, and requires seven ratifications before coming into force. Bangladesh, India, Sri Lanka, Maldives and Bhutan have ratified the convention while Nepal has submitted its ratification to the SAARC secretariat. It only deals with trafficking in women and children for the purpose of prostitution. The convention is supposed to

enable members to deal with various aspects of prevention, interdiction and suppression of trafficking in women and children. The convention defines trafficking narrowly and follows the earlier approach of trafficking that links it to prostitution and sexual exploitation. The 2000 Protocol takes note of trafficking involving coercion, fraud or abuse of vulnerability for the purpose of exploitation that takes many forms; forced labour and organ harvesting (Coomaraswamy and Sathkunanathan 2006).

The SAARC Convention on Regional Arrangements for the Promotion of Child Welfare in South Asia 2002 follows the CRC by defining a child as a person below 18 years of age. State Parties should 'uphold the best interests of the child as a principle of paramount importance', deal with trafficking and its end products, the worst forms of child labour and exploitation and calls for states to adopt a multi-pronged strategy to deal with the issue.' Bangladesh, India, Sri Lanka, Maldives and Bhutan have ratified this convention (Coomaraswamy and Sathkunanathan 2006).

6.5.2 National legislation

National legislature prohibits children below 14 years from engaging in any type of employment but allows children between the ages of 14-16 years to engage in work under certain conditions that ensure that the development needs of the children are met (Kannangara, De Silva and Parndigamage 2003).

In addition to this legislation provides for the protection of children from being employed at night and in private and public industrial undertakings - working in mines or quarries, or in other works for the extraction of minerals from the earth, ship building or in the generation, transformation or transmission of electricity or motive power of any kind. Children below the age of 15 years should also not be employed in a ship or boat, engaged in maritime navigation, whether publicly or privately owned, not including a ship of war (Kannangara, *et al.* 2003)¹⁰.

¹⁰ Source: Employment of women, Young persons and Children Act No. 47 of 1956, Employment of Women Young persons and Children (amendment) Act No. 43 of 1964, Employment of women Young persons and Children (Amendment) Law No. 29 of 1973, Employment of Women Young persons and Children (Amendment) Act No 32 of 1984

Legislation also prevents children from engaging in or being employed in street trading (trading of food or drink, newspapers, matches, flowers, and other articles, playing singing or performing for profit, advertising, shoe-blackening and other like occupation carried out in streets or public places). The law stipulates that children are prohibited from being employed before the close of school hours on any day on which he/she is required to attend school, or on days considered holidays, to engage in manual labour that can cause injury to life, limb, health or education. Children are prohibited from taking part in any entertainment or public performance (all acrobatic performances and all performances as a contortionist) that can cause injury to life or limbs (Kannangara, *et al.* 2003).

Children aged 14 – 15 years can work for up to 9 hours per day or 50 ½ hours per week, including overtime and rest time. Children aged 16 – 17 years are allowed to work 10 hours per day or 55 hours per week including overtime and rest time (Kannangara, *et al.* 2003)¹¹.

National laws governing child labour in Sri Lanka:

- Vagrants Ordinance No. 4 of 1841
- Abolition of Slavery Ordinance 1844
- Maintenance Ordinance No 19 of 1889
- Children and Young Persons Ordinance (CYPO) No. 48 of 1939
- Shop and Office Employees (Regulation of Employment and Remuneration) Act No. 10 of 1945
- Employment of Women and Young Persons and Children Act No. 47 of 1956 and Amendments
- Children and Young Persons' (Harmful Publications) Act No. 48 of 1956
- Registration of Domestic Servants Ordinance No. 28 of 1971
- The Constitution of Sri Lanka 1978 - Chapter 3 enshrining fundamental rights
- The Criminal Procedure Code No.15 of 1979 and Amendment Acts, Nos. 20 of 1995 and Nos. 28 and 29 of 1998

¹¹ Reviewed by the government in 2003 (Kannangara, *et al.* 2003).

- The Penal Code, as amended by Act, No.22 of 1995 and Act No.29 of 1998
- The National Child Protection Authority Act, No. 50 of 1998
- Compulsory Education Act, No. 1 of 1998
- Mines and minerals law
- Explosives Act
- Trade Unions Ordinance
- Brothels ordinance
- Obscene Publications Ordinance

(CPA 2003 and ILO/IPEC 2005)

It is worth noting that the literature also highlights some inconsistencies in the definition of the age limits of a child in various statutory laws.

Table 6.2: Age limits according to statutory laws

Relevant Act	Age limit
1. Employment of Women, Young Persons' and Children's Act	14 years, a young person as a person between 14-18 years
2. Penal Code	8,12,16 & 18 years
3. Factories Ordinance	14 years
4. Vagrancy Ordinance	16 years
5. Shop and Office Employee Act	14 years
6. Children's Charter of Sri Lanka	18 years
7. National Child Protection Authority	18 years

Source: (ILO/IPEC 2005)

The legal framework in Sri Lanka should be geared towards abolishing child labour from its roots. Although the Ministry of Labour is concerned with the subject of labour, the coordination of many other ministries and departments such as the Ministry of Women's Affairs and the Public Policy Department is essential. The actual implementation and monitoring of existing labour laws is unsatisfactory when considering the levels of children engaged in child labour. Civil society involvement is necessary. Child labour is prevalent in the informal sector and hence its regulation in a sector that is hardly governed by law is difficult (CPA 2003).

The Minister of Labour is empowered to make orders regarding the employment of young persons and areas in which such orders can be made include; the number of hours they can be employed per week and the periods for which they can be employed during the daytime, the intervals for meals and rest, the number of full day or half day leave to be given, and the conditions to be followed when they are employed (ILO/IPEC 2005).

The Penal Code of Sri Lanka recognises crimes such as the abduction, kidnapping and slavery, the crime of trafficking. Having signed the Convention of Transnational Crime, Sri Lanka is now seeking to introduce legislation in line with the Optional Protocol on Trafficking. The laws that protect children include the section criminalising the recruitment of a child, forcibly or compulsorily in armed conflict. The state is required to protect children from sexual exploitation and abuse. Other criminal offences such as kidnapping, abduction and slavery, prostitution, child domestic labour and other forms of child labour and begging and other offences are dealt with in Sri Lanka's legislative framework (Coomaraswamy and Sathkunanathan 2006).

The Penal Code does not have provisions that exempt the trafficked child from criminal liability. There is no legislative requirement that makes it mandatory to provide child survivors of trafficking with assistance and protection, including appropriate housing education, healthcare and legal aid, neither is there a provision that binds the government to take to take measures to protect children from re-victimisation (Coomaraswamy and Sathkunanathan 2006).

The Lawyers for Human Rights and Development (2000) call for a single piece of legislation to deal with Child Labour to avoid the confusion and weaknesses in the various different acts which currently deal with it. It notes that a uniform minimum age of employment (14 years in line with CRC and ILO standards) rather than different ages for different types of work should be implemented.

Employers of children in domestic service should be charged separately with employment of an under-age child. Currently they are usually charged with cruelty or sexual abuse but the requirement to have written permission from the Commissioner of Labour in order to prosecute for under-age employment may be deterring the police from charging offenders Lawyers for Human Rights and Development (2000:78). The penalties for employing under-age children need to be increased. All employers of young people should be

required to register with the labour office, and submit the child for a medical examination once a year (Lawyers for Human Rights and Development 2000).

Box 6.4: State institutions

Role of the Department of Probation and Child Care

Section 32 of the children's charter emphasises the children should be protected from activities that are likely to harm their physical and mental wellbeing. The Department mediates in 5 ways;

1. Prevention of children engaging in exploitative employment
2. Support legal action against employers of children.
3. Protection and care of rescued children.
4. Withdrawal of child workers from exploitative labour, re-unite them with family and reintegrate into society.
5. Rehabilitation of children subject to psychosocial trauma due to exploitation and abuse at the workplace.

National Child Protection Authority

The NCPA was established in 1999 to contribute to the protection of children through investigations, enforcement of the law, revision of laws, advocacy, research, legal aid and awareness etc. It acts in close cooperation with NGO and government organisations through 12 District Child Protection Committees (DCPCs) comprising multidisciplinary teams of professionals. It considers the employment of children as a form of abuse and renders service on awareness raising programmes, skills development programmes and monitoring reports of child labour abuses.

Source: ILO/IPEC 2005

6.6 Conclusion

This section has focused on the causes and effects of child labour on children by focusing on different types of labour that have been highlighted in the literature. All these forms of child labour point to poverty as the core cause and exacerbating factor of child labour. Poverty makes children vulnerable to entering the labour force and the informal nature of the work that children engage in make it easier for them to be exploited.

On the other hand children are keen to contribute to their household income situation and display some willingness to undertake such work. This aspect

cannot be disregarded in an outright call for prohibition because this willingness will ensure that the space for the exploitation of children in the labour forces will continue. While basic education may reduce child labour, it may also endanger the welfare of households who depend heavily on this source of income. In Sri Lanka the inclusion of light work makes the distinctions more difficult but it does recognise that there is space for children to take on some forms of work as it teaches children responsibility. This then reiterates the need to categorise work that children should and should not be involved in, the duration, holidays and leave, health and safety requirements, provisions for the registration of young persons and minimum salary requirements that will help regulate the working conditions of children. Children in child labour are employed in tasks typical to the informal sector. These are economically unrewarding, unstable and offer no opportunity for upward mobility and these children are likely to therefore remain in poverty.

Schools can be a venue for awareness raising campaigns on child labour and children's rights, but in Sri Lanka compulsory school attendance has not proved effective in addressing child labour. As part of a drive to address this issue it is important that efforts are made to register all births, particularly those areas which are the source of much domestic worker labour, such as the estate sector. Proper mechanisms can then be developed to ensure information is given to the relevant authorities who can then check on school attendance and identify children vulnerable to child labour practices (ILO/IPEC 2002).

There is also a lack of awareness and sometimes outright disregard on the part of parents and communities and employers. Many authors (Jayaweera *et al.* 2002, ILO/IPEC 2002, Rajendran 2004 and ILO/IPEC 2005) highlight the need to create more awareness amongst people about the characteristics of children, their rights, the illegality of employing children, the dangers and negative effects of child labour on children. These need to be taken up at the decentralised level with the participation of government officials, school teachers, community leaders and parents rather than only remain in legislation and conventions. Awareness campaigns and civil society participation can substitute for the present lack of detection, inspection and monitoring systems.

In support of a child's right to choose Jayaweera *et al.* (2002) propose that measures be introduced that allow children to attend school and work part-

time. The report suggests that this would be relevant especially in the case of children in rural areas who engage in agricultural activities. This would also factor in the seasonality of such labour. They also call for solutions that would make the education system more attractive to keeping children in school. At the policy level there is a need for greater and more accurate data collection and dissemination of such information towards targeted decision making.

There is a lack of legal literacy among the various agencies and actors involved in protecting child labourers and a need for more personnel to address these concerns. There is an urgent need to improve the availability of institutions and facilities to which child victims of exploitative labour may be referred for safe custody pending trial. They must be kept in separate homes and vehicles from other juvenile offenders. Child domestic worker-focused legal aid centres should also be set up. Since the majority of child domestic workers are girls there is a particular need to set up special care and services to girl-children (ILO/IPEC 2002).

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CHAPTER 7

Children in Migrant Mother Families

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7.1 Introduction

The numbers of Sri Lankan women joining the work force has been steadily growing over the last fifty years; the proportion of women in the work force has increased from 21.8% in 1946 to 37.2% in 2000 (Athauda, Gatk and Fernando 2002: 26). More recently, the phenomenon of 'migrant mothers' has become significant, with a large number of women choosing to work abroad in domestic positions for a few years in an effort to send money back to their families, improve their future prospects and those of their children if they have them. In 2000, 590,420 women were working abroad. 75% of these women were married, of which 90% had children (Save the Children 2006: 1). The numbers of children left without a mother could therefore potentially be large, the report estimates up to a million children could be affected.

The Bureau for Foreign Employment does not publish records of how many women who go abroad have young children, but it is possible to disaggregate the statistics available in order to get a picture of how many women of a certain age group are migrating from different districts. This table shows women of all ages since it is difficult to determine which age range may have young children, and impacts could be considered significant on children of all ages up to 16. The figures are presented in order of magnitude by district.

Table 7.1 Departures of women for foreign employment in 2006 by district

District	No. of women	District	No. of women
Kurunegala	18133	Batticaloa	2877
Colombo	12166	Nuwara Eliya	2511
Anuradhapura	8550	Trincomalee	2505
Gampaha	8333	Ampara	2482
Kandy	8111	Matara	2480
Puttalam	6177	Hambanthota	2172
Galle	5907	Monaragala	994
Kegalla	5845	Vavuniya	556
Kalutara	4990	Jaffna	438
Badulla	4099	Mannar	287
Rathnapura	3791	Mullativu	25
Polonnaruwa	3476		
Matale	3370	TOTAL	110,275

Note: These figures represent *departures* for that year rather than total numbers of women working abroad.

Source: Sri Lanka Bureau for Foreign Employment

These figures show that the top three districts for migration are Kurunegala, Colombo and Anuradhapura, showing some variance in the types of districts from which large numbers of women are migrating. Colombo and Kurunegala are both urban districts with relatively low percentages of people living below the poverty line, whereas Anuradhapura is poorer. However, surprisingly the poorest districts (in terms of poverty line headcount index) tend to come much lower down the scale – demonstrating that migration is not a trend restricted to poorer, rural and estate areas of the country. However, it should also not be forgotten that despite lower percentages of poverty in urban areas, total actual numbers of poor are high due to the high population density, therefore higher migration figures are not entirely unsurprising.

There is much sensationalist speculation in Sri Lanka about the impact a mother's absence through migration has on children, but a few recent studies have attempted to cast more substantial light on the issue. This chapter will look briefly at the issues raised by these studies.

7.2 Children in migrant mother families

Gamburd (2005) paints a picture of the 'average' Sri Lankan woman who migrates to the Middle East; in the 20-45 age group with six to nine years of schooling and married with two or more children. They are usually from a low income group and have not previously worked outside the home. Women who have children have to make a difficult decision to leave their children, and have to address issues of childcare while they are out of the country. Leaving children without a mother is a risk, but many decide to take that risk for the future benefit of their family:

"In estimating the pros and the cons of sustaining the rights of the child as against securing economic stability for the family, the parents discern that ensuring economic stability is more advantageous, even at the cost of infringing the rights of the child." (Priyadarshani, 2000: 35)

A recent Save the Children study (2006) interviewed families impacted by mother migration in order to gain a more accurate picture of the situation and the impacts. Overall it was found that families adapted well to the loss of the mother, with other figures taking on her role. Many fathers accepted a more flexible role on a temporary basis, taking on what would normally be considered women's roles. The care and love given to children was generally

of a high standard, despite not being able to fully compensate for the loss of the mother, particularly in the case of young children whose emotional needs were not met. In the sample, almost half of migrant mothers maintained contact with children through regular home visits, and many also made regular contact via telephone. The community and peer groups also played an important role in children's care and stayed in contact with the caregiver. Most studies found that childcare arrangements were adequate, even if not fully compensating for the mother's absence.

Families did benefit economically and had more material possessions than other families, such as newer clothes, access to social institutions, extra education and private medical treatment. All the studies reviewed concluded that the majority of children enjoyed a better standard of living through remittances. However, poor financial management meant that the eventual goals of migration, e.g. building a house, were rarely met.

All the studies did highlight some negative impacts on children, however, it is important to highlight that the cause and effect attribution is not straightforward. Since the great majority of working migrant mothers are from low-income families, many of these families are likely to have already been experiencing deprivation and vulnerability *before* the mother migrated. Negative consequences of mother migration are often sensationalised in the media, conforming to the stereotype of idealising the traditional role of the mother.

"The negative impact on children ranged from lack of care and neglect to physical and mental abuse. However, it would be wrong to conclude that the mother's absence was the only cause of such outcomes. Such families had been identified as those confronted with problems of family disorganisation prior to the departure. In fact foreign employment had been a mechanism of alleviating such stressful relationships." (Dias 2000: 6)

7.2.1 Impacts on children's behaviour

The majority of children observed by researchers in the Save the Children study did not exhibit too many behavioural problems. Just over 20% of children under the age of five suffered loss of appetite following the departure of the mother, and around 20% had increased tempers. Although 90% of children of migrant mothers did not suffer serious behavioural abnormalities, they were three times more likely to develop problems like bed wetting, night walking, temper tantrums etc.

Athauda, Fernando & Nikapotha (2000) carried out a study on 3 groups of pre-school children; mothers who worked abroad, mothers who worked in Sri Lanka, and mothers who didn't work. The characteristics shown by these groups were very different, and highlight the *existing* vulnerability of those families where the mother had chosen to work abroad. Issues such as low birth weight and low age of parents would have been pre-existing conditions, and illustrate the vulnerabilities which no doubt influenced the mother's decision to work abroad. The characteristics also show, however, that the *mothers* who go abroad are not the least educated, and therefore potentially have better prospects than those who remain unemployed. This group, however, also had fathers with the lowest education level and the highest proportion of drug addiction, which is a concern if children are left with the father as the primary caregiver.

Group 1 – Mothers worked abroad

- Highest proportion of low birth weight
- Lived in most polluted areas
- Highest percentage of households with single parents
- Lowest mean age of parents
- Illegitimacy was seen only in this group
- Lowest level of education of fathers
- Highest proportion of fathers addicted to drugs
- Highest mean number of illness episodes
- Risk of getting an illness episode was 1.8 times more than the other children
- The lowest mean clinic attendance in the first four years of life

Group 2 - Mothers worked in Sri Lanka

- Highest mean age of mothers
- Lowest level of pollution in living areas
- Highest mean clinic attendance in the first four years of life

Group 3 - Unemployed mothers

- Lowest level of education of mothers
- All children have Child Health Development Records

Table 7.2 summarises the behavioural patterns in different groups and shows that children whose mother is abroad have a significantly higher probability of developing behavioural problems in many areas compared to children in the other groups. However, the pattern is not as obviously negative as may be assumed. Problems sleeping, attention seeking and dependency are areas in which children of migrant mothers suffer more. However, they are easier to manage, and in areas such as poor appetite and temper tantrums, the levels are as high or lower than children in other groups.

The risk of children developing behavioural problems was found to be seriously exacerbated by the presence of a father who is alcoholic or a drug addict, and if the caregiver used bad practices to discipline the child (e.g. hitting).

7.2.2 Impacts on education

Athauda *et al.*'s study found that the educational achievement levels of those children with mothers abroad was clearly lower in Maths, English and First Language (based on last end of semester exam results) (2000: 23). Attendance rates in this group were also lowest. Children with working mothers in Sri Lanka achieved the highest academically - possibly due to higher education levels in mothers in this group and more motivation to achieve.

The education level of the mothers who migrated was relatively high, and higher than the father. The absence of such a key person in the household may be one important factor in the children's poor performance in education. The Save the Children study found that fathers spent very little time with children on educational activities, and this combined with their own low educational attainment was deemed to have a significant impact on the child's educational achievement.

Children of mothers working abroad are encouraged to invest more in their education. However, the father or guardians charged with their care often do not know much about their education or who they are associating with. The Save the Children study found that teachers often played the role of a 'surrogate mother', and the report recommends further research into the way teachers could be used to protect and support their needs. PTAs, preschools and Sunday Schools could also be used to offer support to these families.

Table 7.2: Children with ‘abnormal behaviour’

Behavioural problem	Mother migrated	Mother employed in Sri Lanka	Mother not employed and is at home
Always poor appetite	24.8%	29.3%	22%
Not dry by day	5.5%	3.7%	4.6%
Bed wetting	26.6%	15.6%	15.6%
Encopresis	5.5%	0.9%	0%
Difficult to settle to sleep	2.7%	0.9%	0.9%
Night walking	9.2%	2.7%	-
Lethargic	10.1%	12.8%	7.3%
Lack of concentration	10.1%	5.5%	10%
Dependency	8.2%	6.8%	7.3%
Seeks a lot of attention	21.1%	10.1%	8.8%
Easy to manage	16.5%	9.2%	10.1%
Temper tantrums	17.6%	6.4%	17.8%
Often moody	2.7%	0.9%	0.9%
Has a lot of fears	1.8%	1.8%	0.9%

Source: Athauda, Fernando & Nikapotha 2000

7.2.3 Alternative caregivers

In the majority of cases those who took over the primary caregiver’s role were grandmothers, 50%, with 25% of fathers taking on this role. The majority of children demonstrated a close relationship with caregivers and a positive temperament. However, despite this 77% of the children said they felt lonely due to the absence of their mother (Save the Children 2006: 16). Fathers tended to have to take on more childcare roles not usually associated with the male role, but 86.2% of fathers had other responsibilities which sometimes prevented them from being the primary caregiver. Many relied on help from neighbours or extended family, however, children with older caregivers (over 50 years) exhibited more behavioural problems and had problems communicating with them.

Fathers’ stress levels were higher in families with migrant mothers, and use of alcohol and drugs was also clearly higher. Children in households where alcohol abuse was *not* a problem performed better at school and fewer expressed sadness and loneliness.

Perceptions of high levels of abuse by drunken fathers were not borne out in the study.

“The study sample did not indicate high levels of violence by fathers against children, dislodging the negative perception of fathers as fundamentally abusive in the absence of the mother.” (*ibid*: 20)

However, some stories of sexual abuse, suicide and early marriage were brought to researchers from outside the sample. This anecdotal evidence highlighted the potential vulnerability of children without a mother figure, but was not substantiated by evidence from the sample.

Girl children appeared to be more affected by the loss of the mother; they were expected to take on more household duties and felt the lack of someone to talk to about sensitive issues. Children with disabilities tended to face more neglect if the mother was absent.

A rural/urban divide was found, with more rural children saying they felt “sad” and “lonely” (*ibid*: 21) and more suffering from behavioural problems. These children were also more dependent upon their caregivers than those in urban areas where the children were more independent. Urban children had other issues with their social environment as migrant mother families tended to live in slum areas where children are more vulnerable to other risks.

Despite this sense of loneliness being expressed, it is important to stress that children were also found to have a good level of understanding of why their mothers had gone abroad to work;

“My mother’s absence makes me sad and lonely, but she went abroad for our own good.” 16 year old boy, Save the Children 2006

This demonstrates the ability of children to cope with and rationalise the loss of their mother for a period of time.

7.2.4 External support

Relatives and neighbours become more important when mothers migrate and close relatives and neighbours are more likely to take over the care of a child rather than resorting to the option of childcare or servants (Priyadarshani 2000).

97.3% of respondents said that they did not receive any official support from a government agency (Save the Children 2006: 25). Almost half believed that this was due to their marginalised position in society as migrant mother families often live in deprived and remote areas and the problems that children experience are often linked to broader development issues.

“this could mean that many PCGs [Primary Care Givers] are trapped in the role of caregivers to the extent that they are physically and/or socially isolated from the rest of the community. It also indicates that outreach programmes for child welfare are weak, and not responsive to the needs of disadvantaged communities.” (*ibid*: 26)

7.3 Conclusion

This brief overview of some of the main issues impacting families with migrant mothers highlights the vulnerability of the families affected. However, it is important to stress that this vulnerability is often a symptom of existing problems linked to low socio-economic status and poor family or community cohesion. These are push factors which influence the mother's decision to leave in an attempt to improve the family's situation. Unfortunately, Dias (2000) suggests that this aim is rarely met by migrant mothers as paying back debts often takes longer than presumed, and the money is not handled well by the main caregiver in many cases.

Sri Lanka is a signatory to the 1996 International Convention on Protection of the rights of All Migrant Workers and Members of their Families. This includes ensuring that the social and economic needs of their families are considered. However, the United Nations Committee on the Rights of the Child has stated that families of migrant workers,

“receive little or no assistance with their child rearing responsibilities while working abroad.” (Save the Children 2006: 5)

Save the Children recommends that the Sri Lanka Foreign Employment Bureau (SLBFE) should offer advice on suitable childcare provision and on how to ensure remittances are used to the benefit of the child. The Ministry of Education also has an important role to play in encouraging teachers to monitor the performance and behaviour of children of migrant

mothers. There is currently a lack of co-ordination and consistent support available, but some cases of good practice exist, where NGOs or local government organisations have mobilised support for children in migrant mother families.

On 7th March 2007 the government announced that it was banning women with children under the age of five years from working abroad. Whilst this ban may have been brought in with the best intentions to seek to reduce some the impacts raised in this chapter, in the absence of rigorous back-up and support mechanisms a blanket ban will do little to address the core reasons why women feel the need to work abroad, and the issues that these vulnerable families face even before the mother leaves. The remittances that mothers send back are vital, not only to the families but to the country as a whole. In 2006, workers' remittances amounted to US\$2.2 billion, equivalent to over 9% of the country's gross domestic product.

The key issue which came out of these studies is that children need a nurturing and supportive environment. If caregivers are able to offer that, then the absence of the mother can be mitigated to a large extent, and the injection of extra income which allows more opportunities may provide long-term benefits which outweigh the negative effects of the mother's absence. The ban reinforces stereotypes of a mother's nurturing role, and the importance of nuclear families, ignoring the equally important role of fathers in bringing up children. The government's press release on the issue justified the policy saying that the children of migrant women,

“have become helpless and vulnerable, and lack nutrition and healthcare.”

This statement is based on limited statistics without considering children's predisposition to such risks, and also paints a picture of children as 'helpless' dismissing the potential resilience of children who can usually cope as long as alternative care arrangements are made.

Not enough emphasis has been placed on alternative solutions to the issues which families are faced with. The research showed that children in the responsibility of older caregivers were more vulnerable. Given the high numbers of children being cared for by grandmothers, more focus needs to be placed on the kind of support that the state can offer families who are seeking to raise their socio-economic level through

migrant labour. The Save the Children report (2006) found that 97% of families of migrant women had no access to public social care services, and 95% of them were not even aware of what services were available to them. With more support for childcare and advice on investing the money received from remittances, a mother's absence may not be as deleterious to children as is often assumed.

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CHAPTER 8

Child Abuse

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8.1 Introduction

Child abuse is a wide term which covers a range of 'deliberate' actions which impact negatively on a child's wellbeing. These actions can range from verbal bullying at school, in the community or at home, to commercial sexual exploitation and trafficking. Some types of abuse, commercial exploitation for example, are more prevalent in poorer communities, but children from a range of different socio-economic environments are vulnerable to abuse. This highlights the importance of taking into account a range of other significant factors which leave children vulnerable to abuse, such as lack of education, inadequate infrastructural and legal support, lack of empowerment and awareness on the part of the child and gendered and age specific power relations.

Girls most often face the threat of abuse in the home and within their community where they may be subjugated by strong male family members or friends, or through trafficking for domestic labour or prostitution. In tourist areas, however, boys are most vulnerable to foreign paedophiles. Geographically, certain areas are more vulnerable to different types of abuse:

- Urban slums – children are vulnerable to different forms of abuse from child labour to sexual exploitation
- Plantation areas – these areas are the main source of child labour
- South-West coastal areas – children (particularly boys) are vulnerable to 'sex tourism' and commercial sexual exploitation
- North Eastern Province – many children are used as labour in fishing 'vadiyas' or in refugee camps (particularly areas around Batticaloa). This is also an area where there is high demand for children used for sexual exploitation. Children living in welfare camps are at risk of conscription or trafficking for child labour.

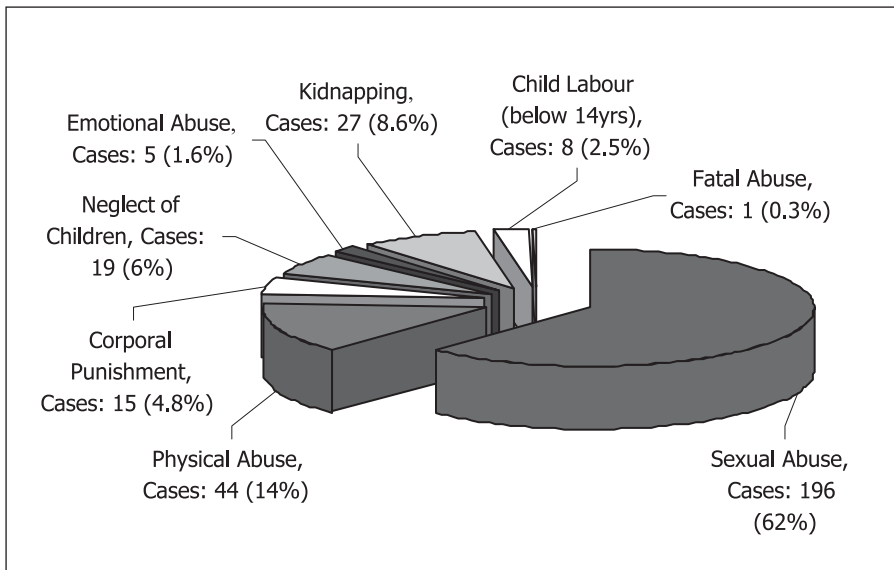
Child abuse is acknowledged to be a significant problem in Sri Lanka, despite the fact that much evidence remains anecdotal. Particular focus was placed on child abuse and child rights during the 1980s and 90s following a surge in research and publicity of the issues during the 1980s. Under the Bandaranaike Presidency the National Child Protection Authority (NCPA) was introduced in 1999 to address the growing call for a more formal response to issues of violent and sexual abuse. The NCPA gathers statistics on violent, sexual and labour abuse, as well as

providing support through psychologists, child protection officers, and awareness raising campaigns on child rights. Sri Lanka is a signatory to the Convention on the Rights of the Child (CRC) and significant efforts have been made to communicate directly with children and parents on the risks and impacts of abuse.

Despite data collection efforts by the NCPA, there are still large gaps in knowledge about the status of child abuse in Sri Lanka. The statistics collected by NCPA are based on *reported* incidents, and since many incidents go unreported this data can only be seen as indicative. Alternative literature and data available on child abuse in Sri Lanka is limited, and much of it is outdated, ungeneralisable (e.g. small sample sizes) or unreliable, so a comprehensive review of the different types of abuse Sri Lankan children are vulnerable to is restricted. Little information is available, for example, on violent abuse or on mental abuse such as bullying.

The strong emphasis placed on sexual abuse during the 1980s and 90s, particularly on commercial sexual exploitation perpetrated by tourists visiting Sri Lanka, spawned a large amount of literature on the subject, possible skewing the balance of research on other types of abuse, or even on domestic sexual abuse. ILO and UNICEF statistics estimate that around 40,000 children are used as prostitutes in Sri Lanka, while 5,000 to 30,000 boys are used by Western paedophiles. But this range demonstrates how statistics vary wildly on the numbers of children involved in sexual exploitation, and much of the data is therefore unreliable. However, sexual abuse remains by far the highest form of abuse reported to the NCPA, whether from commercial exploitation or domestic abuse (see Figure 8.1).

This chapter will focus on sexual and violent abuse; child labour is dealt with separately in this study. Insufficient information on emotional abuse and child neglect is available to provide a reliable summary.

Figure 8.1: Child Abuse Cases Reported to NCPA - 2005

Source: National Child Protection Authority

8.2 Sexual abuse

This section distinguishes between commercial sexual exploitation, where children are abused for commercial gain, and domestic sexual abuse, where children are abused within their own home or community, usually by people known to them.

8.2.1 Commercial sexual exploitation

Commercial sexual exploitation (CSEC) takes place all over the country, but is most documented in relation to 'sex tourism', looking specifically at the case of commercial sexual exploitation in coastal areas where foreign tourists prey upon young boys in particular. There is also some evidence of trafficking of children for use as prostitutes, although there are a lack of studies done at the ground level to look into this issue, so statistics are limited/unavailable and estimates are often based on small sample studies.

In Sri Lanka child trafficking mainly occurs from rural to urban or tourist areas, for the purposes of domestic labour and sexual exploitation. There is little solid

information, but estimates indicate that the number of children trafficked in this manner range from 10,000 to 12,000, with estate sector children particularly vulnerable. One example of this was documented by MARGA (2004). A 15 year old girl was sent to work as a domestic help from the age of 15. Her grandmother was aware that she was being physically abused but did not take any action in return for regular payment. After being raped by the master of the house at 16 the police became involved and she was sent to a Girls House. She does not know what happened to her employers following the court case and is waiting in hope for her grandmother to take her home. She is too scared to run away as she is Tamil and feels a stranger in Colombo.

“I feel very unhappy when I see other children's families visiting them. I am waiting for my grandmother or uncle or even the police to take me to my home. I don't want to stay here and I always wait for my grandmother to come.” (MARGA. 2004: 36)

The MARGA study focused on one village in the North where it found evidence of tacit and active encouragement by the authorities and communities of the provision of a 'service' to soldiers involved in the conflict. This opened up a sex industry in the village, encouraging the abduction and trafficking of young girls to the area who were then forced to work in houses and hotels. Money was withheld so that they were at the mercy of their 'owners'.

Most children involved in prostitution are also used in the production of pornography, much of which is now distributed globally via the internet. Investigations have shown that many pornographic images contain Sri Lankan children, and Sri Lanka has been advertised as an 'ideal' destination for paedophiles on websites. This exacerbates the issue of 'sex tourism', and in coastal areas the problem is much more visible and possible more widespread. Tim Bond's report in 1980 (*Boy Prostitution in Sri Lanka*) first galvanised the government into taking some action to strengthen laws against commercial sexual exploitation, but wary of putting off tourists the laws introduced were not as stringent as they could have been. Efforts to strengthen the laws, and issues with the law are considered later in this chapter.

There are two categories of victim in the coastal areas; 'Beach Boys' are 15-18 years old who usually work with an older pimp and are not necessarily 'forced' into prostitution, and 'bonded children' who are bought and sold into prostitution against their will. Bonded children can range in age between 6 and 14 years. Statistics vary wildly on the numbers of children involved in

sexual exploitation – from 2,500-5,000 (2001, Commercial Sexual Exploitation of Children, SAP Sri Lanka) to between 20-30,000 (Government of Sri Lanka & UNICEF 1999). This wide discrepancy highlights the unreliable nature of quantitative evidence in this area, and one should be wary about relying on statistics from one source. Ratnapala (1999), for example, cast doubt on many of the estimates of numbers of children involved in prostitution – questioning the methodologies used. Her comprehensive survey of those areas where most tourist sexual abuse is reputed to take place revealed much lower, but possibly more accurate, numbers than are usually reported (see table 8.1).

Table 8.1: Numbers of children involved in CSEC (1999)

	Under 16	Under 18	Total
Colombo	265	240	505
Mount Lavinia	35	60	95
Negombo and environs	178	45	223
Kalutara/Bentota	85	25	110
Hikkaduwa	165	85	110
Unawatuna	48	36	84
Tangalla	46	-	46
Other areas	104	42	146
	926	533	1,459

Source: Ratnapala, 1999, pp.38

Other studies imply that the numbers of boys involved in CSEC in coastal areas is much higher than girls. Amarasinghe (2002) interviewed 120 children who had been victims of sexual abuse and in beach resorts¹² between 67% and 100% of children interviewed were male, indicating the high prevalence of boys involved in the sex trade in these areas.

Deprivation, exclusion and vulnerability all play a role in making children vulnerable to exploitation in this manner. These factors 'push' children into a situation where their wellbeing is then negatively impacted, leading to further deprivation, exclusion and vulnerability. For those children not forced into prostitution against their will, important push factors are poverty, lack

¹² Hikkaduwa, Tangalle, Negombo, Unawatuna and Mount Lavinia

of employment opportunities, and the lure of remunerative jobs and better lives. Poverty and deprivation in the coastal areas which tourists frequent is an important contextual factor. Whilst these may not be the poorest communities in Sri Lanka, the relative disparities between the lives and incomes of tourists and local residents highlights deprivation, and the gifts or income which boys working with tourists receive act as an incentive to those who aspire to lift themselves out of poverty. Poor living standards and poor financial management create the motivation to seek alternative income sources.

Many children living in poverty have to become adults at an early age and in this process of fending for themselves with little adult supervision (often having dropped out of school early) they are vulnerable to exploitation. Poverty often forces children out of school, and once they leave school their opportunities and prospects are limited. Low IQ and education levels in children and high early drop-out rates are associated with patterns of sexual abuse and exploitation (Dias 1999). Drop-outs become easy prey for sexual exploitation, whether pushed by their parents or lured by paedophiles, sex tourists or other children working in the sex trade. This highlights the importance of communicating the benefits of staying in school for as long as possible.

Box 8.1: Case Study of CSEC

An offender, R, advertising on a gay website requesting children for companionship was detected by the NCPA. Using a decoy posing as a child they contacted him but on his arrival in Colombo were unable to get enough evidence. Upon being contacted by a second decoy, R grooms who he thinks is a child for sexual activities. On his second arrival in Colombo the first decoy takes over and accompanies R on sight seeing trips etc. and gathers information concerning other children who have been exploited by R. Having returned to Colombo, R offers the decoy pornographic pictures and invites him to his hotel room. An investigation team follows and has R under constant surveillance until sufficient evidence is gathered. R is finally arrested while he is in the company of two children. The children who had been subject sexual abuse had been introduced to R through a maternal uncle and the parents who were receiving financial aid from R were not prepared to believe that their children were being abused. The cases of both R and the trafficker have been taken to high court. The country of R's origin was informed of R's offence and his passport was revoked as NCPA was in contact with law enforcement authorities of his country.

Source: Coomaraswamy & Satkunanathan 2006

There are gendered vulnerabilities in sexual exploitation; in tourist areas it is predominantly boys who are involved in and therefore vulnerable to CSEC, but girls are more vulnerable to prostitution and trafficking. The negative stigma attached to girls' involvement in prostitution is, however, much more severe than for boys, and the more passive acceptance of CSEC amongst boys in communities could be said to make boy children more vulnerable to such abuse.

Children from broken families, where one or both parents were missing, or where the family was dysfunctional were also found to be more vulnerable to falling into CSEC (Amarasinghe, 2002: 79). Family plays an important role in CSEC; if the family environment is threatening or dysfunctional children may avoid staying at home and are vulnerable to being 'adopted' by an alternative support network, becoming bonded to a pimp and ultimately becoming pimps themselves.

Additionally, studies have found that some parents force their children into prostitution, or that children entered prostitution with the connivance or encouragement of their parents (Coomaraswamy & Satkunanathan 2006). Amarasinghe's study (2002) found that more girls' parents knew about their sexual activities than boys; 48% of girls' parents were aware compared to 16.7% of boys' parents.

"Qualitative data... shows that the culture that has evolved in these families and their communities is a factor that has a significant influence on children... The parental 'push' of children towards sex, the involvement of relatives and friends as intermediaries, and the notion that 'sexual purity' is not an important social value, are the main characteristics of this particular culture." (Amarasinghe 2002: 79)

Box 8.2: Paths into prostitution

Case studies demonstrate the different ways in which children become co-opted into prostitution.

1. **Willingly:** Ranjith was from the age of around 10 years, used by older boys to gratify their sexual urges. Around his early teens he hung around the beaches in search of tourists, more for fun than money. Gradually, however, he realised the financial benefits to be gained and started recruiting other boys to satisfy his customers. He has just recently completed building a new house funded by a group of German tourists who frequent the area.
2. **Innocently:** Charley was born to a very poor family a few miles interior from the coastal resort of Aluthgama. A friend of the family found him to be quite bright and brought him to the town as a ten year old to assist in his shop and attend school at the same time. On his way from school he used to sit on the beach and just gaze out to sea for a few moments before making his way to the shop. One day a tourist passing by made his acquaintance and invited him to his hotel room. As the friendship grew his attendance at school began to suffer until eventually he dropped out altogether. He frequently left the shop of his guardian on various excuses and started staying away some nights and was often seen in the company of tourists. The guardian quickly returned the boy to the parents but he was back in town soon after. Now he is seen riding push bicycles and dressed in flashy clothes but he keeps his whereabouts a secret.
3. **Forcibly:** Jayantha was a good looking boy of sixteen and though not too bright was well behaved and attended school conscientiously till one fateful day a boy of the same age he knew in the neighbourhood asked him to join him for a walk. Having walked some distance the companion placed a knife at his neck and forced him to enter a house where he claims he was forcibly taken by eight foreign tourists. The boy was highly traumatised and the family very upset, but some sort of compensation was paid and the story was hushed up. Jayantha is now receiving special care from an organisation in Negombo and may one day be helped to lead a normal life.
4. **Recruited:** Rohana, a fourteen year old, was from a lower middle class family and was not too interested in his studies. He joined a group of boys who were drop-outs and began to notice that they had lots of money and dressed well in spite of being from poor backgrounds. One day one of his friends turned up on a brand new motor cycle. Rohana was envious and questioned the friend. He entertained them at parties and gave them plenty

Box 8.2: Paths into prostitution (contd.)

of money and they had even bought the bike for the boy. In return all they had to do was have a nice time and just do what the tourists requested. He was invited to the next party, where he indulged in liquor and drugs for the first time at a house situated near Galle. He was too 'high' to object to being molested by two of the foreign tourists who were present. The irony of the whole exercise was that though he has attended a few more parties at the house he has not had much financial benefits yet, and his parents have become rather suspicious of his activities causing conflicts between them, threatening their domestic stability.

5. Coercively: Offering the golden dream of adoption abroad or locally with remittances of continuous funds for their upkeep has helped paedophiles to get round not only the children but also their gullible parents in many cases.

Source: PEACE 1996, pp.55-57

It is often highlighted that 'beach boys' are not all 'passive' victims, many make a proactive decision to become involved in sexual relations with tourists for financial gain. Amarasinghe's study found that 74% of boys claimed to be voluntarily involved in sexual activities, as opposed to 31% amongst girls. This emphasises the importance of *choice and responsibility*, characteristics which are often ignored and denied to children in literature on child poverty and abuse. Boys living in poor coastal areas where foreign tourists create a *demand* for sexual services are more likely to be tempted into this type of exploitative work, and there was little evidence of families having forced their children into such work. However, responses to interviews also demonstrate the unpleasant feelings they have about what they were doing, highlighting the conflict many face between their choice to engage in commercial sexual relationships, and their hurt at the exploitation involved. Most children questioned by Amarasinghe and others did not have a positive outlook on the future and express feelings of misery and anger about society.

"The children as observed were not responsive to the interviewers, inconsistent with what they said and often did not like to discuss the past; all these are signs of a poor orientation towards the future." (Amarasinghe, 2002: 64)

Table 8.2: Unpleasant feelings affecting the respondents

Unpleasant Feelings	Male (n=78)	Female (n=42)	Total
Fear	15.4	23.8	18.3
Wrong/guilt	24.4	9.5	19.2
Frustration	6.4	14.3	9.2
Other	5.1	2.4	4.2
Fear, guilt & frustration	48.7	50.0	49.2
Total	100	100	100

Source: Amarasinghe 2002, pp.70

The effects of CSEC make children more vulnerable to continued poverty and emotional and physical problems.

Ex-boy victims of sexual exploitation have poor prospects, often becoming agents and traffickers of children themselves. Once they are no longer in demand they may also become involved in drug dealing, theft or begging to maintain an income.

8.2.2 Domestic sexual abuse

Sexual abuse within the victim's community or home is highly prevalent in Sri Lanka, and can be a precursor to vulnerability to commercial sexual abuse. The controversial and taboo nature of the subject means that it gets little attention, in fact less media and research attention than CSEC, which may detract from the seriousness of the issue. This also means that reliable quantitative evidence is not available as it is likely that a small proportion of cases are reported. The extent of the problem is evident from smaller scale studies where children or carers (including medical staff and teachers) are questioned and provide qualitative, anecdotal evidence.

One such study conducted by De Silva (2001) with university students revealed very worrying levels of abuse. In an initial sample of 899 university students, 18% of males and 5% of females reported having been abused during childhood. After grouping respondents into three social classes it was found that 25% of the *poorer* male students had been abused compared to 15% of the middle class males. This indicates a clear link between lower socio-economic status and vulnerability to abuse.

Following this initial sample, a lecture on child abuse was conducted with 818 university students where all forms of child abuse were described and defined. The results from the same questionnaire with these students were even more serious, with 21% of males and 11% of females reporting sexual abuse. 12% of males admitted having sexually abused a child at least once, and 64% of them reported having been sexually abused themselves as children (De Silva, 2001: 232). This reinforces the adage that the abused often become the abusers.

A separate study was carried out by Silva, Herath and Atukorala (2002) looking into 21 cases of female incest in one area in order to examine the circumstances in which incest occurs and the impact it has upon the victim. No direct interviews were carried out due to the sensitivity of the situation and the ethics of the potential impact upon the girls of an interview, but the authorities co-operated in handing over all records and interviews carried out with relevant caregivers.

The overwhelming majority of incest cases reported in Sri Lanka are of female victims. This could be because females are more usually the victims, or it could be because male incest is less often reported as it is considered less serious. Silva *et al.*'s study suggests that the former is more likely as the pattern of incest found amongst the case studies tended to be one where a female child becomes the victim or a passive partner of a dominant male and she is unable to resist his advances due to fear, helplessness and gender/age subordination (Silva *et al.*, 2002: 7). Male to male sex did not appear to have been taken as seriously either in the community or in the courts, and is often considered to be consensual – whereas male-female sex is seen to be violating the sanctity of young women and is taken more seriously.

Poor community relations and social cohesion is cited as a factor in abusive communities. This is particularly prevalent in communities where there is a caste or class hierarchy. The more powerful families are able to take advantage of the marginalised, poorer families with impunity. The majority of incest cases reported also come from poor socio-economic backgrounds characterised by unemployment, insecure income sources and poor housing facilities, confirming the trend shown in the previous study.

“Most incest cases have been reported from types of settlements characterised by a high degree of unemployment or casual employment, congested and poor housing where sleeping space is

limited, manifestations of social breakdown including alcoholism and family disintegration and widespread poverty.” Silva *et al.*, 2002: 15

Family breakdown was also a key factor in incest cases, with patterns of domestic violence and alcohol abuse common – confirming the findings of an earlier study by Wijayatilake and Guneratne which found strong links between domestic violence and incest (in *ibid*: 59). Exposure to substance abuse and high levels of alcoholism in fathers are associated with vulnerability to abuse (Dias, 1999). Another study by Amarasinghe (2002) found that sexual abuse was prevalent in broken families, where one or both parents were missing, or the family was dysfunctional. Children of single parents, very young parents and parents with poor parenting skills are also at risk from abuse (De Silva 2002).

The absence of the mother in particular is seen to be a major risk factor in incest cases, with many children being shuttled between relatives having lost a constant, close carer. In more than 50% of cases mothers had left to take up jobs in the Middle East. In some cases women may collude in covering up cases of incest and take the side of their husband. However, it is important to highlight the gender bias in the context of abuse. Incest and domestic sexual abuse is often couched in anti-feminist terms and blames the mother for much of the problem. Male single parents are treated with much more sympathy than female single parents, and behaviour such as alcoholism or incest is often excused. The male role as head of the household means that he takes on a dominant position within the family and he expects his domestic and sexual needs to be met. If the wife is not present, he may turn to another member of the family to meet those needs.

“Society needs to be aware of the mother’s social powerlessness in all this, especially if she has gone abroad to work and is judged a bad mother and a bad wife.” (Silva *et al.*, 2002: 11)

Victims of sexual abuse are often found to have a poor level of education. This may be a push factor in making children more vulnerable, but it is also an impact as the stigma attached to incest and a move to childcare centres may have disrupted their education.

The reporting of incest cases commonly takes place through school teachers after a child has confided in them. This can be because the child does not want to reveal it to other family members, or because a family has chosen to cover it up. Family is not always a protector, but can pose a threat, particularly when so much abuse occurs within families – particularly between young girls

and fathers and uncles. In an extended family system the others may conceal the abuse of a child by one family member for fear of stigmatisation by the rest of the community (De Silva, 2002). Neighbours also sometimes report on cases of incest, approaching the police, school or National Child Protection Authority. However, reporting a case can sometimes increase the vulnerability of the child – other aggressors may take advantage of the situation, or there is evidence that the child may sometimes become more promiscuous. It is believed that many male child sex workers are initiated into sex through incest before becoming further victims of commercial sexual exploitation.

Box 8.3: Contributory factors to vulnerability

Some key factors which make children more vulnerable to sexual abuse:

- Low income levels and poor financial management
- Poor living standards, including lack of private washing facilities
- Isolation, lack of infrastructure and services
- Family conflict and unstable home conditions
- Low parental educational level
- Mothers absent due to work abroad
- Low IQ and education levels in children and high early drop-out rates
- Exposure to substance abuse
- High levels of alcoholism in fathers
- Displacement, particularly street children or those in refugee camps
- Exposure to adult sexual activity within the house or community
- Exposure to predatory family or community members

For girls the implications of being associated with sexual abuse can be extremely serious. The exalted status of a girl's virginity for marriage in Sri Lanka places a heavy burden on young girls who are victims of sexual abuse.

“Should a girl child fall victim to rape, she faces further trauma from society, whether the rape arose from incest or otherwise. The existing social and legal pressures as well as cultural taboos isolate her. Her social upbringing ensures her loyalty to family honour. She was abused, and the matter stays private.” (Silva et al., 2002: 12)

Marriage is sometimes seen as a way of managing risk of abuse from family or other members of the community. Girls who have been abused are often married

off to someone else as a way of protecting them from further abuse, or in some cases girls are forced into marriage with the abuser, becoming vulnerable to long-term abuse and insecurity. This can happen to avoid prosecution (see later section on the law), or to reduce the shame of implied abuse.

8.3 Physical abuse

Until recently physical child abuse was not taken seriously enough in Sri Lanka and a certain culture of acceptance has prevailed. Until very recently corporal punishment was allowed in schools, and doctors often do not consider physical injuries sustained from relatives or teachers to be 'abuse'. The infrastructure and procedures necessary to follow up on abuse cases did not exist until recently, so even those doctors who recognised abuse did not have anything to turn to. Very little data exists on physical abuse, but it is the second most prevalent form of abuse reported to NCPA (see figure 7.1). However, the fact that the NCPA cases still make up only 14% of the total would suggest that it is still very underreported.

The NCPA's *Report on the National Consultation on Violence Against Children* (2005) highlighted certain key issues around the area of violent abuse against children. The report confirmed that corporal punishment appears to be accepted in society and that much needs to be done to change attitudes and perceptions. They also highlighted the significant issue of violence in orphanages and children's homes which needs to be addressed. However, the report raises a number of factors which limit the extent to which institutions can reduce the incidence of violence. The government has problems recruiting skilled professionals to the Probation and Child Care Services as salaries are insufficient and workloads too high. There is also a shortage of trained personnel available for counselling or trauma therapy. Linked to the issue of complacent attitudes in society, the report also highlights the lack of accountability in place for those who are responsible for children, and unhelpful attitudes towards such cases in the judiciary. More mechanisms need to be set in place to hold organisations/institutions and individuals accountable for preventing violence against children.

A step in this direction was made recently with the outlawing of corporal punishment. The Corporal Punishment (Repeal) Act, No. 23 of 2005 was enacted to prohibit all forms of corporal punishment, including penalties imposed by courts and by institutions such as prisons and children's homes for disciplinary offences. Corporal punishment has been recognised as degrading

and psychologically harmful to children, and an infringement of their human rights. However, many teachers do not have sufficient training in ways to keep order and so some resort to hitting children instead. Regular newspaper articles testify to continuing occurrences of corporal punishment despite the change in the law. More focus needs to be placed on training teachers, principals and education officers to deal appropriately with punishment and to promote a sense of mutual respect between teachers and pupils.

While rules on corporal punishment within institutions can be closely regulated, changing attitudes towards physical abuse within the home is more difficult. Recent DCS and UNICEF surveys (2003, 2004) sought to explore parental perceptions of abuse in selected districts¹³, including in the North and East. The surveys found that parental awareness and understanding of physical abuse is correlated closely with sectoral characteristics (estate, rural, urban) and parental education levels. Awareness in urban areas is much higher than in rural and estate sectors and much higher amongst educated parents.

There was a high level of awareness amongst parents that *using children as domestic servants* was abusive. Most parents, however, were indifferent to the classification of *using children in war* as abuse, with only parents in Batticaloa district expressing a high degree of concern. *Assigning children to domestic chores* was considered abuse by a relatively low, but still significant proportion of parents. *Looking after younger siblings*, however, was not considered abusive. *Beating and severe punishments* were considered abusive by a significant majority in the districts outside the North and East. This perception was still high but somewhat reduced in districts in the North and East. *Child labour* was not considered abuse in all the districts outside the North and East, but in the North and East responses were more mixed. Perceptions on *not giving enough food to children* were more mixed, with most districts recording low levels of concern, but in Nuwara Eliya, Tricomalee, Mannar and Ampara around 20% of parents classified this as abuse (DCS and UNICEF 2003: 75; DCS and UNICEF 2004: 82).

Abusive households often suffer economic hardship due to the extra burden of health costs, or inability to work due to emotional or physical problems. Children are impacted as they may have to take on additional work within

¹³ Anuradhapura, Badulla, Ratnapura, Hambantota, Matale, Moneragala, Nuwara Eliya, Jaffna, Mannar, Vavuniya, Batticaloa, Tricomalee and Ampar districts were covered by the DCS/UNICEF surveys.

or outside the home, and are deprived of good schooling and other basic needs due to economic hardship. This affects their future prospects, locking them in a cycle of low achievement and potentially further abuse. Children who are traumatised by corporal punishment are at risk of becoming adults who perpetuate violence and abuse. These children are vulnerable and live in an insecure environment, physically, emotionally and economically. Even if children are not victims of violence themselves, if they live in an abusive environment they are still vulnerable to emotional trauma, and are at increased risk of physical abuse in the future.

“Even if the violent spouse does not physically harm the child, the child lives in an unhealthy, unsafe environment, and manifest symptoms of battered children (i.e. nightmares, excessive fear, aggressive behaviour, learning negative attitudes etc.). Children from abusive homes can also suffer in the critical spheres of education, health and nutrition through neglect.” (Ganeopola, Thalaysingam 2004: 10)

The NCPA (2005) recommended that more community systems are put into place to protect children from abuse in families where one or more parent is away from home. It also suggested that Samurdhi workers should be mobilised to detect and prevent abuse in poor families. Staff in childcare institutions need to be trained and given the correct skills to work with vulnerable children, and a back up to this should be put in place by strengthening links with the Human Rights Commission to try and curb violence in institutions.

8.4 Emotional abuse

Little information is available on the exposure of children to emotional abuse or mental trauma, but in a country which has suffered civil war and violent insurgencies, there can be little doubt that children in conflict affected areas have been affected by emotional abuse. The DCS and UNICEF surveys (2003, 2004) questioned parents about their understanding of emotional abuse, and the detailed results provide an interesting picture of awareness levels. Overall, most parents are aware that *using derogatory and/or abusive language* is considered to be emotional abuse. Interestingly, the majority of parents did not consider the other examples of abuse to be significant, apart from *threatening behaviour* which was considered significant in most districts in the North and East, but not in other districts. This probably reflects the type of threatening behaviour that parents and their children have been

exposed to in the Northern and Eastern districts compared to other districts. The most significant forms of abuse identified by parents were *use of abusive language, threatening behaviour and conflicts between parents at home*.

Levels of awareness did not differ significantly between mothers and fathers, and there was no clear pattern between sectors, although awareness levels were higher overall in urban areas. In districts outside the North and East awareness of *discrimination based on sex, age, appearance, capabilities etc.* were much higher than in the North and East, although parents in the estate sector displayed low levels of awareness of discrimination.

Table 8.3: Percentage of parents who are aware of mental abuse by district/sector

Background Characteristics	Percentage of mothers aware of						Percentage of father aware of					
	A	B	C	D	E	F	A	B	C	D	E	F
Matale	57.3	32.1	11.6	23.5	15.7	21.1	52.3	31.7	10.5	25.7	17.3	20.3
Nuwara Eliya	65.3	29.6	7.0	14.9	12.0	13.7	52.6	22.4	11.3	16.8	14.0	17.1
Hambanthota	53.5	31.3	12.0	16.6	9.6	28.6	43.6	28.2	13.3	22.6	12.1	26.5
Anuradhapura	52.9	31.2	9.7	27.1	19.4	21.7	49.2	32.5	13.1	24.1	14.2	22.0
Badulla	62.4	30.0	7.9	20.5	14.4	17.8	52.1	31.4	17.8	24.7	10.0	18.8
Moneragala	61.9	31.1	10.7	18.1	7.8	21.0	57.4	28.5	7.5	22.0	11.2	20.4
Ratnapura	58.7	28.2	10.3	18.4	9.0	19.6	55.1	32.1	10.2	22.6	9.9	16.5
Sector												
Urban	59.7	31.6	12.6	18.4	13.2	22.2	50.7	26.4	16.5	27.6	14.8	19.8
Rural	56.5	31.9	10.3	21.2	12.2	22.4	49.7	32.2	12.6	24.2	11.6	22.0
Estate	75.1	17.4	4.8	10.7	13.1	3.8	66.4	17.5	8.5	12.2	15.9	5.9
Total	58.9	30.1	9.7	19.8	12.4	20.2	51.9	30.0	12.2	22.8	12.3	19.8

Source: DCS, UNICEF 2003, pp.76

Target group: Parents with children <18 years who are aware of mental abuse.

A : Use of derogative/abusive words

B : Threatening behaviour

C : Control freedom to give more protection

D : Conflicts between parents at home

E : Separation from parents

F : Discrimination due to sex, age, appearance, capabilities etc.

Table 8.4: Percentage of parents who are aware of mental abuse by district/sector – North and East

District	Percentage of mothers aware of						Percentage of father aware of					
	A	B	C	D	E	F	A	B	C	D	E	F
Jaffna	66.8	47.5	4.8*	5.5	5.1	0.90*	59.8	50.2	2.2*	4.8*	3.2*	1.8*
Mannar	55.4	53.2	8.0	20.7	25.0	4.7	40.1	50.1	16.2	28.0	29.0	5.5
Vavuniya	64.0	39.5	8.7	8.8	5.9	11.5	59.6	38.9	9.1	7.3*	8.6	11.0
Batticaloa	24.9	80.7	4.5	14.9	13.7	1.5*	37.0	79.9	4.0*	14.3	13.4	1.2*
Ampara	63.7	42.0	18.5	17.2	12.2	13.0	59.4	39.6	17.9	16.4	12.6	8.7
Trincomalee	60.2	41.6	8.7	23.3	14.8	6.0	55.1	42.8	9.9	22.8	21.7	7.1
Sector												
Urban	54.1	55.1	11.6	21.4	17.1	4.8	52.6	59.3	10.3	19.0	20.0	4.6
Rural	57.0	48.1	12.1	14.7	10.8	9.0	51.7	50.1	11.1	15.3	12.4	6.0
Total	56.4	49.6	12.0	16.2	12.2	8.1	51.9	52.3	10.9	16.2	14.2	5.7

Source: DCS, UNICEF 2004, pp.82

8.5 Child protection and the tsunami

The tsunami raised serious concerns about the safety and security of children who had lost one or both their parents. Despite numerous alerts immediately after the disaster, UNICEF found no evidence of child trafficking or commercial sexual exploitation as a result of the tsunami (UNICEF, 2005a). However, there was also great concern over the threat of domestic abuse within transit camps and within new family structures. There is no evidence whether serious abuse occurred, but children who lost one or more parent in the tsunami have been identified as a vulnerable group.

There are many more single parent homes now, and some parents may struggle to cope looking after children on their own; if they have no other family support they may have to leave children alone at home in order to earn an income. Children may be neglected or made to feel that they should also be contributing to the household income, and leave school early to work. There is also an increased risk of physical abuse in male-headed single parent families; men who lost their wives in the tsunami were found to be more vulnerable to alcoholism and violent behaviour – in turn making their children more vulnerable. Some single parents may seek

new marriage partners, and there is concern for the safety and security of children if the new partner is not committed to looking after children from a previous marriage.

The government acted swiftly to avoid hasty adoption of orphans and to protect children. Most orphans were immediately taken into care by relatives. A more rigorous and thorough procedure for foster care application was adopted in order to ensure that children were receiving proper and secure homes. An act was introduced to help protect children living with new caretakers after the tsunami; Tsunami (Special Provisions) Act No. 16, 2005. The National Child Protection Authority was recognised as the guardian of all children orphaned and fostered and was ultimately responsible for their welfare. All persons caring for a child affected by the tsunami were required to register with the Commissioner of Probation and Child Care Services. Adoption of children could only follow a one year period of foster care to ensure that affected children received the required psychological and physical rehabilitation, monitored by officers from the NCPA. Young people between the ages of 18-21 were granted the ability to put themselves up for foster care if they desired to do so. A new act was brought in, the Fit Person Ordinance Act which gives caregivers legal status as foster parents, and special allowances. Around 770 of 1,582 children who lost both parents to the tsunami benefited from this act (UNICEF, 2005: 6). Families with affected children benefit from financial support schemes implemented by the Department of Probation and Child Care Services, including the Sevana Sarana Foster Scheme and sponsorship programme. (CNO). The Tsunami (Special Provisions) Act was criticised by some (including UNICEF) as it was seen to be too vague, especially regarding the care and protection of children living with a single parent after the tsunami who were not covered by the measures put in place for orphans.

Kottegoda (2005) expressed concerns over the future of girl orphans who were left without mothers, facing a possibly uncertain future in the face of patriarchal social norms which constrain their mobility, their voices and their human rights. In an attempt to address such concerns, the Women's Empowerment and Social Welfare Minister issued an amendment to the tsunami rehabilitation mechanism which gave due recognition to women's participation in any decision making. Authorities were asked to look at decisions made from a women's point of view and ensure gender equality when formatting policies and plans for the rebuilding process. The Minister

also requested that women and female children be given special attention to ensure privacy and protection from men in the camps, and priority psychosocial and physical care.

8.6 The law

The constitution of Sri Lanka does not contain specific information on children other than for allowing for the affirmative action for the advancement of women, children and disabled persons. The Direct Principle of State Policy states that the 'State shall promote with special care the interests of children and youth, so as to ensure their full development, physical, moral, mental, religious, social and protect them from exploitation and discrimination'.

During the 1990s when child protection became a government priority the shortcomings in the law were recognised and attempts were made to strengthen the commitment to reducing abuse. Sri Lanka ratified the Convention of the Rights of the Child (CRC) in 1991 and in 2002 went on to sign the Optional Protocol to the CRC on the Sale of Children, Child Prostitution and Child Pornography, and ratify the ILO Convention 182 on the Worst Forms of Child Labour, which includes commercial sexual exploitation of children.

In 1995 several amendments were made to the Penal Code and the Criminal Procedure Code with a view to enhancing protection to women and children from abuse, especially sexual abuse. Punishments were made more severe and the protection of children was given more prominence. Changes included:

- The creation of several new offences such as child cruelty and sexual exploitation of children
- Provision for enhanced penalties and minimum mandatory jail sentences
- Recognition of persons under the age of 18 as children for the purpose of the offences
- Setting the age of statutory sexual abuse or consent to sex at 16
- Granting exclusive jurisdiction over these offences to the high court

Marriage laws were also amended in 1995, setting the marriageable age for the population in the country at 18 (not applicable to the Muslim community). In 1998 regulations were also drawn up enforcing compulsory education for the 5 – 14 age group. In 2003 the minimum age of employment was fixed at 14 years, including domestic employment. Legal provision has also been made to prevent the sexual abuse of children via the internet and prevent the use of children for obscene publications.

The National Child Protection Authority (NCPA) was established in 1999 (by a parliamentary act in 1998) with a specific remit to record cases of abuse, provide trained staff for protection, rehabilitation and prosecution, and raise awareness around the issues to prevent and reduce incidences of abuse (see Appendix 1 for structure of the NCPA). In 2002 a Special Investigations Police Unit was established at the NCPA, with 16 police officers handling all cases of child abuse reported to the NCPA, including child abuse by foreign nationals which it refers to Interpol and their country embassies. This unit has the authority to monitor the progress of all investigations and criminal proceedings relating to child abuse. The NCPA also has an anti-trafficking and surveillance unit. Women and Children's police desks have also been set up throughout the country acting as a first point of contact for victims, with 36 main desks and smaller desks in over 200 police stations.

The crime of trafficking was introduced for the first time in Sri Lanka in 1995. However, the law also does not contain any requirement to sensitise and train immigration and other officials on the needs of children. Sri Lanka is also a signatory to the SAARC Convention on Preventing and Combating Trafficking in Women and Children for Prostitution 2002 which should enable members to deal with various aspects of prevention, interdiction and suppression of trafficking in women and children.

As mentioned earlier in this chapter, a recent act repealing the Corporal Punishment Act now means that corporal punishment is outlawed. Further, a new act also introduced in 2005, the Prevention of Domestic Violence Act No. 34 of 2005, aims to deal more effectively with cases of domestic abuse. The Act makes provision for the issue of Protection Orders against those accused of physical and emotional abuse (defined as having the effect of causing severe traumatic emotional pain). This aims to reduce the vulnerability of victims of abuse while the justice system takes its course regarding a complaint.

Despite this flurry of legal activity which certainly puts children in a better position than they would have been during the 1980s and before, there is still a great deal of criticism about the suitability and effective implementation of these legal instruments. Changing understanding, attitudes and perceptions is a major challenge which cannot be overcome simply by the amendment of laws. A review by Samaranayake (2001) makes the point that the problems lie not simply with the legislation, but with the official attitudes which regarded the passing of legislation as an end in itself. For example, a CENWOR evaluation of the Women and Children's police desks identified some major problems with the limits of the role and authority of the officers manning the desks, as well as serious shortcomings in the physical resources available and the experience and skills of personnel. According to the review the way the desks work perpetuate gendered social perceptions that:

- "undervalue women's and children's rights as human rights
- underestimate the gravity of the issue of violence against women and children
- reinforce gender role stereotypes and inequalities in the workplace, family and society." (CENWOR 1997: 28)

A more recent study by Thurairaja (2006: 61-62) questioned key stakeholders involved with children regarding their knowledge of laws on child abuse in Sri Lanka. The results were concerning;

- Teachers – some had read up about it, and many knew of the existence of laws but few knew the details
- Police – a random check found only 10 out of 365 police officers knew about the Acts which related to child abuse
- Courts – there were no professionally trained staff to deal with children in court
- Prison officers – no official training is given to those dealing with child victims
- Prosecutors are not specifically trained to deal with child abuse matters so are not necessarily sensitive to the needs to children
- Judiciary – self-informed, but no professional training available.

Samaranayake highlights that another unfortunate impact of the 1995 amendments was a new focus on prosecution rather than advice, support and rehabilitation for victims. In fact, one of the major criticisms of the current

situation for child abuse victims is the way that the judicial system fails to support children and take into consideration the need for protection and special needs for victims. Victims of abuse are often kept in institutions pending court cases, and transported to courts with other criminals. Samaranayake highlights the lack of an effective support structure for victims and emphasises the importance of continued follow-up support and counselling for victims even if a prosecution attempt fails.

Testimonies documented by MARGA (2004) highlight the trauma that child victims undergo within the judicial system. One 15 year old girl who was physically abused by her employers talked about her experiences in court:

“I felt so frightened at the Court House... suddenly the judge shouts then I feel scared. I broke down at the Court House and a policeman told me not to cry... I forgot everything since I was scared and could not answer the questions about the abuse I underwent.” (MARGA, 2004: 34)

Another victim of rape, a 17 year old girl, spoke of the negative impact that the court system had had on her life:

“Earlier I wanted the court case to proceed because I was so angry but now I think it would have been better if there was no case. Everyone in my village knows about the incident and I feel ashamed of it. The court proceedings cannot make much difference to what has happened but I am nauseated with repeating it in courts. We get into trouble but the people who caused it are not affected by it. We are trapped here and have to suffer so much.” (MARGA, 2004: 35)

There is one significant loophole in the laws on sexual abuse which many organisations have highlighted as a major issue. In Sri Lanka the General Law and Kandyan Law on marriage does not cover Muslims, and the legal minimum age of 18 does not apply. There is in fact no legal minimum age for marriage for Muslim girls in Sri Lanka. In Islamic law a person can be married from the age of puberty, the youngest age for which is 12 years for a boy and 9 years for a girl. The girl child has the right to reject the marriage when she reaches puberty, known as the ‘option of puberty’ (Kodikara 2001). In 1951 an act was brought in to discourage marriage below 12 years and Section 23 of the Act states that marriage involving a Muslim girl aged below 12 cannot be registered unless the Quazi has authorised the registration. However, registration is not mandatory under the Act, so marriages can still

be solemnised regardless of this provision. In keeping with Islamic law there is a clause which recognises that if a girl is married, as long as she is above the age of 12 the husband is allowed to have sexual intercourse with her. This clause has been used in a number of rape cases to ensure that the man is not prosecuted, and that the girl is not tainted by the act of rape.

Additionally, some confusion over aspects of the Kandyan Marriage and Divorce act which do not comply with the general laws on marriage has led to a number of cases documented by Lawyers for Human Rights and Development (2003) where the accused has evaded prosecution of sexual abuse of a minor by producing a marriage certificate. Marriage certificates are obtained with the parent's consent, often following an offer of money from the perpetrator, and in the context of concern about the girl's reputation. In the cases reviewed the courts withdrew the indictments once a marriage certificate was produced despite the fact that registration of marriages below the age of 18 is against the law.

Box 8.4: Recommendations on legal provisions requiring amendment

- The Obscene Publications act should carry a mandatory minimum jail sentence and cover all electronic and print media.
- Cruelty to children should cover outsiders not directly in charge of the child's care.
- The age of consent for sexual intercourse should be increased to 18 years (in line with the legal age of marriage)
- The clause in the definition of rape which allows a man to have sexual intercourse with a woman if she is his wife and over 12 years of age should be removed. It is being used as a loophole for many charges to be dropped, and encourages child marriages, contrary to the age of legal marriage.
- There is also confusion within the Kandyan Marriage and Divorce act which contradicts sections of the statutory rape law and the marriage law and confuses law enforcement officers. This leads to cases of rape being dropped.
- The current Brothels Ordinance carries a maximum fine of Rs.500 even for brothel keepers holding children under 18. They should be prosecuted under the Penal Code dealing with sexual exploitation of children.
- All employers of young people should be required to register with the labour office, and submit the child for a medical examination once a year.

Box 8.4: Recommendations on legal provisions requiring amendment (contd.)

- There is insufficient legal provision to charge people in relation to using children for begging, selling or buying children, trafficking children and forcing children to work. All these offences need to be covered in law.

Judicial Process

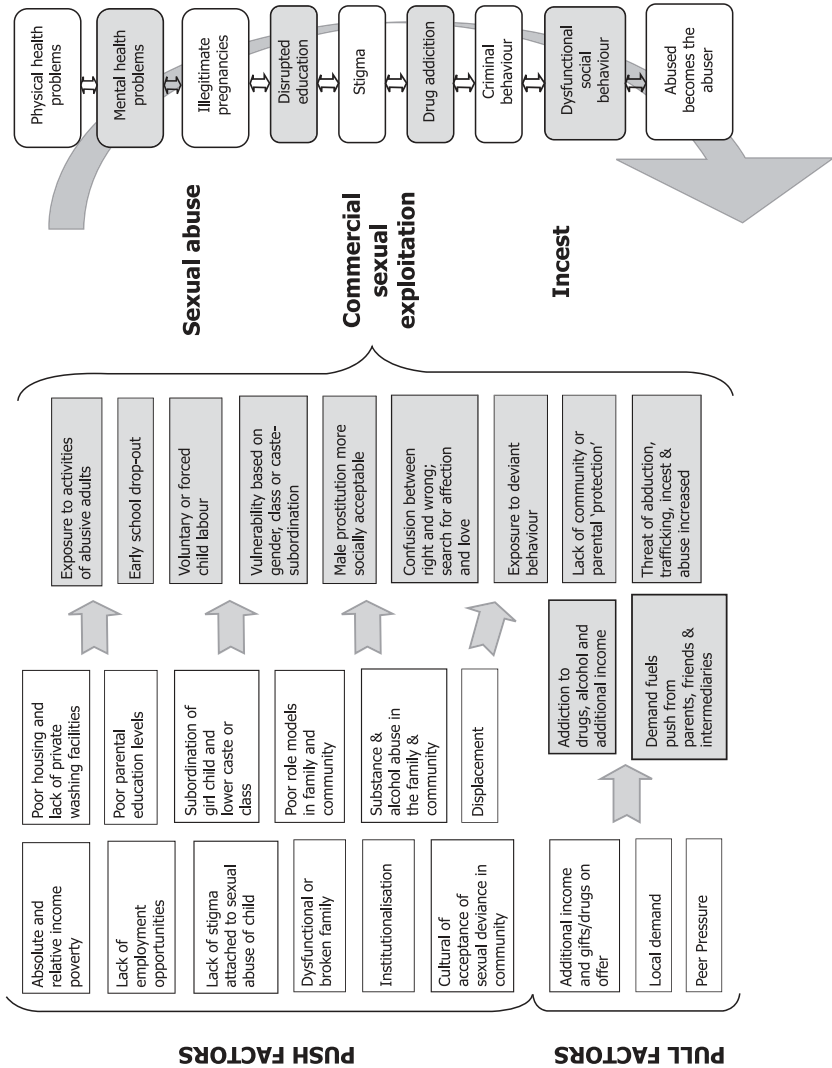
- Everyone involved in law enforcement should be trained in how to deal with children and how to protect their rights.
- Cross examination of children in court should be minimised.
- Victims of sexual abuse or cruelty should not be placed in remand homes along with offenders. They should be placed in children's homes, but for the shortest possible period.
- Magistrates and High Court Judges should receive regular training on how to deal with children in court in order to protect and promote the best interests of the child.
- Children should not be transported to court in prison vehicles along with suspects or kept in prisons while being transported.
- Rehabilitation centres should be set up for child victims.

Source: Lawyers for Human Rights and Development 2000, pp.73-79

8.7 Conclusion

This chapter has highlighted some of the key factors associated with vulnerability to physical and sexual abuse, and some of the impacts such abuse has on children. Abuse is closely associated with poorer socio-economic backgrounds and deprivation of education and adequate care. Vulnerability is exacerbated for children living in certain geographical areas or sectors, those living in dysfunctional or broken families, and along gendered lines. However, aside from more obvious socio-economic factors, there is also an insidious problem in Sri Lanka which increases the vulnerability of children; a culture of acceptance of both sexual and violent abuse, and the fact that in some communities (particularly in coastal areas) prostitution has even become 'institutionalised' with limited stigma or shame attached to it (DIAS, R. 1999). This is of particular relevance in the context of children who 'choose' to become engaged in commercial sexual exploitation.

Pathway Analysis: Sexual Exploitation



Key areas for consideration:

As mentioned earlier in this chapter, the available literature focuses heavily on commercial sexual exploitation, illustrating a bias in research interests rather than reflecting the reality of the problems on the ground. It is vital that the issue of sexual abuse within families, communities, and institutions is not relegated as a result of an international focus on trafficking and sex tourism. More research needs to be done in this area to establish the true extent of the problem and try to understand more about the factors that influence sexual abuse within Sri Lankan society.

One major research gap in this area is the collection of rigorous quantitative data. Estimating the scale of the problem of abuse and knowing where to target resources is therefore difficult. However, it is possible to identify certain areas, sectors and circumstances in which children are more vulnerable, and these areas should be targeted in order to try and prevent abuse occurring:

- Children in estate communities sent away to work as domestics or other labour
- Children in refugee camps in conflict affected areas; in the North and East and in border villages
- Children in coastal areas frequented by foreigners, particularly boys
- Children living in dysfunctional or broken families, particularly girls
- Communities with poor social cohesion and poor socio-economic characteristics

MARGA advises that in those geographical areas where children are identified as vulnerable 'change agents' are used:

"...change agents from within the community, to monitor and thereafter to sensitise and inform parents, adults and children on the social consequences of maltreatment of a child. These agents need to be linked to a network of 'external' forces, comprising government officials, law enforcement officers, NGOs, religious institutions, local government authorities whose combined strategies could be implemented through the leadership of the change agent." (MARGA 2004: 50)

The NCPA's *Report on the National Consultation on Violence Against Children* also recommended that more community systems are put into place to protect

children from abuse in poor families, using Samurdhi officers for example to detect and prevent abuse in poor families. They could also identify those homes where one or more parent is away from home and children may be at risk. Programmes to improve living conditions such as sanitation and housing are also key. Private washing facilities for example would avoid the vulnerabilities of children having to wash at the beach or at shared taps. There also needs to be more focus on education and training, developing skills and providing self-employment opportunities. Better livelihood opportunities may avoid children 'choosing' the apparently easier life available through commercial sexual exploitation.

The current support structures and judicial system also need to be targeted to make them more sensitive to the needs of children rather than subsuming them within the remand and penal process where they are often treated like criminals. Silva *et al.* propose that more crisis centres are set up for children and that more resources are allocated for child protection and advocacy services. Personnel also need to be targeted, improving the quality of care in childcare centres and providing better training for officers who deal with children (Silva *et al.*, 2002: 63).

The impacts of abuse on children can be very long term and can lead children to become trapped in a vicious cycle whereby they become vulnerable to further abuse, and to becoming abusers themselves in later life. However, timely and appropriate measures to prevent abuse and to intervene and support where abuse has happened can build upon many children's resilience and help them to exit from a cycle of vulnerability.

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Appendices

Appendix 1: Structure and mandate of the NCPA

The mandate of the NCPA covers:

- Prevention, protection and treatment of child victims of abuse
- Raising awareness of child rights and assisting in campaigns against child abuse
- Recommending legal and administrative reforms to government
- Monitoring the application of law in relation to child abuse
- Promoting further research on child abuse
- Recommending measures to protect and rehabilitate children affected by armed conflict
- Working with the tourist industry to prevent the commercial sexual exploitation of children

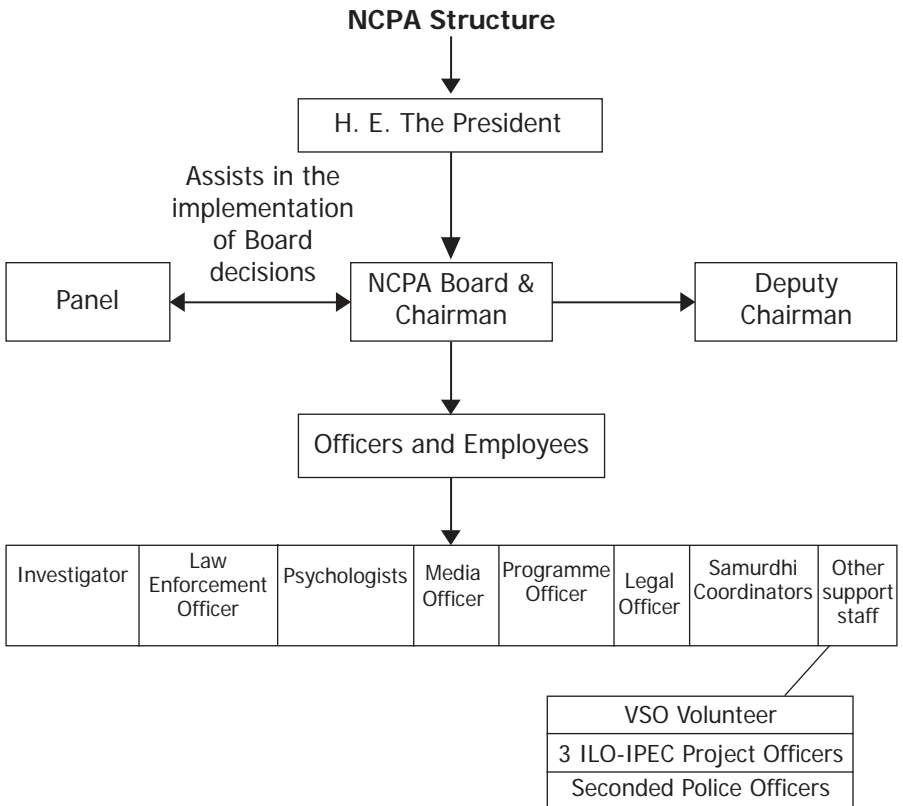
The NCPA runs rehabilitation centres at Nisaladiya and Masewana for victims of child abuse. The emphasis is on helping the children re-integrate into society by building their confidence and developing their potential for the future. Where necessary alternatives to family reunification are found, such as foster parenting. There are also six drop-in centres in Fort, Uswetakeyiyawa, Hikkaduwa, Weligama, Payagala and Anuradhapura. They are aimed at street children, children who live by the sea, and children in low income families. The aim is to build the skills and confidence of these children. Health and educational assistance is provided – focusing particularly on STDs. The drop-in centres were initially funded by the World Bank.

Calendars and organisers are distributed to members of parliament, policy influencers and key institutions and stakeholders. The media is also targeted to help raise awareness of the NCPA's work and training workshops have been organised to raise awareness of child sensitive reporting. The NCPA also produces CDs containing songs and tele-dramas which are distributed among Samurdhi Social Development Officials, hospitals and NGOs. Posters are widely used as an educational tool, including:

- Stop cruelty to children
- Stop child labour
- Don't hit, it hurts

- Count up to ten
- Rights and responsibilities
- What is child abuse
- Bullying
- Your body is yours. Protect it.
- Stop child abuse

The NCPA has strong links with the Samurdhi programme – one NCPA trained Samurdhi Development Officer (SDO) is attached to every Divisional Secretariat and one Samurdhi manager attached to the NCPA to co-ordinate and follow up on activities. The Samurdhi managers from the NCPA attend District level meetings to address the problems reported by SDOs.



Appendix 2: Major national stakeholders in child abuse

- **Department of Labour** (under Ministry of Labour) – Women and Children's Affairs Division responsible for enforcing laws on child labour, training probation, labour and police officers and raising awareness of issues around child labour.
- **Probation and Child Care Services Department** (under Ministry of Social Services) – responsible for providing sexually abused children with protection and care, taking legal action on behalf of the child where appropriate and rehabilitating children.
- **Police Department** – has a Bureau for the Prevention of Abuse of Children, Young Persons and Women with a hotline telephone number and officers throughout the country who are responsible for dealing with child abuse cases. Women and Children's police desks based in police stations are also a first point of contact for victims wishing to report abuse.
- **Tourist Bureau** – conducts awareness raising projects amongst communities working with tourists and hotels.
- **National Child Protection Authority** (Presidential Task Force) – can enter areas where sexual abuse is suspected without a search warrant. Acts as a focus point between government agencies and NGOs in the area of child abuse. Receives complaints directly from the public and also focuses on prevention, awareness raising, law enforcement and rehabilitation and reintegration.
- **ILO** – IPEC works with the Ministry of Labour and the South Asian Programme to address the issues of child labour, abuse and trafficking.
- **UNHCR** – works with government agencies and NGOs to protect the children and young people affected by the conflict.
- **Sarvodaya Suwasetha Sangamaya (SSS)** – runs children's homes and organises rehabilitation for children, including a programme for sexually abused girls, facilities for pregnant girls to have their babies and vocational training.
- **Don Bosco Technical Training Centre** – rehabilitates sexually abused boys and provides vocational training.
- **Community Health Foundation** – provides rehabilitation and counselling for children who have mental and/or physical problems.

- **Social Economic and Development Centre (SEDEC)** – (affiliated with CARITAS), focus on plantation and fishery sectors working with children in communities to raise awareness of children and human rights using animators. They also conduct research and studies in villages on child abuse, child labour and trafficking.
- **Eradicating Sexual Child Abuse, Prevention and Exploitation (ESCAPE)** – conducts awareness raising in schools, religious institutions and trains people who work with children.
- **Protecting Environment and Children Everywhere (PEACE)** – Advocacy and awareness raising, offers legal assistance to children, counselling and rehabilitation and conducts research into the issues of child sexual abuse and exploitation.

CHAPTER 9
Institutional Care and Juvenile Justice

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9.1 Introduction

This chapter deals with the care of children who are placed in an institution, either a children's home, or a part of the juvenile justice system – a remand home or a prison. Little comprehensive research has been done on this area so this review is based on a few key, recent studies which have shed more light on the area. The children who are housed in institutions are usually the most vulnerable: victims of abuse, child labour, extreme poverty, family break-up or death. The available literature would suggest that their subsequent experience and placement in most institutions does little to mitigate that vulnerability, instead exposing them to more deprivation, exclusion and vulnerability. The chapter concludes by recommending that more alternatives are sought for children who currently end up in institutions, to try and break the cycle of exclusion that many fall into.

9.2 Children's homes

Save the Children commissioned a study on institutional care for children in 2005 (Bilson & Cox 2005), looking in detail at children's institutions across the country, including the North Eastern Province. Children were used in the formulation and carrying out of interviews, and their perspectives and involvement were central to the study. The study collected its own figures on the number of institutions and children in care from each area rather than relying on government figures. The report's figures show a much higher number of children in care and a higher number of institutions than is recorded in official statistics, particularly in the North Eastern province where many homes were not registered with the government. The low number of state run institutions is clear from these figures, notably lacking in the North Eastern and Central provinces. The implications of this are that children awaiting court cases have nowhere to be looked after as they would be held in a state institution pending the trial. The usual alternative is for them to be held with adult prisoners, whether they are victims or offenders.

The lack of institutions in some areas also means that many children are being placed in institutions outside of their own province, for example children from the North and East who need to go into remand homes. This isolates them from their friends and family, in an environment where their language may not be spoken and their religion not practised. This lack of support and recognition of a child's right to speak their own language and practise their faith contravenes articles 20 and 30 of the CRC (Bilson and Cox, 2005: 10).

Table 9.1: Distribution of type of institution by province

Province Home	Receiving School	Certified Home	Remand Home	Detention
Western	1	2	2	
Southern	1	1	1	2
North Eastern	1			
Central	1			
Total	4	3	3	2

Province	Voluntary Home	Home for Children with Disabilities	Other	Total number of homes	Number of Children
Western	72	12		89	4,594
Southern	20	6		31	1,063
North Eastern	150	8	15	174	8,622
Central	30	4		35	1,279
Total	272	30	15	329	15,068

Source: Bilson and Cox, 2005, pp.7

There were many reasons for children being in care – often overlapping. Most children in care were not orphans. The predominant reason given was poverty, even when other factors were present poverty was an issue in almost all cases. Children in institutions are all from low-income families, therefore **poverty is an endemic factor in institutionalisation**. In the North and East, conflict and the desire for a better education were the next two most important reasons after poverty, while in the Southern and Western provinces desertion and hearing and visual impairment were key push factors (*ibid*: 12,13). (Statistics on the reasons for care were not available from the Central Province)

The report found that many children were living in institutions for far longer than is advisable; the law stipulates no longer than three years, however the study found that an average of 40% of children had been in institutions for longer (*ibid*: 11). This affects children’s long term development, and care should be provided instead within a family unit. However, few attempts are made to find alternatives to institutional care for children and it is not

being used as a last resort option. Part of the problem is that alternatives are complicated to arrange, e.g. fostering under the Fit Persons Scheme, therefore there was no incentive to go down this route. Probation officers often have little time to deal with the bureaucracy involved in alternative measures, and are not always aware of them.

“alternatives are not promoted, as institutionalisation is accepted without debate as the only alternative available to families.” (*ibid*: 15)

The adoption process involves long delays and waiting lists which makes it a less popular option. National adoption rates have risen, but not as much as international adoption rates have fallen (national: from 407 in 1991 to 827 in 2002; international: from 798 to 55; DPCC 2002. In *ibid*: 14). There is therefore a gap which is not being filled, and children are being housed in institutions as a long term rather than a stop-gap measure.

9.2.1 Standards of care

Standards of care and resources available within the institutions were found to be low, particularly across the state-run homes. Many homes had no or inadequate beds for children¹⁴ and no provision to allow children to play – inside or outside. Other major issues cited were poor nutrition, inadequate sleeping arrangements, poor sanitation and lack of resources such as toothpaste and soap, and insufficient medical care for sick children. In the North-East specialist care for children with disabilities was lacking.

Children’s dignity was not respected by caregivers who often used stories of hardship to try and raise money for the institution. Children felt violated by this and did not want to open up to strangers about their experiences. Children expressed feelings of insecurity and a lack of privacy and individuality in homes which had strict regulations and poor facilities. They were not given a choice about what to wear, or how to spend their time, with activities strictly timetabled. Even washing times were restricted, leading children to feel dirty and different to other children at school.

“Children in state institutions felt that they were treated like prisoners... Privacy was important to children but it was deprived to them. Children valued individuality. They wanted to be treated as individuals.” (*ibid*: 68)

¹⁴ 38% of institutions in the North-East province had no beds for children (Bilson & Cox, 2005: 8)

Across the board levels of counselling were poor, particularly in the state-run institutions where only 16% reported offering counselling (*ibid*: 8). Emotional well-being was found to be at a low level amongst children, and they had strong feelings of resentment at their situation. Their perceptions of protection were very different from the *physical protection* from the outside world which was the overriding concern of the caregivers. The children were looking for security in relationships, whereas the caregivers stressed the dangers of the outside world as a justification for limiting their outside contact and limited freedoms. The caregivers' perceptions about families was very negative, they felt that they posed a threat to children. This negative attitude is not conducive to ensuring children are given the opportunity to return to their families, and denies them of the opportunity to hope for a future with their family.

"I receive everything here. But I value my parents' and sister's and brothers' love and affection. It may be because of sins committed in my previous birth that I do not get their love." (Jayatilaka and Amarasuriya, 2005: 68)

There was little support to help children with school work, or support vocational training such as IT. Education levels were often low, with children from state-run homes often not attending school because of the stigma attached to their institutionalisation. The issue of stigma highlights the sense of exclusion that children feel, and the extent to which they are isolated whilst living in the home. It was clear from the study that children in institutions were wary of standing out, being different to other children. They wanted to be part of normal society and not discriminated against because of their background (Jayatilaka and Amarasuriya, 2005: 69). However, contact with the outside world was often limited, and "regimented routines" (Bilson and Cox, 2005: 10) did not permit children to interact much with people from outside the home, including family. Many institutions prevented families from visiting, or children from going home for holidays.

"My home is far away. Therefore my mother cannot come to see me here. Here we do not have anyone to tell our sorrow. Even at a time of sickness when we tell they scold us. My father and mother are not like that." (Jayatilaka & Amarasuriya, 2005: 66)

"We lean only from books. We do not get to know about society." (*ibid*: 67)

This isolation meant that children were consequently worried about facing the outside world when they left, and felt that they were not prepared. The fact that they were placed far from their family presented a great obstacle to some children whose family could not visit them. The caregivers did not seem to realise that the children had the right to maintain some contact with family, and had not considered the importance of preparing them to re-integrate.

“none of the institutions had activities, plans or programmes that looked at equipping the child to either reintegrate with their own family or to return to their own communities.” (*ibid*: 63)

“Caregivers did not appear to understand the emotional impact of being separated from their families” (*ibid*: 72)

In the absence of a family, children need to build alternative support networks, but this is difficult in an environment where their contact with others is limited. This section will now consider what relationships children had with contacts who would normally be key in a child's life at a micro and meso level.

Peer group

The children had little opportunity to make friends in the community outside the institution. This is a key problem as peers are particularly important to children who have little else in the way of supportive structures at a micro and meso level. They lack other opportunities to develop social skills and feel part of a group. The friends they made within the home were therefore very important;

“friends provided emotional support to children which they did not receive very much from adults. Friends also helped each other at times of difficulty.” (*ibid*: 74)

Caregivers

The areas that caregivers were most concerned about differed greatly from those expressed by children, highlighting the gap in understanding. Generally they were not concerned with their emotional welfare or attempting to prepare them for life outside the institution but instead many were focused on regimentation and discipline. They had not made any efforts to try and

reduce the number of children in care and did not seem to be aware of alternative arrangements available to children.

The relationships children had with caregivers was inconsistent from one day to another, and many felt that they had no-one to confide in. They were looking for affection, but often received harsh treatment instead. A child's unrequited need for affection can lead them to be vulnerable to manipulative behaviour when they leave the home, and they do not know how to form suitable and appropriate relationships with people.

"Most felt a deep sense of insecurity about being alone in the world."
(*ibid*: 72)

Community

Communities generally did not have a very close relationship with the home, and contact was very limited. At social or religious events the children are kept separate.

"The management preferred to keep the children isolated in order to minimise interaction with the community." (Jayatilaka and Amarasuriya, 2005: 74)

People interviewed in the community had little knowledge about the institutions, and did not know about support or alternatives to institutional care.

Clergy

Children valued the opportunity to go to religious institutions, not only for the instruction, but for the chance to meet other people and socialise. Priests were not aware of or suggested any alternatives to institutional care. However, they did express concern about the level of care provided, particularly in state-run homes. They did not, however, prioritise the emotional needs of children.

Teachers

Teachers did express a knowledge of the emotional impact of institutionalisation – they could see the effects on children at school, particularly how harsh discipline reduced the self-confidence and esteem of children (*ibid*.: 78).

Teachers also mentioned that children from care homes usually sought extra attention and care to compensate for the lack of affection they received at home. However, teachers were also unaware of alternative support mechanisms.

Officials

Probation officers are key in the lives of all children in institutions and children interviewed confirmed that they were important figures. However, despite understanding his/her importance and power, the child had little interaction with them. The relationship with the police tended to be very negative and children felt that they were treated badly by the police who had a disapproving attitude towards the children.

This interaction with the police is common for those children who are victims of abuse or crime, or those who are accused of a crime and institutionalised pending a trial. Children interviewed who were being housed before trial felt expressed feelings that the court process discriminated against them disproportionately. Travelling to and from court they were often forced to share transport with adult prisoners, and sometime even cells if they were kept waiting at police stations. The children found this process very frightening and traumatic and children accused of crimes felt that they were treated worse than adults. This sense of discrimination and marginalisation leads them to become more resentful towards society rather than beginning a process of rehabilitation. The next section will explore in more detail how young people are treated within the justice system.

9.3 Juvenile justice

9.3.1 Children in the justice system

As the previous section touched upon, children caught within the juvenile justice system are often institutionalised before trial even if they are victims, and may be held in remand homes or prisons. The minimum age of criminal responsibility in Sri Lanka is 8, and a child is defined as one who is less than 14 years of age. Those between 14 and 18 years of age are classified as young persons. Children under the age of 18 who are victims of abuse, awaiting trial or offenders all enter the juvenile justice system and are invariably institutionalised. Victims of abuse should be in residential care,

but the shortage of homes available means that many are placed in remand institutions which suffer from a severe lack of qualified staff to deal with the needs and concerns of the children. The inadequate housing facilities mean that different types of offenders and victims are often housed together (Coomaraswamy and Satkunanathan 2006).

Children vulnerable to being housed in remand institutions or even prisons are:

- Victims of sexual abuse, child labour, street children
- Children who have run away from children’s homes
- Children being held as suspects for lengthy periods of time
- Child soldiers who have escaped from the LTTE
- Minor offences such as stealing fruit or eggs
- Children who need to be transported to court but there is no vehicle or adequate staff cover available at the remand/children’s home

The Convention on the Rights of the Child (CRC), Article 37 (1)(b) states that imprisonment of children:

“shall be used as a measure of last resort and for the shortest appropriate period of time.”

However, in one month alone, June 2005, a study by Dias (2006) reports that 112 boys and 45 girls under the age of 16 were admitted to prison.

Table 9.2: Number of homes and number of children admitted during 2002

Type of home	Number of Homes	Number of Children
Remand Homes	4	1161
Certified Schools	4	242
Receiving Homes	8	326
Detention Home	1	183
Approved School	1	3
National Training Center	1	24
Voluntary Remand Homes	3	71
Voluntary Homes	201	9485
Total	223	11,495

Source: The Department of Probation and Child Care Services

Table 9.3: Admissions to certified schools by offence during 2002

Offence	Makola	Kappitipola	Hikkaduwa	Rammutugala	Total
Thefts, Burglaries	36	18	13	-	67
Disobedience to parent	15	5	3	21	44
Sale and use of alcohol	6	1	-	-	7
In need of care and protection	12	11	33	18	74
Other	19	-	11	20	50
Total	88	35	60	59	242

Source: The Department of Probation and Child Care Services

Dias' report on children in the prison system commented that the residential remand system is being used as a "recycle bin" (*ibid*: 4) for all problematic cases, resulting in a lack of alternative care options and inappropriate care and surroundings for the children. Many of these children are victims themselves and vulnerable, but the system is not set up to facilitate the de-institutionalisation of these children and place them into a family or more supportive environment.

In 2004, the total number of prison admissions of *unconvicted prisoners* was:

	Male	Female	Total
Under 16 years	920	301	1,221
Between 16 and 22 years	1,1781	648	12,429

These figures are of concern as studies have shown that only 25% of prisoners are sentenced by the courts, which implies a high number of innocent children are being held in prisons (Dias 2006). There is no form of child protection or representation guaranteed to children within the legal system in Sri Lanka and children are not automatically supplied with a Counsel or legal aid. This means many who cannot afford a Counsel's services plead guilty.

9.3.2 Conditions in prisons

For those young people who are convicted and go to prison conditions were found to be wanting in the Dias study. Child under 16 years old are housed separately in prisons, but young people between 16 and 18 years are housed with adult prisoners. This vulnerable and impressionable age group should not be considered adult, and exposure to adult behaviour may have a detrimental effect upon them. Even children under the age of 16 are often left with adults during the day when inmates are not locked up in remand centres where there is little or no segregation (Dias 2006: 9). Prison staff are not trained specifically to deal with juvenile prisoners and are hence not necessarily sensitive to their needs.

In female prisons very young children may accompany their mothers if there is no other support available to them, leading to them being brought up in the prison environment. This is harmful psychologically and physically dangerous due to the high prevalence of contagious diseases and infections. Health and sanitation conditions are poor and skin diseases are rife due to contaminated water and lack of washing facilities and spare clothes. The study recommends that any children over the age of 18 months should not be kept in the prisons, and mothers with young children should be guaranteed legal representation to ensure they are given a fair hearing, and the child a fair chance of being brought up in a healthy environment.

The study found that many families found it difficult to visit their children because of costs, or even the lack of an ID card which is necessary to access to the prison. Prisoners also had limited time for family visits and correspondence, in contravention of Article 37(c) of the CRC which gives children "the right to maintain contact with his or her family through correspondence and visits". This means children can lose touch with their families. In order to avoid isolation the report recommends that NGOs and prison staff should ensure that young people have visitors and contact with others, and that they attend religious, cultural and educational events.

"Juveniles who are isolated from the community are at greater risk of re-offending." (21)

Opportunities for rehabilitation, counselling and training were found to be limited. In 1994, 957 young people between 16-22 years were found guilty of possessing drugs (Prison Statistics of Sri Lanka, Vol. 24, 2005 – Table 10.6).

There are, however, no facilities for inmates to undertake a comprehensive drug rehabilitation programme and intervention is limited to weekly visits from an officer from the National Dangerous Drugs Control Board (*ibid*: 19). Training opportunities within prisons are limited to traditional industries, such as weaving, woodwork, agriculture and bakery, rather than more updated skill needs such as IT which may make it easier for young people to find employment when they leave.

Care for children *following* institutionalisation in the remand or prison system is key, but children can find it difficult to join their families upon release. This could be for several reasons, including parents' unwillingness to take back a convicted child or families in income poverty who can't support their child at home anymore. Many children who commit offences are from broken, poor or vulnerable families so their options for return will be limited. The Department of Probation and Child Care Services helps such children find employment and supervises them until they attain majority, but there is a high risk that these children who have been isolated from the community and from a support network may go back to living on the streets or a life of crime.

9.4 Conclusion

The current system of institutional care is not geared towards finding alternative care options for children. Officials are not aware of many other options, and adoption and foster care systems are complicated to arrange. This is a key area which needs to be addressed, particularly foster care as this could be a much more effective arrangement for children who require short or long-term care.

There are currently inadequate plans for rehabilitation or reintegration of children and young people, both in institutional care homes and in prisons or remand centres. These children are often in need of special support and counselling. Children in care homes particularly need to be exposed to 'normal' life and relationships both inside and outside the institution, but expressed feelings of isolation and loneliness. Excluding children from normal social interaction makes it harder for them to establish normal relationships with people once they leave the institution.

The links between poverty and the institutionalisation of children are strong; the main reason given for children entering care homes is poverty, and

children from poor backgrounds are most likely to commit minor crimes. Vulnerable children are also more likely to be institutionalised, particularly those who are victims of child abuse or child labour. The children who find themselves in care or in the juvenile justice system, therefore, are in particular need of a high level of care and support. The evidence from the studies considered in this chapter would suggest that this care is lacking, and that children are instead continuing to be deprived of material comforts and adequate healthcare, excluded from normal social interaction with their families and people outside the home, and not adequately rehabilitated and prepared for life outside the institution.

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CHAPTER 10

Street Children

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10.1 Introduction

As with many other issues that have been raised within this review, estimates of street children are unreliable and hard to find. Many of the studies that have been done on the issue are dated therefore the figures can be limited and misleading. Rather than looking at numbers, therefore, this chapter will highlight how street children have been identified in the literature and what issues are raised in trying to define this group. Children who end up living on the streets are most obviously victims of severe deprivation, but they are also extremely vulnerable and excluded from many aspects of a normal childhood. These aspects of deprivation, exclusion and vulnerability are often the 'push and pull' factors which lead to children living on the streets, as well as manifestations of their situation once they take to the streets.

'Street children' is an urban phenomenon, and it is important to highlight that consideration of child poverty in poor urban areas should consider not only those children who live permanently on the streets, but also the conditions of the poor who live in underserved settlements in urban areas. However, children living on the streets in urban areas often have also come from poor rural areas, hoping to find a better life.

This chapter will look at definitions of street children, some manifestations of children's experiences of deprivation, exclusion and vulnerability which have come out of studies in urban areas, and finally will look at the institutional mechanisms in place to deal with the issue in Sri Lanka.

10.2 Defining street children

De Silva and De Silva (undated) distinguish two groups of children on the streets; firstly those children who live on the streets full time, both 'accompanied' children - living with parents or care givers who engage in begging themselves - and 'unaccompanied' children who have been abandoned by their families; secondly children working on the street who return home at night.

Children who come to the city alone in search of work but continue to have some link with their families form another category. A CENWOR study (1991) shows that children living alone on the streets are as young as seven years old; most belong to the age group 6-15 years and have often dropped out of school. Children are vulnerable to a life on the streets when they do not have stable support structures and are neglected and ill treated at home. Most street children are boys.

All of the literature points to street children as being an urban phenomenon. Children see the city streets as a way of improving their existing economic conditions and earning an income. They can be seen in highly commercial areas of wholesale food distribution and other large scale commercial activity (e.g. Pettah) and surrounding areas, such as Modera/Mattakuliya to pick recyclable items from garbage dumps.

Children are also seen at bus stands and railway stations in Pettah and Fort. They engage in assisting petty vegetable traders, fish vendors, and sometimes in selling lottery tickets. They collect discarded food and other recyclable items that have some resale value or 'guard' cars in parking spaces, assist private bus operators to attract passengers, clear garbage and clean toilets. They undertake physical labour such as carrying bags, and pushing handcarts. They may also engage in begging and in illicit activities for monetary returns such as drug peddling, smuggling, and prostitution. These children can be a part of labour pools operated by traders, gangs with a leader who can both exploit and protect them where being a part of a group is a survival strategy for life on the streets (CENWOR 1991).

Children become prone to living on the streets because they do not face a stable environment at home and they leave for the streets to escape their situation at home. Children found on the streets have often been emotionally, physically or sexually abused, exposed to domestic violence that has triggered the need to escape and run away from home. Children who have been brought from other rural regions (particularly the estate sector) as child domestic workers or labourers in small restaurants may escape from their employers and find refuge on the streets (de Silva and de Silva undated). These children leave home because of poverty but are not able to move out of it despite the change. This results in them moving from one situation of vulnerability to another, alternating between disadvantaged conditions.

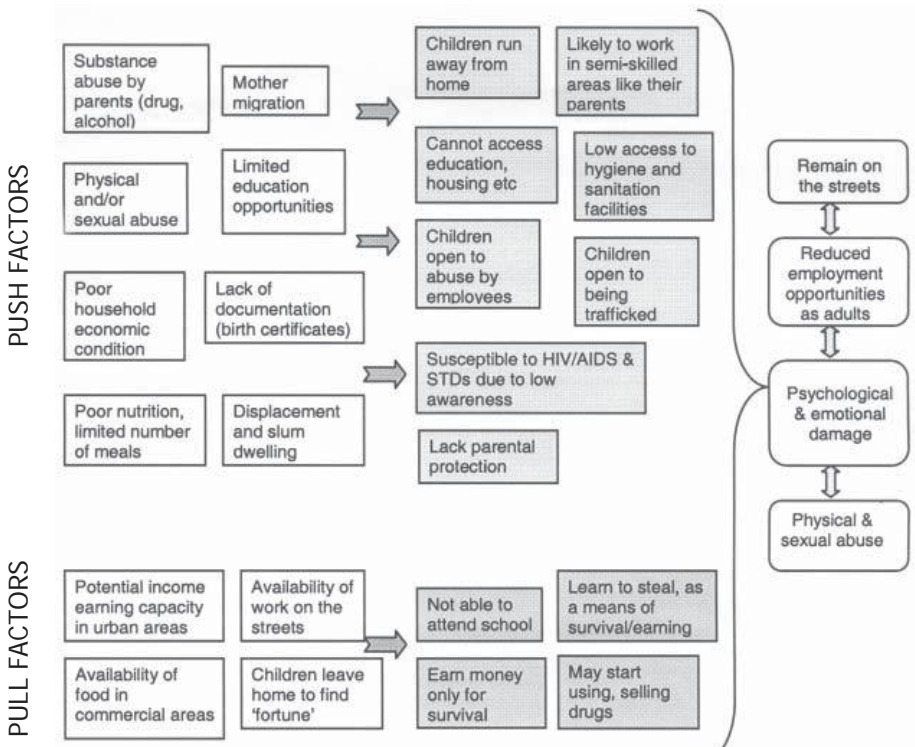
The streets become an attractive option because children are able to find work easily. The opportunities to find food are also greater as work opportunities are greater in commercial areas and are widely available. Most adult slum dwellers in Colombo city are involved in minor work on the street and their children are likely to follow them to find work (de Silva and de Silva, undated).

Children on the streets are deprived of their basic needs in terms of food, clothing, shelter, accessing education and health facilities, sanitation and safe drinking water, and those who live alone on the streets are separated from their

families. Often they are on the streets either to escape abusive or dysfunctional homes or to support their families with an income. This separation deprives them from receiving support from their families but also of shelter and their food needs. They can go hungry for days, not knowing when they will get their next meal, they have no place to sleep or store their belongings. As the CENWOR (1991) research shows these children are prone to becoming substance addicts with the consequent long term health impacts.

There is also a close association between street children and heroin and other drugs, with children knowing how to gain access and how much it costs. Older children smoke cigarettes and admit to consuming alcohol (de Silva and de Silva undated). The streets can be an abusive environment, especially for children who live on their own; they are open to gang violence and sexual abuse. These children also lack the knowledge of diseases that they can be vulnerable to, such as HIV/AIDS and other sexually transmitted diseases, and there is a need to create more awareness of these risks amongst this vulnerable group. Children are particularly vulnerable to exploitative employers like pimps, shop owners who exhaust them in return for a meagre meal and drug dealers who use children to peddle their goods (Manchanayake 2000).

Figure 10.1 Pull and push factors for street children



Street children have limited access to the health care system despite it being available for free. Most often they tend to ignore their ailments rather than seek medical advice because they are stigmatised by hospital staff and feel it is easier to avoid such institutions in the face of such treatment (Gunasekera 2000).

Children of school-going age prefer to work on the streets than attend school because they are deprived of the facilities other school children enjoy and the indifference and neglect meted out to them in schools make them further estranged and excluded (Gunasekera 2000).

10.3 Deprivation, exclusion and vulnerability in context

This section uses three different literature sources to highlight the type of deprivation, exclusion and vulnerability that children can be exposed to in poor urban environments, in three different situations; street children in Colombo, children living in a shanty town on the outskirts of Colombo, and children living in an underserved settlement in Kandy.

Table 10.1: Condition of street children in three geographical locations

Issue	Street children, Colombo City	Shanty town, periphery of Colombo	Slum community, Kandy
Deprivation			
Economic conditions	<ul style="list-style-type: none"> Low income families. 	<ul style="list-style-type: none"> Families have limited economic opportunities. 	<ul style="list-style-type: none"> Most children are from financially insecure families.
Health care facilities	<ul style="list-style-type: none"> Limited effort is made to even obtain treatment for ailments such as colds and coughs. Meals consumed by children have limited nutritional value. Children have only a single meal. 	<ul style="list-style-type: none"> Family's economic conditions do not provide for children's health care needs. The community has access to the state health facilities. Most children are malnourished, getting one meal a day and meat, fish or eggs only once a week. 	<ul style="list-style-type: none"> Family's economic conditions do not provide for children's health care needs. The community has access to the state health facilities. Low level of awareness amongst women on good nutrition. They tend to follow traditional beliefs.

Issue	Street children, Colombo City	Shanty town, periphery of Colombo	Slum community, Kandy
Deprivation		<ul style="list-style-type: none"> • Meals are provided based on the size of the daily wage and a large number of family members may deny the child an adequate meal. • Health and nutrition programmes have limited impact. 	
Water and sanitation	<ul style="list-style-type: none"> • Children have minimal access to water and sanitation. • They get their water from common water pipes in the city and have to walk long distances. • Water is collected in unclean containers presenting health risks. • Private latrines are non-existent in this community; they use public latrines and bathrooms. • Children do not use these facilities but defecate on the street or in sparsely populated areas. 	<ul style="list-style-type: none"> • Most families acquire water from a common well, use pit toilets incorrectly and disregard cleanliness in the home and compound. 	<ul style="list-style-type: none"> • Congested living conditions negatively impact on sanitation.

Issue	Street children, Colombo City	Shanty town, periphery of Colombo	Slum community, Kandy
Deprivation	<ul style="list-style-type: none"> Children live in semi-permanent or temporary housing; some change their abode after a few days. Housing lacks water and sanitation facilities. 	<ul style="list-style-type: none"> Families live a semi-permanent building with unsatisfactory amenities. Permanent building cannot be built as they are unauthorised shanties. 	<ul style="list-style-type: none"> Housing conditions are bad with congested living spaces and limited facilities.
Clothing	<ul style="list-style-type: none"> Clothes are not purchased but passed down from others. 	<ul style="list-style-type: none"> Families are unable to meet clothing needs of children. 	<ul style="list-style-type: none"> Families are unable to meet clothing needs of children to suit gender, climatic condition and special occasions. Parents feel there is a greater need to fulfill food and education needs.
Recreational facilities			<ul style="list-style-type: none"> Mainly sports facilities and association although the participation of children is low as they would rather use this time for economic activities.
Education	<ul style="list-style-type: none"> The educational attainment of parents is low and they have a limited understanding of its benefits. 		<ul style="list-style-type: none"> Most children are in school. Parents do not believe in the education system will move them out of poverty Earning a living is more useful than an education.

Issue	Street children, Colombo City	Shanty town, periphery of Colombo	Slum community, Kandy
Deprivation			
Exclusion			
Nationality	<ul style="list-style-type: none"> • Some children do not have their birth certificate. • Some parents are not aware of procedures to register children. • Limited documentation excludes children from moving beyond occupations on the street. 		<ul style="list-style-type: none"> • Most children have their birth certificate. • Indian Tamil children often do not have birth certificate.
Family structure	<ul style="list-style-type: none"> • Many children have no notion of a family unit and are accustomed to living independently. • Children lack the understanding of parents, love, and affection. 	<ul style="list-style-type: none"> • Most children belong to families where there is no exchange of ideas among family members. The parents remain indifferent towards their children and conflict is rare. • The adoption of children who have no family is a trait evident in the community. 	<ul style="list-style-type: none"> • Children usually live with their parents, kin, neighbours or friends.
Control over their lives: Family, community and other institutions	<ul style="list-style-type: none"> • Most children have the freedom to associate with whoever they want. • Once they reach the age of 12 they feel that they are adults and can make their own decisions. 		<ul style="list-style-type: none"> • A 'child' is someone who is absolutely dependent on his/her parents. • Even if an child's opinion is considered in family or community matters, it is not considered in decision

Issue	Street children, Colombo City	Shanty town, periphery of Colombo	Slum community, Kandy
Deprivation	<ul style="list-style-type: none"> Most children are considered as adults in street society and live independently. 	<p>making as children and women take second place in these patriarchal families.</p>	
Vulnerability	<p>Protection: Physical and mental abuse/violence</p>	<ul style="list-style-type: none"> Child are occasionally reprimanded and punished as the parents consider it in the best interest of the child. There are many children who are frequently struck by a drunken father/mother or are jeered at because of a physical or mental disability and also because of a parent's misconduct. 	<ul style="list-style-type: none"> The slum community lives in cramped conditions. Children are constantly exposed to abusive and obscene language. Physical violence in the area seemed to be minimal but the children were exposed to mental violence. The children can be the targets of insults and ridicule because of their parent's employment or their family's economic situation.
children with special needs		<ul style="list-style-type: none"> Children with disabilities are not given much attention. The family considers it shameful to have such children no effort is made to ensure his/her future wellbeing. 	<ul style="list-style-type: none"> Children with special attention (disabled children) have limited care because of the family's economic situation.

Issue	Street children, Colombo City	Shanty town, periphery of Colombo	Slum community, Kandy
Deprivation		<ul style="list-style-type: none"> • It is also common practice for the disabled to resort to begging for a living. 	
Earning a living that does not endanger their lives		<ul style="list-style-type: none"> • Most children admit that the type of work they do is harmful to his/her health, education and development. • They are generally engaged in the informal sector, intending to earn some money doing even irregular or unlawful jobs. 	
Substance abuse (alcohol, tobacco and narcotics)	<ul style="list-style-type: none"> • Alcohol and drugs are found in abundance and are within easy reach. • Children are also exposed to these habits by their parents. 	<ul style="list-style-type: none"> • Drugs and alcohol are freely used and the net-work of main roads provides a suitable environment for drugs trafficking which freely exposed the children to drugs and alcohol. 	<ul style="list-style-type: none"> • High levels fo alcohol and drug addiction. • Children are exposed to these abuses within and outside the household.
Sexual exploitation and abuse			<ul style="list-style-type: none"> • The breakdown of families makes children vulnerable to sexual abuse.

Source: Compiled using Ananda 2000, Ariyapala 2000 and Manchanayake 2000

The table above highlights that deprivation is mainly mentioned in relation to living space, economic conditions and opportunities, health and education facilities, and water and sanitation services. The economic conditions of the family have a bearing on the health care needs of children and it is unclear why families are reluctant to access free health services. This could be as a result of the marginalisation that they may face. Low awareness of good nutrition indicates that children are denied a healthy start in life, which could affect not just their childhood but their whole adult life. Limited food intake causes high levels of malnutrition which is exacerbated by some families having to decide who gets to eat what and when because of large family sizes.

The availability of water and sanitation facilities are limited both for children on the streets and those living in urban settlements. Public facilities are often not used because it is time consuming and can infringe on economic opportunities, as well as limiting privacy and exposing children to abuse, especially for women and young girls when bathing. Similar fears are also expressed in relation to private toilets (Gunetilleke, Abdul Cader and Fernando 2004).

The congested living conditions and the inadequate infrastructure in urban settlements result in inadequate sanitation facilities that create further health hazards. These have particularly bad effects on children, leaving them open to respiratory and skin diseases.

The individuality of street children stands out in contrast to the family and community environment that children in slum communities are exposed to. While the former may seem to have more 'control' over their lives, they are not within a protective environment and are excluded from support structures.

Children living on the streets or in settlements are vulnerable to drug abuse and violence. The cramped conditions within settlements mean that children are exposed to adults engaging in such activities in the same shared environment.

10.4 Institutional mechanisms

The legal framework that is designed to deal with the situation of street children is the Vagrants Ordinance No. 4 of 1841. The Department of Probation and Child Care has institutional facilities for the custodial care

of street children referred to it by the courts. At the time of the CENWOR study the Koggala home for street children accommodated approximately 100 children (1991) and provided for the basic needs of these children such as schooling, facilitates vocational training and sports. In addition the study mentions a Home for Boys in Miniwangoda, a Residential Home for Girls in Ingiriya, a Day Care Centre for Street Children in Havelock Town, seven other state receiving homes, 147 homes by voluntary organisations, and the Gangodawila Home for Prostitutes (CENWOR 1991).

The Department of Social Services is noted as being involved in amending the Vagrants Ordinance and engaging in projects on rehabilitating street families. The police, particularly the Women's and Children's Bureau, is the primary law enforcement agency mandated to deal with this issue. While they attempt to locate the parents/guardians of street children the lack of a response leads to children being sent to remand homes and detention homes. The study notes that the Department of Labour does not appear to intervene nor do other institutions such as Municipal Councils and the National Housing Development Authority (NHDA).

Past programmes by NGOs have developed programmes to provide for the basic needs of these children by providing food, shelter and security and more longer term support to increase their access to education, employment and housing and eventual integration into society. Day shelters and drop in centres which provided literacy programmes and bathing facilities as well as family counselling were other such programmes in addition to skills development units and other vocational training facilities for employment. Programmes were developed to link with state institutions such as the NHDA assisting with housing. Programmes also assisted in obtaining birth certificates, gaining admission to school, counselling for parents, and the provision of loans (CENWOR 1991).

10.5 Conclusion

There is a clear lack of research in this area, more research is needed not only to establish numbers of children affected but also to understand the needs, values and conditions of these children, and the gendered effects of life on the streets as well as the dynamic nature of their conditions. It is also notable that the resilience and coping strategies of street children and children in the urban context are not portrayed in the research.

The literature available suggests that at an institutional level there is a need to provide more non-formal educational opportunities to these children in order that they may acquire literacy and numerical skills and gain adequate competencies to catch up and enter formal education if desired. This approach needs to be sensitive to the stigma that such children usually face within formal educational structures. There should also be opportunities to access vocational training that leads to remunerative economic activities, including management and entrepreneurial skills.

The deprivation faced by the urban poor would benefit from greater availability of 'drop in' centres offering first aid, cooking facilities, entertainment and recreational activities, bathing/toilet facilities, and facilities for health care including information on nutrition and childcare. More night shelters for children would help them to access refuge at night and be protected from abuse and harassment. Centres could also offer counselling services on family issues, individual needs, vocational opportunities etc.

At the support structure level, interventions to improve the family environment may avoid some of the 'push' factors which lead children to live on the streets. Improving the situation of families in underserved settlements will also benefit the children living within this environment. These improvements include improving housing and basic amenities, and projects to do this are currently being undertaken by some urban municipal councils. However, at a 'softer' level there also needs to be some support to help improve family relationships and increase parental awareness of children's needs, abilities and aspirations.

Intervention needs to move away from institutionalisation of street children towards integration, focusing on community and family awareness and participation as well as meeting children's immediate needs. Attitude changes need to accompany this shift in approach, with officials sensitised on the issues faced by street children in an attempt to challenge and change negative perceptions associated with this vulnerable group.

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CHAPTER 11

Conclusion and Recommendations

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11.1 Literature on child poverty in Sri Lanka

As stated in the introduction, the collection of literature for this review confirmed certain research gaps in the available literature and also highlighted the difficulty practitioners had accessing reliable and representative information in certain areas. This has important implications for the way that interventions are planned by organisations since they should be based on evidence-based research. Many organisations conduct their own baseline research in order to establish the situation on the ground before planning interventions, however, these findings are often not shared widely enough with other organisations. Better sharing of findings could help to avoid duplication of effort, and ensure that interventions are targeted where most needed.

This final chapter will summarise some of the thematic findings and research gaps that have already been highlighted in the preceding chapters in order to provide an overview of the current situation in terms of available research on child poverty in Sri Lanka. This should help contribute to discussions around the need for more centralised and formal information sharing and knowledge management between organisations working on child poverty.

11.2 Health

Health is an area where much data is available, particularly that collected at a national level by government in periodic surveys such as the Department of Census & Statistics' Demographic and Health Survey (DHS). This is very useful for agencies looking to get a national picture of trends and pockets. However there is an issue with a lack of data in the North and East, as with so many national surveys, and this creates a problem when trying to compare what data is available for these areas since different sampling and data collection methods are used in different surveys. This also applies to comparing data available for areas which have been studied in more depth such as the estate sector where additional more detailed data is available through organisations such as the Plantation Human Development Trust. While these can provide useful complementary and more up to date information, there are sometimes mismatches in the messages coming out of the data. This is not an unresolvable issue, however, and simply means that organisations should exercise caution when collecting and interpreting health data to ensure that they are comparing like with like.

There are, however, also large gaps in the data available, including on health issues for older children, including **adolescent health and reproductive health**. The DHS contains **no data on mental or physical disability**, or mental health issues including **suicide rates**. There is some data available from other sources (such as the Census of Population and Housing and Ministry of Social Services) but this is patchy. The lack of information on mental health may reflect the fact this is an issue which still has a heavy stigma associated with it which makes it more difficult to collect data since it is not a subject openly talked about. The data that is available on disability in general indicates that disabled children and their families face **severe social exclusion** and that there is **insufficient support from social services and educational institutions**. There are **not enough trained psychologists** and psycho-social workers to deal with children who need help. More research also needs to be done into the **links between socio-economic poverty and health issues**, particularly mental health issues which are also associated with suicide.

The heavy focus on data on infant and under five health issues reflects a preoccupation at international level with survival and health based on a child's first few years, rather than on their ongoing quality of life and wellbeing. It also reflects the fact that quantitative statistics are easier to collect and track than qualitative issues such as **perceptions of wellbeing, children's own priorities, patterns of ill health, and coping mechanisms**. These are the issues where more research could and should be focused, and where agencies and non-governmental organisations may be able to play a role in highlighting the dynamics which affect health over a child's lifetime. This type of research would also help to 'join the dots' as it were, providing a more holistic picture of which agencies and departments could work better together on providing joined up services which are mutually reinforcing; such as better counselling and health advice for adolescents which could help to address a number of issues including reproductive health, teenage pregnancies, mental health and suicide.

11.3 Nutrition

Since the area of malnutrition has received such attention in Sri Lanka relatively good data is available, particularly on nutrition levels in young children and infants. Despite good human development indicators and improvements in Sri Lanka still suffers from poor maternal nutrition, low birth weight, under

nutrition in children under five years and micronutrient deficiencies in all population groups. In addition to this there are issues of household food insecurity in some areas, and low levels of knowledge about adequate and appropriate nutrition. There are also growing issues with changing diets as traditional habits change and obesity becomes a potential threat.

The government's latest action plan on nutrition draws attention to the fact that the main issue in the area of malnutrition is, once again, a **lack of co-ordination** between government departments and non-governmental agencies to ensure that interventions are appropriately targeted and have a lasting impact. There is also problem with **few interventions aimed at older children**, and **insufficient focus on national level nutritional education** for children and for parents. However, these are both areas mentioned in the Ministry of Healthcare and Nutrition's Action Plan, so hopefully they will receive more attention in the future. Also mentioned as priorities are better monitoring and surveillance of the nutritional status of the population, including an integrated national nutrition surveillance system, and more **promotion of nutrition research**, which should help improve the availability of information in this area. As mentioned before, however, in order for the ambitious range of activities suggested in the action plan to be effective there will need to be **more coordinated alliances between government and non-governmental agencies**.

11.4 Education

A history of commitment to education in Sri Lanka has led to good literacy levels and good overall availability of basic schooling available for children throughout most areas of the country. However, the **lack of investment** in the sector and a **failure to modernise the curriculum** in recent years has taken its toll, particularly in certain areas which have been neglected more than others, such as rural schools and estate areas. The statistics from these areas demonstrate the **poor levels of achievement** in key subjects such as mathematics and English language – both vital for employment in higher earning professions. The amount of work and investment required to raise standards within the education system to meet modern work demands means that there are no quick fixes available.

Education is an area where it is relatively easy to collect statistics and data on standards and achievement by virtue of the nationalised examination

system and records of post-schooling achievements in employment and further education. In addition, some recent research on the **links between socio-economic status, health and education** highlight some interesting interlinked variables which are useful for planning interventions. Poorer families often suffer many of these variables which have an impact on schooling; health levels may be lower, they are more likely to live in poorer areas where school facilities and the quality of teaching are lower, the parents are less likely to have good levels of education, and there is less likely to be a conducive learning environment at home.

There is widespread awareness of the issues which face the education system, and the existing research provides a relatively comprehensive picture of the areas where standards are particularly poor. What is lacking is a comprehensive, and adequately funded, plan of action to target interventions at the areas where they are likely to be able to make a difference:

- Rural and estate sectors
- Tamil medium schools
- Disadvantaged provinces: North-Eastern, Central, Uva and North-Central Provinces.
- Conflict affected areas

11.5 Conflict

A large body of literature exists on the impacts of the conflict on children in Sri Lanka, with a whole generation affected by **insecurity, violence, physical and emotional trauma and material deprivation**. However, some of the most interesting research is that which indicates the resilience that children can demonstrate in face of seemingly insurmountable difficulties. As highlighted earlier, more research to map out these **coping mechanisms** could help to provide more information on the techniques and dynamics which children use to help deal with the longer term trauma of conflict. However, more research needs to consider the **specific dynamics of children's experiences** in different areas since much of the smaller sample research cannot be generalised to apply to children across the country who may be living in very different circumstances. This represents a challenge to researchers since the conflict affected zones are difficult to access and the situation is constantly changing. Regularly updated situation reports are available to organisations working in these areas which is vital for planning

humanitarian assistance, but they do not constitute rigorous research so should be treated with caution since the particular issues upon which they are reporting are so dynamic.

One gap that was apparent in the literature was the focus on the impacts of displacement on internally displaced persons, to the detriment of consideration of the **effects on host communities** and their children and how successful attempts at integration have been. More research also needs to be done on the **impacts of peace-building activities** on the attitudes and behaviour of children to determine which types of interventions are effective.

11.6 Labour

The clearest figures available on child labour in Sri Lanka date from the last Child Activity Survey which was carried out by the Department of Census & Statistics in 1999. Many subsequent publications on child labour rely on these figure which are now out of date, therefore there is a need for more **up to date statistical information** on the current status of child participation in the labour force. The recent literature tends to rely on small-scale surveys or on anecdotal evidence (often used in sensationalist media articles).

There is also a need for qualitative research on **children's own perceptions of labour**, and where they draw the lines on what is and what is not acceptable in terms of supporting a family. It is clear from some of the research that children are keen to contribute to their household's income and often display a willingness to undertake paid or unpaid work which will help. However, this could be the result of a lack of agency on behalf of children who see no other option and feel obligated to make sacrifices for their family. This sensitive area needs to be explored more thoroughly. There also needs to be more dialogue over whether it would be appropriate to introduce measures that allow children to attend school and work part-time, particularly for children in rural areas who engage in agricultural activities.

Some effort has been put into advocacy campaigns through schools to try and encourage children to choose education over work and to raise awareness of the rules around where and when children can work. However, it is not clear to what extent this has been successful. Awareness campaigns and civil society participation can substitute for the present lack of detection, inspection and monitoring systems, but more **impact evaluation of advocacy work** is

needed to assess which messages are getting through, whether families feel that they have the option to choose, and whether employers and law enforcement agencies, including the police, are aware of the law and their obligations.

11.7 Migration

There is little research in this relatively new area, with the most comprehensive survey looking at impacts being the Save the Children survey from 2006. Government data is available on migration, but further investigation into the figures publicly available showed that it was difficult to ascertain by province or district the number of women of child-bearing age who are involved in migrant labour. There also do not appear to be government figures on the number of women with children who have chosen to work abroad. **Collecting and making more data freely available**, through an institution such as the Sri Lanka Foreign Employment Bureau (SLBFE), would be of great use to researchers and agencies working on these issues, since it would help to pin-point the areas in which children are most affected, and give some indication of trends.

Rather than calling for an end to migration, more research needs to focus on **alternative solutions** to the issues which families are faced with, and **what state support can be offered** to families who are seeking to raise their socio-economic level through migrant labour.

11.8 Abuse

Much of the available literature focuses heavily on commercial sexual exploitation, illustrating **a bias in research interests** rather than reflecting the reality of the problems on the ground. It is vital that the issue of sexual abuse within families, communities, and institutions is not neglected as a result of an international focus on trafficking and sex tourism. There is also a significant lack of research into **violent and emotional/ psychological abuse** in the home and in schools and children's homes. More research needs to be done in this area to establish the true extent of the problem and try to understand more about the factors that influence any kind of abuse within Sri Lankan society.

One major research gap in this area is the collection of **rigorous quantitative data**. Estimating the scale of the problem of abuse and knowing where to target resources is therefore difficult. However, it is possible to identify certain areas, sectors and circumstances in which children are more vulnerable, and these areas should be targeted in order to try and prevent abuse occurring:

- Children in estate communities sent away to work as domestics or other labour
- Children in refugee camps in conflict affected areas; in the North and East and in border villages
- Children in coastal areas frequented by foreigners, particularly boys
- Children living in dysfunctional or broken families, particularly girls
- Communities with poor social cohesion and poor socio-economic characteristics

11.9 Institutional care

This is another area, similar to migration, where surprisingly little research is available. Save the Children's recent study is the most comprehensive and the participation of children in the study adds an important dimension to this area. The study should hopefully raise awareness of the need to **collate and maintain statistics more rigorously** (since government figures were found to be at odds with Save the Children's own research), and the need to **involve children** more proactively in such studies in the future.

Many humanitarian organisations, large and small, are engaged with work in children's homes, but the **lack of large-scale research** would tend to suggest that this work is based on ad-hoc and local level research rather than on more comprehensive, large-scale research which gives a better indication of policy-level issues which need to be addressed, as well as common problems found across children's homes.

The existing research suggests that the links between poverty and the institutionalisation of children are strong; and this is something that agencies often target as a 'push' factor to try and avoid children entering homes at all. However, other issues that need to be addressed are the inadequate plans for rehabilitation or reintegration of children and young people - both in institutional care homes and in prisons or remand centres, and more appropriate care for victims of child abuse or child labour who are often more vulnerable.

11.10 Street children

There is a clear lack of research in this area, more quantitative research is needed to establish numbers of children affected, but **qualitative research** is also urgently needed to understand the needs, values and conditions of these children, and the gendered effects of life on the streets as well as the dynamic nature of their conditions. It is also notable that the **resilience and coping strategies** of street children and children in underserved urban settlements are not portrayed in the research.

At a policy level there is a need to move intervention solutions away from the institutionalisation of street children towards **integration**, and focus more on community and family awareness and participation as well as meeting children's immediate needs. Underserved settlements need more than improved infrastructure, and would benefit from more support to help improve family relationships and increase parental awareness of children's needs, abilities and aspirations. This may help to avoid some of the 'push' factors which lead to children abandoning their communities and living on the streets.

11.11 Recommendations

As part of the research for this literature review CEPA organised a roundtable discussion with various researchers, practitioners and government representatives interested in research on child poverty. The roundtable aimed to discuss how practitioners use research, to what extent information is available in Sri Lanka, and ways that information could be made more easily accessible and better publicised. Some of the comments from that meeting, added to CEPA's experience of putting together this literature review have been used to collate a set of recommendations for the future use of research on child poverty in Sri Lanka.

One of the main issues encountered, and also raised by both researchers and practitioners, is the paucity of consistent and comprehensive data available on children from government departments. It was hoped that the establishment of the National Child Protection Authority and Women and Children's Desks would help in the collection of data on abuse, street children, juvenile crime, institutionalisation etc., but in reality many figures are known to be vastly underreported, data is not collected in a uniform or consistent manner, much

data is simply not collected at all, and what is collected is not easily available or adequately analysed. This can make it very difficult for researchers and practitioners to base their work on reliable figures, and it is common for different organisations to be using different data sets.

Practitioners stressed that they were keen to use empirical research based on large, rigorous data collection. However, where this is difficult to find some rely on small-scale or anecdotal research, but this is more difficult to use as it often cannot be generalised. Some practitioners suggested using newspaper articles as a source of information as there are often good feature articles based on child poverty issues. However, this is an area where researchers and practitioners need to be very careful as there are commonly issues with accuracy in articles which frequently misquote research, or use statistics out of context. Feature articles are also often based on an individual story, and as such may not represent the true extent of a problem. However, in some cases such articles can raise awareness of an issue which has not been rigorously researched and thereby set off larger research projects.

One of the key reasons why research is not easily available, however, is that many institutions involved in work with children have not developed good mechanisms for **sharing information and research** which they undertake. Much of the research which was found for this literature review was stored in different locations and often not in libraries which are open to the public. Most agencies require mid-term reviews, impact evaluations, follow-ups etc. but these are not made easily accessible, sometimes for reasons of sensitivity. This means that many new programmes are initiated by other organisations without knowing how similar previous attempts worked, and it also means that findings are not available to the public if researchers are looking for data in a certain area. At higher levels, particularly with donors such as ADB and the World Bank, impact assessments of projects are now becoming more widely available on the internet as part of their efforts to maintain transparency. It is vital that a culture of information sharing becomes more institutionalised since research kept within four walls has little value and will have little impact on future research direction, agency interventions or government policy. For agencies, it is particularly important that they are aware of what work has already been carried out to avoid duplication of research or interventions which may not have worked.

One suggestion was that an institution, preferably an independent research organisation, should host an **information database/library** which

collects and maintains all child-related research. This could act as a research library which could then be made available to all interested practitioners and researchers. If a centralised information sharing system was in place, it may give agencies more incentive to share data and research since there would be one central collection point, making it easier to reach all interested stakeholders.

Many practitioners said that they used the internet as their first point of reference when looking for research, but in Sri Lanka this medium is less effective since most organisations do not publish their work on the internet. This is an area that researcher need to look into since the internet is fast becoming the *de facto* source of information for many people. A centralised information sharing service could make much recent information available online if it is available in soft format, or at least enable people to search titles online before pointing them to the location of the hardcopy.

In terms of encouraging more research on child issues in Sri Lanka, CEPA hopes that this literature review will highlight the areas where there are information gaps, since any new research should focus on those gaps and avoid duplication of similar, existing research. The literature on some issues, such as child abuse and child soldiers, was very repetitive in some areas and there was a preponderance of rather generic and descriptive analysis which didn't offer anything new or more in-depth to the issue. Other areas, however, suffer from a total lack of research and a lack of attention. It is also vital that research uses more child participatory techniques in order to get the child's perspective on the issue which often gives a very different slant on priorities and mitigating strategies. Language can also be a barrier; most research is written in English which means that the information tends to be shared amongst the same audience. In order to convey the issue to a larger audience, research also needs to be made available in Sinhala and Tamil. With a larger audience and wider bank of information, gaps in research will be better highlighted and are more likely to be addressed.

In order to facilitate this, the Centre for Poverty Analysis would like to encourage readers, be they researchers or practitioners, to contribute to the resources available to others by **adding any additional research, statistics or reports to CEPA's Poverty Database**. The Poverty Database is a resource portal for information relevant to poverty in Sri Lanka and aims to become a comprehensive repository of information. Information which is

available in a downloadable format, available on a website or in hard copy in a library can be entered into the database. Please email **database@cepa.lk** or contact CEPA on tel. 011 2676955-8, 2667967-8 with any suggestions for information which can be uploaded for the use of others working in this area. Readers should consult **www.povertydatabase.lk** to use the database and access the information available.

CHAPTER 12

Additional Further Reading

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This study draws on a range of qualitative and quantitative information available on a variety of issues relevant to a multidimensional understanding of child poverty in Sri Lanka. By assessing the literature available from a range of research institutions and government departments, the authors attempt to provide an overview of priority issues facing deprived, excluded and vulnerable children in Sri Lanka, as well as identifying research gaps. It is envisaged that this study can be used as a source of statistics and information for those working with deprived, excluded and vulnerable children as well as for those who have an interest in child poverty.

The authors hope that this study will lead to further collaboration on the collation of research which will add to the findings presented in this publication – making the information available to researchers and practitioners more comprehensive and continually updated. In order to facilitate this, the Centre for Poverty Analysis would like to encourage readers to contribute to the resources available to others by adding any additional research, statistics or reports to CEPA's Poverty Database (www.povertydatabase.lk) by emailing povertydatabase@cepa.lk. This should help to uncover existing research which addresses research gaps and encourage the commissioning of relevant new research.

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