



**“India Refugee Health Project with Return to Sri Lanka focus”**

**Implemented by:** Organization for Eelam Refugees Rehabilitation (OfERR) in partnership with Act for Peace

**Supported by:** Department of Foreign Affairs and Trade (DFAT), (Under Australian NGO Cooperation Program: ANCP).

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We hope that this Evaluation will help OfERR and Act for Peace to identify the areas of strength and concern and help OfERR design the next phase of the project.

Thanking You,

ASK Training and Learning

## Executive Summary

### Introduction and background

The “India Refugee Health Project with return to Sri Lanka focus” is a project run by Organization for Eelam Refugees Rehabilitation (OfERRR) with Act for Peace (AfP) as partners for the Sri Lankan refugees living in various camps in Tamil Nadu state in India. The project has a strong focus on improving health seeking behaviour of Sri Lankan refugees within the context of a longer term refugee return program and equipping refugees for voluntary return to Sri Lanka. The project was supported by the Department of Foreign Affairs and Trade (DFAT) and Australian NGO Cooperation Program (ANCP).

### Specific Objective and the Scope of the Evaluation

Based on the Terms of Reference (ToR) between ASK T&L and Act for Peace, the specific objective of this evaluation is to determine Impact, Effectiveness and Coherence of the project under three broad outcomes: The broad focus of the evaluation is the activities funded under *India Refugee Health Project with return to Sri Lanka focus* implemented from 1 July 2018 (current project phase), with reference to lessons learned from the previous project (back to 1<sup>st</sup> July 2017)

### Approach and Methodology

The evaluation adopted the following methodology:

- Desk Review
- Interviews: In-depth Interviews and Computer Assisted Personal Interviews (CAPI)
- Focus Group Discussions (FGDs) and Participatory Rapid Appraisal (PRA) Exercises with Staff

The Evaluation was conducted by Ask Training and Learning Private Limited, Gurgaon. The field evaluation was carried out from 29<sup>th</sup> November to 3<sup>rd</sup> December, 2021 covering 10 refugees’ camps in 5 districts in Tamil Nadu (TN).

### Key Recommendations

#### 1. Institutional level

- 1.1. **Capacity building of health workers:** Health workers capacity needs to be strengthened by providing training on various skills and information, including advocacy and latest health schemes.
- 1.2. **Bridging the gaps of human resource:** New health workers needs to be appointed from the same camps where there is lack of resident health workers. Besides, new and existing health workers should be motivated by increasing honorarium for their dedicated service.

#### 2. Programmatic level

**General Recommendation:** OfERRR should strengthen advocacy efforts with GoTN to ensure access to basic services like Anganwadi, transport facilities and health services in all the camps. For

this purpose, there has to be constant dialogues with influential people in recently formed high level committee for the welfare of refugees, officials from various departments and other influential people.

**2.1.Strengthening Existing Programmes:** Existing interventions need to be strengthened by addressing the gaps in various areas such as psycho social support, disability inclusion, sexual and reproductive health etc. Mainstreaming mental health issues by organising awareness sessions with the larger group and ensuring regular counselling services, advocacy with the government to ensure basic services and to extend physiotherapy services and better access to de-addiction services, etc.; Mapping out the needs of persons with disabilities and elderly across the camps and bridge the gaps to increase their access to basic services; inclusion of all the women in the reproductive age in the awareness programmes on sexual and reproductive health issues; continuation of nutrition support to the vulnerable groups, etc. are some of the actionable strategies to strengthen the programmes.

**2.2.Initiating Local resource mobilization:** A committee for local resource mobilization for health specific support needs be formed at district level under the leadership of camp leaders to support the needy patients for various treatment services.

## Key Findings

### Impact: Areas of Strength

- Overall, the project proved to be successful in achieving the intended outcomes. There has been an increased access to various services provided by OfERR as well as the government in the areas of treatment and prevention services during the past three years. Most of those interviewed (both quantitative and qualitative) proved to be satisfied for the support they received.
- 100% vaccination by the Government of India was achieved to prevent various diseases which found to be led to reduction in diseases among children in the age group of 0-5 years. 100% reduction of various communicable diseases was also found.
- 100% safe institutional delivery, even during COVID-19. There has been an increase in the health and birth weight of babies consistently above 2.5 kg due to increased awareness on the significance of nutritional food along with the distribution of nutritional food. Nearly 93% of new-born's birth weight was above 2.5kg in 2020 while in 2021, there has been a slight increase showing 94.2% of the new-born babies with the birth weight of 2.5kg or more. There has not been infant mortality and maternal mortality.
- Enhanced awareness of people on various health issues which helped them in in early identification of chronic illness and take necessary treatments. 72% of refugees (out of 1200) felt the project had contributed to an increase in their quality of life (FY19 survey).
- No new HIV/AIDS cases have been reported; and stigma around this has been also reduced.
- Effective interventions of health workers resulted in acknowledging them by the government officials as first point of contact before conducting any programme in the camp.

- Health workers identified a total of 149 cases with mental health issues; among them 107 persons with severe psychological/psychiatric issues were shortlisted and sent to professional psychiatrists.
- 83 Persons with disabilities (PWDs) were provided assistive devices which have helped them boost their confidence and sense of self-reliance. Wheel chair provided by OfERR helped them in increased mobility and social interaction independently. A total of 20 PWD students across the camps were able to pursue special education exceeding the three year target of 15. All the eligible PWDs have been receiving INR.1000 per month from the government under the pension scheme which is found to be a big support for them to buy medicines and food.
- Due to the precautionary measures and distributing supplementary spread of COVID-19 was reduced. High rate of vaccination was achieved as out of 33736 refugees (18+), a total of 19126 people were vaccinated with second dose and 28806 people were vaccinated with first dose.

### **Impact: Areas of Concerns and Recommendations**

- During 2020, there were 39 suicide attempts and 11 suicidal deaths; during 2021 it has been increased up to 63 suicidal attempts and 29 deaths. Increasing alcoholism is also a concern. Mental health programme need to be strengthened.

### **Effectiveness: Areas of Strength**

- Health workers' collaborative effort with the government service providers was found to be effective in achieving the outcomes.
- 408,509 home visits were conducted during the last three years, exceeding the target of 404,400. Home visits helped them identify 318 persons with chronic diseases, and 1126 pregnant mothers at early months and 290 persons referred to counsellors. 22165 persons got benefitted from first aid medicines provided by health worker out of which 2152 persons were referred to further care.
- OfERR exceeded their target of 1,200 awareness sessions by 150 (holding 1,350 total), with the participation of 27,750 refugees.
- A total of 15036 persons participated in medical camps; 362 special medical camps were conducted benefitting 6617 persons; 2185 chronic patients receive assistance to regular clinic visits or follow up care; 1419 hospitalised patients were assisted for their treatment related expenses; and 203 patients who undergo major surgeries were assisted with part of their medical expenses.
- 158 women (+ adolescent girls) received gynaecological services, exceeding the target of 150; 290 risk prone pregnant mothers received medical treatment exceeding the target of 275; 103 adolescent girls and women received medical assistance to treat gynaecological problems.
- 1623 persons have been provided Vitamin-C+Zinc supplements to enhance immunity which helped them recover soon. 227 children were examined and treated their malnutrition problems.
- 327 sessions were conducted in camps for health workers and caregivers of PWD showing an increase in the actual target which was 300; and 262 persons received assistance for their specific medical care. 265 PWDs received appliances, which helped them improve their Activities of Daily Life (ADL) and mobility. 20 PWD students benefitted for their special education out of which 5 persons completed their study and new PWDs included in their places during three-year period.

- A total of 23,360 refugees were provided free prescriptive medicines including 14265 females and 9095 males. 2792 referrals have been made including 1653 females and 115 males.

#### **Effectiveness: Areas of Concerns and Recommendations**

- Lack of adequate number of health workers is a concern in some camps. The gap of health workers need to be filled wherever it is needed. Further, they need to update their knowledge on new technologies in the health field.
- Given the unaffordable cost of major surgeries, treatment and hospitalisation for critical diseases, funds need to be allocated based on the emerging needs in context of increasing needs and demands.

#### **Key Lessons Learnt and Best Practices**

- Investing in human resource in the same camps; Comprehensive Coverage of health issues along with other needs; Maintaining Database of beneficiaries; Equity and Inclusion focus; Team work and constant cross learning, and Crisis Support Strengthening the rapport were found to be key learning and best practices.

#### **Sustainability Measures**

- A series of sustainability measures have been found such as encouraging the culture of Mobilising local resources and activate local networks for developmental needs; strengthened self-reliance and healthy diet habits; increased Rapport with the government health officials through constant engagement; enhanced capacity of staff; and promoting the culture of Youth Volunteerism.

#### **Coherence**

The project has been in line with Sustainable Development Goals (SDGs) such as: Goal 3- Good Health and Wellbeing, Goal 10-reduced Inequalities, Goal 16-Peace, Justice and Strong Institutions, Goal 17-Partnerships for the Goals; and the SDG's guiding principle 'leave No one behind'

The project also thematically aligns with current health laws and policies in India (including TN) such as National Health Policy 2017, India New born Action Plan 2014, National Policies for Persons with Disabilities (2006), Mental Health Act, 1987, National Vaccine Policy (2011), etc.

There is a strong coherence between organisational visions and missions of Act for Peace and OfERR since both organisations execute the mission through a humanitarian value driven and equity-inclusion approach with special focus on the most needy and vulnerable groups.

## Chapter 1: Backdrop: Overview of the Organisations and the Project

The “India Refugee Health Project with return to Sri Lanka focus” is a project run by Organization for Eelam Refugees Rehabilitation (OfERR) with Act for Peace (AfP) as partners for the Sri Lankan refugees living in various camps in Tamil Nadu state in India. The project has a strong focus on improving health seeking behaviour of Sri Lankan refugees within the context of a longer term refugee return program and equipping refugees for voluntary return to Sri Lanka.

OfERR India is an organization of and for the Sri Lankan Tamil refugees started in 1984 as a voice for Sri Lankan Tamil refugees who were forced to flee their homeland and take refuge in India during the armed conflict that went on for over 25 years, displacing tens of thousands of families. OfERR’s vision is to empower every refugee through education and opportunities, and provide them the support needed to make an informed decision about voluntary return to Sri Lanka, so that they can return as ambassadors of peace, justice, equity and sustainable development.

Act for Peace (AfP) is the International Aid and Development Agency of the National Council of Churches in Australia and works with local partners throughout the Pacific, Asia and Africa. AfP has been working with OfERR in Tamil Nadu state in India to implement this health project for the Sri Lankan refugees living in camps in Tamil Nadu, since 2013. The health project is funded by the Department of Foreign Affairs and Trade (DFAT) through the Australian NGO Cooperation Project (ANCP). AfP has also been working with OfERR India and OfERR Ceylon on the SLRRRP project since 2015 to make voluntary repatriation a sustainable durable solution for refugees and a viable alternative to protracted encampment and irregular migration.

According to the data provided by OfERR, currently there are around 58822 Sri Lankan refugees living in over 107 camps across Tamil Nadu. The ANCP health project in India addresses the needs of the entire refugee population living in camps by providing training of health workers at the camp level, first aid medicines, free prescriptive medicines, diagnosis, referral assistance, and raising awareness around health issues and medical assistance for chronic patient returnees. Further, advocacy with health authorities and effective utilisation of government health schemes also is a strong component of the project. The project has a key focus on equity and inclusion of the most vulnerable groups such as women, children, elders and Persons with Disabilities (PWDs).

An evaluation of the project was carried out in 2017, covering the project phase 2013-2016. The evaluation for this current phase was originally scheduled to take place in FY20 as this was three years since last evaluation. However, due to the outbreak of COVID-19 pandemic the evaluation was postponed to Financial Year 22 (FY22). The three-year project design was extended to cover 2020-21 also.

The project work with OfERR’s health project at two levels:

- Addressing current health needs of refugees in the camps

- Imparting knowledge and skills that shall help refugees to sustain repatriation and resettlement in Sri Lanka

**Project objective:** *The goal is building a knowledgeable, self-motivated, health-seeking refugee community valuing preventative health strategies, accessing free government and subsidized private services while achieving durable solutions, especially through safe return to Sri Lanka.*

**Multi Year Outcome 1:** The health and well-being of refugees living in camps have improved through treatment and prevention services in 107 camps.

**Multi Year Outcome 2:** The mentally and physically affected refugees living in camps have received psychosocial support by trained counsellors.

**Multi Year Outcome 3:** The persons living with disability in the camps have received care and been assisted with aids and prostheses.

Remainder of the evaluation has been removed as it contains sensitive program information