

**Real Time Evaluation of Medair's
'Tsunami Emergency Response' Programme
in Sri Lanka**

Field visit May 29 – June 9, 2005

FINAL REPORT

Prepared for Medair by

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A.C.K.L.

Glossary

ALNAP	Active Learning Network for Accountability and Performance
DS	Divisional Secretary
GS	<i>Grama Sevaga</i> ('Village headman')
HAP-I	Humanitarian Accountability Partnership International
HIA	Health Impact Assessment
HPN	Humanitarian Practice Network
INGO	International non-governmental organisation
LTTE	Liberation Tigers of Tamil Eelam
NDMC	National Disaster Management Centre
NFI	Non-food relief items
NGO	Non-governmental organisation
OECD/DAC	Organisation for Economic Co-operation and Development/ Development Assistance Committee
RSINA	Rapid Situation and Initial Needs Assessment
STF	Special Task Force
TAP	Transitional Accommodation Project
UNHCR	United Nations High Commissioner for Refugees
Watsan	Water and sanitation
ZOA	Zuid Oost Azie (Dutch INGO)

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1. EXECUTIVE SUMMARY

Introduction

- 1.1 In response to the Asian tsunami disaster of December 2004 in South Asia, Medair set up a relief programme, in the district of Ampara in Sri Lanka, to address the survival needs of the tsunami-affected population and to ensure their return to normal life.

Purpose of the evaluation

- 1.2 The evaluation was conducted as a joint learning and accountability exercise. It sought to assess the effectiveness of the relief programme in responding to the needs arising from the disaster with the view to improving Medair's ability to respond to future disasters.

Methodology

- 1.3 The evaluation utilised qualitative and participatory approaches such as key-informant and focus group interviews, with programme staff, beneficiaries, community leaders and other NGO workers, and participant observation. Further information was additionally acquired through documentary and literature review.

Findings

- 1.4 In addition to the toll on human lives, the tsunami disaster created significant human needs for shelter, safe water supply, sanitation and the restoration of livelihoods. Many survivors were also mentally traumatised by the disaster.
- 1.5 The local aid infrastructure initially was development-focused and struggled to contend with the scale of the disaster. Inter-agency coordination was sub-optimal and many agencies were not fully operational.

Programme components

- 1.6 Medair was able to scale up shelter production significantly in a relatively short period of time. However, the project encountered difficulties due to shifting government shelter requirements as well as opportunistic attempts by some in the community to manipulate the system for their own ends.
- 1.7 NFIs were distributed using a novel method. A 'shop' was set up and has proven popular with beneficiaries as it has accorded them choice and could thus be tailored to individual needs.
- 1.8 Medair instituted a livelihoods restoration project in the form of fishing boats and equipment to several fishing cooperatives in the area. The seine method of fishing was chosen so as to involve and benefit as many fishermen as possible.
- 1.9 Initially, watsan efforts were focused in camp settings but have now shifted to providing for domestic needs of resettled tsunami-survivors. A few technical issues with well-cleaning were encountered, as well as initial difficulties recruiting appropriate staff. Consequently, project outputs have lagged behind the rest of the programme.
- 1.10 At the time of the evaluation, the health promotion campaign had just commenced. The groundwork was carried out well, involved the necessary stakeholders, and its health messages were aligned with those promoted by the Ministry of Health. This has ensured a cogent and coherent approach.

Programme Management

- 1.11 The programme was ably managed by experienced and motivated expatriate staff. Unfortunately, changes of staff have had some disruptive effects. The transition of staff was especially hindered by inadequate record keeping, and insufficient briefing and preparation.
- 1.12 The large size of the organisation has conferred an economy of scale, but has also generated management issues. There was a heavy reliance on local staff in critical positions. Whilst it did provide opportunities for local staff to take ownership of the projects, the programme was exposed to potential irregularities at the margins due to inadequate supervision.
- 1.13 At the field level, internal audits of the projects were conducted, the findings of which have been acted on. Such initiatives were done well. However, there remains a need for vigilant quality assurance of the programme. A target-driven focus could potentially result in quality being compromised for haste.

Coordination

- 1.14 Locally, inter-agency coordination appears to be sub-optimal. Project staff did participate in the relevant sectoral meetings, and were supportive of partner agencies. Good working relations were also maintained with the local authorities and community leaders. As the programme nears completion, some effort has been made to identify and facilitate the handover of the area of operations to another NGO, but no concrete arrangements have been established.

Community feedback

- 1.15 Community involvement in the programme has been a late phenomenon. Some misunderstandings and misinformation encountered latterly were potentially avoidable had there been more community engagement. The main difficulty has been in gauging the appropriate timing and degree of engagement with local communities over the course of the project cycle.
- 1.16 Feedback from the beneficiaries has generally been positive. The main grievances centred on the lack of transparency of the allocation process and poor 'customer relations' shown by some employees. The community interviews were a useful forum for eliciting feedback from the community as well as presented an opportunity to inform them.
- 1.17 Initially, the programme had no mechanism by which beneficiaries could voice their grievances. This issue is currently being addressed through the Complaints Evaluation Committee, the effect of which remains to be seen.

Gender sensitivity

- 1.18 There were many elements of gender sensitivity in the programme such as shelter design, NFI distribution and in the health promotion campaign. Gender sensitivity could be further enhanced through prioritisation of vulnerable groups such as widows, and pregnant women.

Effects of aid

- 1.19 The availability of aid has had some undesirable effects. In the community, greed, opportunism, rumour-mongering and division have surfaced. These problems appear to be endemic and predate the tsunami disaster, and have proven to be a challenge for programme staff.
- 1.20 The economic impact of aid appears to not have been significant locally. Apart from a less than 10% rise in the cost of building materials, price inflation was minimal. The area has had problems of chronic unemployment that the programme has alleviated somewhat. There are potentially serious ramifications for the local economy when Medair departs.

- 1.21 A lot of unmet need remains such as stress-related disorders suffered by survivors, as well as the need for the restoration of livelihoods for many people including women and the elderly.

Conclusions

- 1.22 Overall, the programme has been effective. The programme has met several objectives and is on course to achieve most of them, provided the current rates of productivity and circumstances are unchanged. The remarkable performance of the programme has meant that aid has been timely delivered.
- 1.23 Achievement of targets have been facilitated by the rapid scale up of the programme, having a geographically-focused programme, having good governance practices, and local staff development.
- 1.24 Impediments that were encountered included technical difficulties and staffing problems, ambitious targets, shifting government 'shelter requirements' and resettlement restrictions, and inadequate supervision.
- 1.25 A degree of mistrust, deception and rumour-mongering surfaced in the community as a result of aid provision. Hopefully, with Medair winding down its operations, such ill-feelings will dissipate.
- 1.26 Refuse disposal and how pit latrines are dealt with in the future were not adequately addressed. There is no evidence to suggest that the programme has otherwise had any significant adverse impacts on the physical environment.
- 1.27 The provision of employment opportunities and volume of transactions locally by the programme will have supported the local economy significantly. The livelihoods restoration project meets an important need in a sustainable way.
- 1.28 Medair has made strenuous attempts to ensure equitable distribution of aid. Overall, the aid provided has been appropriate and relevant to local needs, and the programme has been coherent and complied with national requirements.
- 1.29 The programme focused on meeting the immediate survival needs and was not explicitly devised with a longer-term focus. Neither did it seek to mitigate against future vulnerabilities.
- 1.30 Project staff attempts at coordination have been satisfactory.
- 1.31 The economy of scale enjoyed by the programme has meant that the production of shelters, for example, has been technically and economically efficient. The aid provided has been of good quality and value for money.
- 1.32 Much of the programme, where completed, has been compliant with SPHERE standards. Management staff were conversant with SPHERE.
- 1.33 The principles of HAP-I² were difficult to operationalize. The programme appears to adhere to most of the principles but was initially weak in handling complaints (this is currently being addressed).
- 1.34 Overall, community participation could have been further enhanced.
- 1.35 The evaluation was unable to comment on any advocacy undertaken.

Recommendations

- 1.36 Community relations could be handled better. Designated staff may be required for this task. Introducing a complaints mechanism for grievances to be received and safely addressed is also important. Addressing complaints effectively may help minimize community discontent.
- 1.37 A more participative approach needs to be considered in programmes. This confers the benefits of greater 'buy-in' from stakeholders.
- 1.38 With large organisations, getting the balance of supervision right is a challenge. More supervision is required to minimize inefficiencies, ensure quality of output and for staff development.
- 1.39 With departure imminent, efforts should be undertaken to identify and facilitate the handover to another NGO. Medair has accrued significant local knowledge and expertise that could usefully be imparted to other NGO's.
- 1.40 A reflective, evaluative culture within the team needs to be fostered. Impact assessments should be a routine process in programming in order to inform decision-making, planning, and implementation.
- 1.41 The programme offers an excellent opportunity for organisational learning; field organisation, management styles and structures, and skill mix should be examined to try and identify what works.
- 1.42 An integral component of effective staff handovers and accountability is record keeping. More vigilance needs to be observed in this regard.

2. INTRODUCTION

2.1 Background to the Programme

On the 26th of December, 2004, a massive earthquake measuring 9.0 on the Richter scale occurred off the west coast of Sumatra, Indonesia. The earthquake generated massive tsunamis that devastated many coastal areas across South Asia. Among the worst hit countries was Sri Lanka where 38,195 people died and half a million people were made homeless.

Whilst continuing to monitor the humanitarian situation across the wider region, Medair decided to respond initially to the emergency needs in Sri Lanka. Operational staff were in Colombo within 24 hours of the disaster. Based on information received by the NDMC³, it was reported that the most affected region was the district of Ampara on the east coast. The emergency team was despatched to the district and was established in the coastal town of Akkaraipattu by the 1st of January, 2005.

The team initially carried out a rapid needs assessment survey of a 60km stretch of the coastline from Kalmunai in the north of the district, to Pottuvil in the south. The survey revealed an urgent requirement for water and sanitation, shelter and essential non-food items. Emergency health care and food distribution components were deemed unnecessary as other international agencies in the area were already providing them. In coordination with the district authorities and other INGOs present locally, Medair decided to implement an emergency relief and resettlement programme in the Addalaichchenai division of the district. The reasons for the choice of location were:

- a) Addalaichchenai division was particularly underserved by both local and international NGO's (Medair was then the only INGO working in this area),
- b) Ampara was logistically one of the more difficult regions to access, as the main supply roads transverse the central mountainous region and were in a poor state of repair.
- c) Owing to the chronic conflict between the LTTE, and government forces, it was also an underdeveloped area.

Full funding of the programme was provided principally by Swiss Solidarity, as well as Tearfund New Zealand/Government of New Zealand, Tearfund Switzerland and Dorcas Aid International.

2.2 Medair profile and history

Medair is an international relief organisation, established in 1988. Medair seeks to prioritise interventions in forgotten, neglected and/or under-served areas. Currently, Medair has relief and rehabilitation programmes in North and South Sudan, Angola, Democratic Republic of Congo, Uganda, Madagascar, Afghanistan, Iran and Sri Lanka. Medair is a signatory to the 'Code of Conduct for the International Red Cross and Red Crescent Movement and NGO's in Disaster Relief', and was a founder member of the Humanitarian Accountability Partnership International (HAP-I)². Quality is one of the core values and Medair gained ISO9001 certification in 2001 for its worldwide operations.

2.3 Summary of country strategy

The overall strategy for the Sri Lanka programme is to address the survival needs of disaster affected populations and to support the return of disaster affected communities to their homes and the restoration of livelihoods. The programme would concentrate on Medair's key competencies in water & sanitation, shelter and NFI's. An exit strategy has also been developed with a view to withdrawing from Sri Lanka at the end of July, on completion of the project.

2.4 Current programme activities

The programme is targeted at approximately 10,056 inhabitants in the Addalaichchenai division who were affected by the tsunami. The programme's key objectives were:

- To ensure safe water supply and adequate sanitation in up to 15 IDP camps in Addalaichchenai division
- To ensure safe water supply for up to 20,000 people returning to their places of origin or constructing new homes inland.
- To assist with the resettlement of 2,500 households, displaced by the tsunami in Ampara District for 7 months, by providing temporary shelter, clean water supply, emergency sanitation, and essential non-food relief items.
- To restore the livelihoods of 1000 poor fishermen
- To improve public health, particularly focusing on safe water and sanitation amongst resettled communities in Addalaichchenai.
- To be ready to respond to urgent needs for specific forms of assistance as they arise

3. PURPOSE OF THE EVALUATION

3.1 How the need for the requested assignment rose

Medair identified evaluation as a joint **learning** and **accountability** exercise. The evaluation was to be undertaken in order to assess the effectiveness of projects and whether the desired changes have taken place. The use of external evaluation is part of Medair's Project Management Cycle and is regarded as best practice.^a

3.2 Goals of the evaluation

The primary goals of the evaluation were;

- a) to assess the effectiveness of the Sri Lanka 'Tsunami Emergency Response' Programme in responding to the needs arising from the South Asian Tsunami disaster, and in so doing,
- b) to increase Medair's ability to respond more effectively to future disasters.

3.3 Specific objectives

The evaluation objectives (Table 1) were derived from the OECD/DAC evaluation criteria. As the evaluation at the project location was conducted within a limited timeframe of 12 days only, the objectives were decided *a priori* and divided into primary and secondary objectives. The primary objectives form the core of the evaluation.

Table 1. Objectives of the Evaluation

<i>Primary Objectives</i>	<i>Secondary Objectives</i>	<i>Cross Cutting Issues</i>
<ul style="list-style-type: none"> • Effectiveness • Impact • Relevance/Appropriateness • Sustainability/Connectedness 	<ul style="list-style-type: none"> • Coverage • Coherence • Coordination • Efficiency 	<ul style="list-style-type: none"> • International Standards • Participation • Advocacy

^a Schofield R. Terms of Reference for the evaluation. (see Appendix 5)

3.4 Scope of the evaluation

The scope of the following evaluation, as a 'single agency response evaluation'⁴, is limited to the activities of Medair in Sri Lanka solely, and is not intended to be a representative evaluation of Medair's other programmes worldwide, or of other agencies working in Sri Lanka at the present time.

4. METHODOLOGY

4.1 Qualitative and participatory approaches

The evaluation used several research techniques, including *participatory approaches* with an 'emphasis on sociological enquiry rather than economic measurement'.⁵ The rationale for this was to gather *qualitative* data for evaluating subjective components of the programme, such as impact on local communities, as well as enable the incorporation of beneficiaries' feedback.⁶⁻⁸ Participatory approaches are widely recognised as a key component in understanding impact, but have rarely been used in the humanitarian sector.⁹ Quantitative approaches would certainly have provided complementary data, but may not completely reflect the potentially wide breadth of impact of the programme.

4.2 Interview methods

Most of the data was collected through key-informant interviews and focus group interviews (see Table 2) using semi-structured questionnaires and interview topic guides (Appendix 1) that were devised and pre-tested prior to use.

Table 2. Summary of Interviews Conducted

Unit of study	Description	Number of interviewees
Focus Groups	1. Men's group 1	3
	2. Men's group 2	4
	3. Women's group	6
	4. Non-Tamil Muslim group	7
	5. Local Mosque Trustee Board	8
Key Informants Interviews	1. Medair Expatriate staff	8
	2. Medair Local Staff	3
	3. Other NGOs	3
	4. Local Government Officials	2
	5. Local Fishing Cooperatives	3
Opportunistic Unstructured Interviews	1. Non-beneficiaries	7
	2. Beneficiaries	5
	3. Other NGO	1

Key informant interviews^b were undertaken with;

- Medair expatriate and local staff,
- Key staff members of other NGOs, both local and international,
- Local authorities
- Local community and religious leaders.
- Representatives of 2 local fishing cooperatives

^b Informants have not been named for reasons of confidentiality and also at the request of participants. See Appendix 6 for itinerary of evaluation.

Focus group interviews were used in order to try and encourage more open and honest reporting by participants as well as to capture group dynamics.⁸ The participants were generally forthcoming and participated freely with informed consent obtained prior to interviews. This method of data collection was very popular and drew large audiences numbering between twenty to forty observers.

Several other *unstructured interviews* were also conducted opportunistically but provided little additional information not already obtained through the abovementioned two methods.

4.3 Sampling

The focus group interview participants were sampled purposively, with the expressed intention of trying to obtain as many different perspectives as possible, including beneficiaries and non-beneficiaries, women, the elderly, and marginalised groups such as a Non-Tamil Muslim group. Similarly, key-informants who were likely to provide useful and appropriate information were identified and approached to participate.

4.4 Participant observation

The evaluator was also part of Medair's initial Emergency Team that conducted the initial needs assessments following the tsunami in December 2004. Whilst some observer bias may potentially occur, some insights relevant to the current evaluation were gleaned at that time, albeit unintentionally, through the process of participant observation.

4.5 Documentary and literature review

Background documentation was received from Medair's Emergency Desk Officer (EDO), which included Medair's Strategy Paper, Project Proposal, Interim Report, Sri Lanka Learning Review (Feb 2005), Lessons Learnt from Deployment to Sri Lanka (Dec 2004) and SitReps^c. Additional material from the published literature in medical journals and relevant websites (e.g. ALNAP, HPN) were also accessed. The documents were reviewed for any information of relevance to the evaluation.

4.6 Translation

Translation was provided by a local high-school English teacher. The translator is a Tamil Muslim who was not a resident of Addalaichchennai but from a neighbouring division. He had excellent communication skills and interacted well with participants.

4.7 Data analysis

A normative approach was used with an emphasis on the 'lessons to be learnt' perspective. The evaluation analysis was grounded in qualitative rather than quantitative data. Information gathered from participants of the interviews was analysed using thematic analysis. Where some form of comparison was required, the initial 2 weeks following the tsunami were used as the baseline.

4.8 Reporting

Of particular note, the evaluation was scheduled for early June so that that any immediate learning could be fed back into the project cycle before the end of the programme at the end of July 2005. The initial findings were shared with the programme team during and at the end of the project visit, and the draft of this report was due for circulation to key stakeholders at the end of June for comments. The final report was submitted at the end of July. It is also important to note that the findings were only current up to June 9, 2005. Since then, any further developments will not have been captured by this report.

^c Situation reports

5. FINDINGS

5.1 Baseline situation^d

5.1.1 *Description of Addalaichchennai*

Addalaichchennai is a flat, low-lying coastal area in the east of Ampara district, sandwiched between the divisions of Kalmunai to the north and Akkaraipattu to the south. It has a medium density population made up mostly of Tamil Muslims³, but there are a few small marginalised communities of Tamil Hindus and Tamil Christians residing in the Thiraikeny subdivision in the north (Appendix 2, Table 1). Rice cultivation and fishing are the main industries in the area, with many families receiving supplemental income from relatives who are migrant workers employed in construction or domestic work abroad (mainly the Middle-East).

5.1.2 *Casualties*

As a result of the tsunami, 10,436 casualties were reported in the district of Ampara and a further 188,843 people were left homeless (Appendix 2, Table 2). It has been estimated that of the fatalities from drowning, entrapment and other related injuries, approximately 60% were children, 25% women and 15% men.³ 38,624 families were affected and 29,077 houses were completely destroyed¹⁰. In Addalaichchennai itself, there were 10 reported fatalities. 2,000 houses were damaged or destroyed, and 17,843 persons rendered homeless who were temporarily housed in 14 'camps' of varying sizes.

The disaster was further compounded by the seasonal monsoon rains which led to flooding in many areas of the district. The flooding damaged houses in more inland areas and resulted as well in some crop damage.

5.1.3 *Economic Effects*

Many of those directly affected by the tsunami were fishing communities that already represented the poorer subgroup of local society. Most of them lost their fishing boats, equipment and nets. In the first few months following the tsunami, there was also a temporary collapse of the local fish markets due to reduce demand for fish. A smaller number of persons who ran shops by the sea also lost their material and shop buildings. Domestic markets outside the affected areas were largely intact and recovered quickly.

Almost all the survivors had lost most of their material possessions. Consequently, the survivors were dependant initially on support and assistance from their relations, neighbours, and well-wishers. Subsequently, they have had to rely more on governmental, international and national non-governmental organisations for assistance.

5.1.4 *Transport and logistics*

There were some logistic difficulties encountered due to tsunami damage to coastal roads and bridges, as well as flooding affecting inland roads. Fortunately, most of the main roads away from the beach were intact and in serviceable condition.³ Overland access to Ampara district from the west coast was arduous as it involved transversing the central highlands. Sea access was initially disrupted due to some damage at the ports of Batticaloa and Trincomalee.

^d The following description of the baseline situation was derived from the observations of the evaluator in the first few weeks after the tsunami. Further data was also obtained from situation reports, needs assessment and other reports available from the National Disaster Management Centre¹¹ based in Colombo.

5.1.5 Shelter

Houses in the poorer coastal areas were generally constructed of locally sourced materials such as wood and cadjum^e. These houses were not durable and the cadjum roofing required frequent replacement. Those who could afford it had houses built of more sturdy material such as brick and cement. Both types of houses were of weak construction and neither survived the force of the tsunami.

In the initial aftermath of the tsunami, many survivors were temporarily accommodated in schools, mosques and other public buildings. In these IDP concentrations, there was significant overcrowding and often unhygienic conditions. Safe water and sanitation too were in short supply. Those survivors not housed in public buildings were often accommodated by their friends and relatives locally. Conditions there were not ideal either with problems of overcrowding, loss of privacy, and significant financial burden on the hosts. Shelter shortages were further compounded initially by government directives to remove IDP concentrations from school buildings so that school could resume. There was further uncertainty about possible government prohibition of resettlement in the area within 200 metres of the shoreline.

5.1.6 Water and Sanitation

Many of the coastal wells were also damaged, destroyed or rendered unusable due to seawater contamination. Severe water shortages were experienced by IDP populations in the schools or camps. The IDPs were heavily reliant on government provision of water supply by bowser. Unfortunately, there was also a drastic shortage of water tanks, holding reservoirs and bowsers which meant that regular supply of adequate quantities of water could not be guaranteed. In the camps, there were also inadequate functional sanitation facilities and in many the level of hygiene was poor.

5.1.7 Initial aid response

Although several agencies had programmes in Ampara District, most of them were focused primarily on development and post conflict programmes. Instead, most of the assistance in the first fortnight was provided by the local communities themselves and in several cases from STF personnel based in the district. Local NGOs and INGOs with a presence in Sri Lanka were next on-scene to render assistance. Subsequently, other INGOs arrived on site within the next few weeks after the tsunami but many would not be fully operational for some time. Relief activities were poorly coordinated locally but significant attempts were made by INGOs and UN representatives to form sectoral coordination meetings.^{3,11}

From the RSINA³, Ampara district would require approximately 21,959 shelter kits, and 18,100 family NFI kits. Based on a ratio of 1 latrine per 20 people in collective centres, 5,680 would be required and in the intermediate term, assuming the provision of 1 latrine per family, 18,100 latrines would be needed. An estimated 1,605 livelihood fishing grants of a nominal value of Rs40,000 would also be required. As a rough estimation, Addalaichchennai would require 10% of the total figures, i.e. around 2200 shelter, 1800 NFI kits, and 1800 latrines.

However, of note, the initial reported figures in RSINA were not totally reliable as reporting in certain divisions, as it transpired later, had been over-estimated and over-reported. Total figures were scaled down several weeks later (for example, the total number of IDPs was revised down from 188,843 to 90,388 between the end of December 2004 and mid-January 2005)^{3,10}. Some of the reduction could also have been explained by IDPs leaving the camps and returning to any houses still intact or partially-damaged. To confound matters, it was later decided by the government to prohibit resettlement of IDPs within 200 metres of the shoreline. This decision would limit the amount of coastal land available for resettlement, and would also result in the further displacement of persons from these areas.

^e Cadjum is a locally made sheet of woven treated palm leaves used in the construction of huts as roofing or walls. They are not durable and require replacement every few months.

5.2 Current programme situation

5.2.1 Shelter Project

Medair has managed to scale up its shelter production activities massively in the last 6 months. This is despite numerous challenges, including what an aid worker described as 'shifting goalposts'; i.e. several government revisions to the standards required of transitional housing that meant that initially compliant shelters required modifications during the project cycle. Provided the current circumstances remain unchanged, Medair will in all likelihood achieve its target of producing 2500 shelters, and distributing a similar amount of NFIs, to beneficiaries by the end of July if not sooner (see Appendix 3, Figure 1).

Medair set up a large workshop dedicated to the sole purpose of producing shelters. The workshop offered the benefits of specialisation and an economy of scale that has been highly technically efficient as well. It was well-managed and maintained a high degree of productivity, making up to 50 temporary shelters per day. The shelters were constructed of locally sourced cadjum and tin-sheeting held together by a frame of galvanised iron pipes. The building materials used were more durable and sturdy than traditional cadjum and wood shelters. Although the tin-sheeting made the shelter hotter during the day, remedial measures were taken by project staff to improve the situation, e.g. advising beneficiaries on the siting of shelters, improving ventilation in the design and use of more cadjum material. The shelter has two internal rooms and a total covered floor space of 196 square feet. The average household size was surveyed as 4.18, which equates to an average of 46.9 square feet of covered floor space per person.^f The shelters were easy to assemble and disassemble as need be. Although no proper vector control features were incorporated into the design, an earlier distribution of large mosquito nets partly fulfilled this requirement. Some shelters were receiving additional improvements to them such as cement flooring and electricity supply. Average costs were just under US\$400 per shelter which is good value and comparatively cheaper than other agencies. Overall, the shelters were compliant with SPHERE standards¹.

The shelter allocation process began with local village leaders submitting lists of 'eligible candidates' to the Divisional Secretary (DS). The DS in turn passed the lists on to Medair who sent out fieldworkers (so-called 'sociologists') to verify the eligibility of the applicants. Selection was then based on a set of criteria devised by Medair in conjunction with the DS. The criteria included destruction or damage of the applicant's dwelling by the tsunami, residence within 100m of the shoreline (or between 100-200m if 'psychologically-affected'), and overcrowding. Efforts were made to include not only person who had lost brick built houses (a government criterion), but also those living in cadjum huts previously. Successful applicants would then be eligible for a temporary shelter and NFI from Medair, as well as latrines, and well rehabilitation (or new wells) if a further set of criteria were met.

Based on initial estimations, 2200 shelters were required. However, subsequent field surveys conducted by Medair have revised this number down to a more realistic 976. Interestingly, a local government official put the real number at nearer 600^g. At the time of the evaluation, 2,350 shelters had been allocated (of which 2,000 shelter kits had already been distributed). A further 175 were set aside at the behest of the DS for use as fishing huts. Overall, Medair has in all likelihood provided for the shelter needs of most of the affected tsunami survivors, as well as alleviated some of problems such as overcrowding that pre-dated the tsunami.

5.2.2 NFI Distribution

In the early months of the project, 2,294 families received NFI mainly in camp settings. In the current phase of the project, there was a further NFI package linked in with the allocation of shelters. The mode of distribution in this case was unique: Medair set up a 'shop' to carry out this function. The beneficiary was entitled to items from the shop to the value of Rs10,000

^f Information from Medair Shelter Audit, April 2005.

^g These estimates probably included only permanent brick dwellings rather than semi-permanent cadjum huts.

(US\$100). The list of items available was devised through consultation with beneficiaries and was amended during the course of its operations based on feedback from beneficiaries. There were 71 items on the list, which represents a broad range of NFIs. This method of NFI distribution was popular with beneficiaries who appreciated having choice. It also minimized 'duplication' of NFI aid distributed, as beneficiaries may have already received some items from other distributions earlier, and locals report that most items were not sold on in the markets subsequently as was the case with some other NFI distributions.

There were only a few minor issues with the shop to do with its day-to-day running. The list of items available was not known to most beneficiaries in advance, and there was only a small list available at the front of the shop that few could see. This was especially a problem for those women who were illiterate. Some beneficiaries were dissatisfied with the shop workers who were discourteous and demonstrated poor 'customer skills'. Another issue raised by the beneficiaries was that they were not given receipts. Consequently, they were not always convinced they had been given their full entitlement. This led to a few misunderstandings and possibly helped spawn rumours of beneficiaries being 'short-changed'. Otherwise, the beneficiaries have been generally satisfied with the NFI distribution.

5.2.3 Livelihoods Restoration (Fishing aid)

Most of the coastal communities depend on fishing for their income. Small groups of individuals carry out deep sea fishing either independently or as part of fishing cooperatives. There are around 33 fishing cooperatives in the area, but only 14 of them are registered with the government fisheries department. Medair's livelihood restoration project aimed to benefit around 1,000 fishermen. In order to achieve this, the *karavallai* (seine) fishing method was selected by Medair, after consultation with the Fisheries Inspector and the cooperatives, as it would benefit roughly between 55 to 300 persons per set of fishing aid. The fishing aid comprised of two sets of seine nets of different mesh sizes, and a fishing boat. The selection of the vessel-type was again done with input from the Fisheries Inspector. Thus far, 8 fishing cooperatives were selected and have received 7 (of 10) boats and 20 sets of seine nets. The average cooperative size is 75, which equates to some 600 fishermen benefiting from the aid.

The allocation of aid involved a selection process whereby fishing cooperatives applying for aid were required to provide evidence that they were functioning cooperatives pre-tsunami. Bank statements, minutes of meetings and other documents were reviewed, and both lay and committee members of the fishing cooperatives were interviewed. Recommendations and input from the Fisheries Inspector were also sought in deciding which fishing cooperatives would receive aid. Only registered fishing cooperatives were selected as it ensured that they were bona fide cooperatives.^h

The positive features of Medair's approach were that it was carried out with proper consultation with the relevant local authorities and stakeholders during the planning phase, that it used a fishing method that involves larger numbers of fishermen (and thus the income generated can be distributed more widely), and is more sustainable in the longer term as the aid is given to registered fishing cooperatives, many of whom have been in existence for more than a decade and are financially solvent. One of the down-sides of the project is that seine fishing can only be conducted for 10 months of the year. The livelihoods restoration aspect is also biased predominantly towards young able-bodied men from the community. Also, the coverage has been inadequate as roughly-speaking only a third of all fishing cooperatives have been supported and only registered cooperatives were eligible to apply in the first instance. However, other NGOs in the area have been involved with livelihoods restoration in the area which should alleviate this issue to a degree.

A further issue raised from the community and key-informant interviews was that the selection criteria were not clear and transparent. No formal written criteria were available and unsuccessful applicants reported that they were not told the reasons why they had failed to secure the fishing aid. This has led to a degree of disappointment and mistrust in the

^h There have been unsubstantiated rumours elsewhere of false claimants seeking aid who then sold on the fishing equipment received.

community over this issue and may have fuelled rumours and malicious allegations directed at Medair from discontented individuals.

5.2.4 *Water and Sanitation*

In the first half of the project, the main watsan efforts were centred on meeting the water and sanitation needs of the displaced populations in camps. Some 52 latrines were constructed in 12 camps and 2 schools in Addalaichennai. In Komari, 71 latrines and 9 jetted wells and tank systems were also constructed at the request of Oxfam Australia. 11 caretakers/chlorinators were also trained and equipped for the maintenance of wells. At the time of the evaluation, the components mentioned above had been completed, and the focus had now shifted to providing for the needs of returnees resettling in their original areas. Current project activities included household latrine construction, cleaning of wells, well rehabilitation (involving the making of a concrete well skirt and drainage to minimize contamination of the well), building of tin-sheet walls around communal wells to improve privacy, and the construction of new wells or boreholes. The size of the project has also grown considerably with more than 100 workers now involved in watsan activities in Addalaichennai.

Adequate well cleaning and chlorination has been notoriously difficult to carry out. Although 723 wells (in excess of the initial 600 target set) were cleaned in the first few months of the programme, it has been found necessary for subsequent rounds of cleaning to be carried out. The reasons for this has been ascribed to the shallow depth of the wells, the high salinity levels of the well water and water table, and organic matter contamination that have rendered the water from many of the coastal wells undrinkable. Also, there has been a limit to the volume of well water that could be pumped out due to the risk of causing some subsidence in the land directly around the well and compromising the structural integrity of the wells. Furthermore, as a result of the initial confusion surrounding government restrictions to the resettlement of returnees in the 200 metre shoreline zone, some of the wells cleaned initially are currently not in use as they lie within this 'buffer zone'. These problems have meant that resources that could have been diverted to other activities have been tied up with the second round of well cleaning. That said, it appears likely that well-cleaning targets may be met.

The construction of household latrines and rehabilitation/construction of wells have lagged behind the construction of shelters. In the short term, this meant that beneficiaries have had to endure some inconvenience (e.g. having to travel a further distance to obtain their water supplies, bathe or wash). Generally, the beneficiaries have been patient with the project work and satisfied with the end-results. Where the watsan work has been completed, it has been of good quality and adequately meets SPHERE standards. Some work has been sub-contracted out to a local NGO, and they too have so far produced work of acceptable standards. Medair staff have also been vigilant in inspecting the work of the local NGO. In the longer-term, the problem of how the pit latrines will be dealt with when the sewage capacity is reached remains to be determined.

The disposal of refuse remains an issue locally. A survey conducted by Medair locally found that the current practice was to burn refuse. Although waste bins were in use in camps, they were rarely emptied as there was no accountability mechanism. Only waste bins along the main roads were cleared by the local public works department whilst bins away from the main roads weren't. No satisfactory solution has yet been found to address this problem thus far.

Whilst most of the current watsan activities were on-course to be completed within the time frame set, the rehabilitation of existing wells, and the construction of new wells are unlikely to be achieved based on the current productivity rates as of May 31st, 2005 (see Appendix 2, Figure 2). Unfortunately, unforeseen technical difficulties such as the need to re-clean wells (as mentioned above) have slowed progress. A target-oriented approach was fostered with the setting of weekly production goals, and this measure has increased output rates to an extent. Although more resourcing and reorganisation of the work crews are ongoing as well as out-sourcing of work to a local NGO, it remains to be seen if the outputs can be sufficiently increased (in some cases doubled) to reach the project targets by the end of July.

5.2.5 Health Promotion Project

The preparatory groundwork for the Health Promotion project was carried out well. It involved extensive consultations with stakeholders: the local Ministry of Health (MoH), Base Hospital clinicians, Education Board, and schoolteachers. Community interviews were also carried out as were observations of health education sessions in schools. The project manager carried out an appropriate assessment of local practices, local needs, as well as what was being done locally by the relevant authorities.

At the time of the evaluation, the health promotion campaign had just started. The project intended to train 10 health educators who will use a variety of methods (house-to-house visits, drama, and group discussions) to promote hand washing, appropriate use of latrines, as well as encourage people to boil water before use. The latter message in particular was included at the request of the MoH. Other forms of dissemination include stickers and flyers in the local language with good use of pictograms to illustrate the health message. The actual campaign itself was due to run for a calendar month.

Of note, Medair's project has quite rightly opted to support the work that is already being done by the MoH, and will undoubtedly help reinforce health messages that are already being disseminated. This approach also ensures coherence of the campaign with local initiatives. Although this would make it virtually impossible to tease out how much Medair's campaign has actually contributed to local hygiene practices, this approach is appropriate in view of the short project time-span of the actual campaign. The use of women health educators is also commendable as this will likely improve how well the messages are received by the women in the community but also provide some employment, albeit temporarily, to the health educators.

At a more strategic level, although it would have some utility, the need for a health promotion campaign at this late stage is debatable. Certainly in the earlier stage when many of the beneficiaries were still in camp settings such a campaign would have been appropriate. Now that many have been resettled back into the community, the need is less apparent. General hygiene practices in the area too were generally good to begin with (as observed in the health promotion needs assessment). This is one possible reason for the absence of any outbreaks of diarrhoeal diseases thus far.

5.2.6 Programme Management

In general, the programme was managed adequately. Medair's expatriate management staff were a particular asset to the programme. Almost all of the staff have had significant prior experience in emergency relief elsewhere and brought to the project much in the way of skills and experience. They were motivated, had initiative and an *esprit de corps* as well as a realistic appreciation of what was achievable in the situation. There were clear lines of communication, accountability, and defined roles and responsibilities. They exhibited good situational awareness and were responsive and proactive in their approach to issues and problems. At the interpersonal level, they interacted well with their local staff, according them dignity, trust and respect.

Medair recruited locally over 400 Sri Lankan staff on a mix of different work arrangements (contract and casual day workers). Local staff were drawn from different communities, both Tamil and Tamil Muslim, from the local area as well as from further afield (e.g. Jaffna and Thirukovil). A number of staff had also been affected directly by the tsunami. However, there were no explicit recruiting arrangements that gave some priority to tsunami-affected individuals, and certain ethnic groups (e.g. Tamils) were disproportionately present in greater numbers than the local experience.

Unfortunately, in the short life span of the project, the expatriate management team has had roughly two changes of staff. This has been disruptive to the smooth running of the programme. Handovers were on occasion incomplete, and the lack of a 'paper trail' created some difficulties for subsequent team members. For example, some of the purchase-order transactions were unrecorded. New team members were often in the dark as to the decision-making processes that had occurred prior to their arrival in-country, or of working

arrangements and agreements with other actors that had been made previously. This in turn may have affected the working relations with other agencies, local authorities and community leaders, and could potentially contribute to misunderstandings.

Medair expatriate staff members were inadequately briefed on important social, political and cultural aspects of the country prior to arrival. As a result, expatriate staff members were not aware of certain local customs, local power relations, patronage politics, business practices or the socio-political situation on the ground. A lot of good literature exists already that would have helped staff prepare for many of the difficulties that they now encounter. On balance, the short duration of the programme made this difficult to achieve.

One major difficulty encountered was finding experienced and trained staff for a prolonged duration of service. The watsan project in particular suffered from this mid-cycle. This led to an imbalance in roles and responsibilities held by expatriate field management staff, resulting in certain members being overloaded with work and responsibilities. This situation potentially compromised their effectiveness especially with regards to the provision of adequate supervision of projects. A positive consequence of this however is that local staff who have shown themselves to be capable and willing have been promoted to greater levels of responsibility. In turn, they have shown 'real ownership of the programme' and have performed to a high standard.

As a result of the rapid scale up, a more devolved organisational structure was necessary in order to function effectively and efficiently. Consequently, the programme relied heavily on local staff members in several critical positions of resource power. Owing to the large size of organisation, this then exposed the programme to a degree of irregularities at the margins. Although unavoidable in the context of the programme and the inherent difficulties due to such prevalent practices in the community, this vulnerability could be limited through more expatriate supervision.

5.2.7 Programme Governance

The field staff conducted an informative audit of the shelter programme in April that examined the allocation of shelters, the quality of shelters completed, and sought to obtain beneficiary feedback on satisfaction and problems encountered. More importantly, it appears that the feedback obtained was acted on, for example modifications of the shelter design to improve heat dissipation and ventilation were made following complaints by beneficiaries that the tin-sheeting used in the construction made the structure overly warm in the hot weather. As such, beneficiary feedback has been meaningfully utilised to a degree in the implementation of the programme. Also noteworthy were the thorough assessments of beneficiary profiles conducted by the shelter and NFI project, and preparatory work for the health promotion project. Both projects were well prepared, with appropriate assessment and planning that included stakeholder input. The project managers all demonstrated good awareness of the issues and reflexivity including self-evaluation of their project purpose and potential impacts.

The financial administration of the project at the field level was initially sub-optimal at the outset of the programme due to the challenges of setting up a new programme in a new country for the organisation. However, the field financial management has improved markedly over the past few months with greater adherence to the organisation's purchasing standard operating procedures. There was also a micro-audit of purchasing procedures conducted as well as good attempts to streamline financial cash-flows and monitor transactions. There was good local innovation in the field, for example; the setting up of systems for projecting weekly cash needs and tracking purchase orders through to completion. The administration of the payroll for over 400 staff was challenging and conducted efficiently.

The quality of aid provided has also not been homogeneously of a high standard. Although most of the beneficiaries received aid of good quality that met government and international standards, there were a few instances where these were not met. Shelter assembly was not able to keep up with the production of building materials for example. Some of the building materials used were not consistently of the same quality. Consequently, a few shelters appear to have been assembled less well resulting in leaking roofs, or ripped tin-sheeting.

There is the risk that the target-driven focus of the programme may lead to some construction teams compromising quality for haste. On balance, however, it needs to be remembered that the achievement of 100% quality is not possible, even in modern industrial practice, let alone in the disaster relief setting. Most of the shelters inspected were of excellent quality and to the beneficiaries' satisfaction. Increased vigilance by supervisors would help ensure shelter quality is maintained at a high level.

5.2.8 Coordination

In the early days of the programme, interagency coordination in Ampara was suboptimal. As one NGO worker described it, it seemed that "many players were pushing for places to have the limelight". Certain agencies were noted to have tried to take on the coordination role but "because they tried to control it, [the other NGOs] were not full participants of it". Despite the circumstances, Medair has done reasonably well at coordinating its activities thus far. In particular, they have been supportive of partner agencies and cooperated with the coordination process. At the local level, project managers have participated in relevant sectoral coordination meetings with other agencies. It is perhaps fortunate that Medair is the sole INGO in the division of Addalaichchennai providing shelter and watsan relief as potential misunderstandings with other NGOs are avoided.

Medair staff have also striven to maintain good working relations with the local authorities. They have communicated well with the divisional secretariat and have also been responsive to requests where appropriate. The local authorities did flag up an issue of lack of control over the programme. A delicate balance thus needs to be found between involving local authorities sufficiently whilst justifiably attempting to maintain neutrality and impartiality in the conduct of operations¹³. As mentioned earlier, the frequent changes of expatriate management staff has been disruptive and has led to occasional misunderstandings that could have been minimized had there been more continuity of management staff. Other NGOs and local authorities also felt unclear as to what Medair's mandate and programme objectives were.

As the programme enters the final months, Medair has a real opportunity to advocate strongly for another NGO to take on the responsibility for Addalaichchennai as significant needs remain. Medair has accrued significant amounts of goodwill, knowledge and insight of the area that could be of much use to the next agency that takes on work in the area. However, insufficient time and resources have been committed to this endeavour. There will therefore most likely be a gap in the provision of relief aid to the division. Whilst this is unlikely to have a major impact on the local community in the short term, chronic under-development would certainly impact negatively in the long-run. In fairness, however, this issue is more the obligation of the coordinating authorities than Medair.

5.3 Community aspects

5.3.1 Community participation

Community participation has been mainly in the form of manpower for implementing the programme. Other forms of participation such as consultation have been a late phenomenon in the programme. There was inadequate consultation with local community groups and leaders in the first few weeks with regards to programme formulation and implementation. For example, the programme could have involved local mosque trustee boards and committees early on in the implementation phase rather than relying mainly on the local government structures that in certain cases may have lacked the support of the populace they serve.

Communication with the local community was also not maximised. As a result of this, many in the community did not understand the organisation's mandate, purpose, or programme. Many were not fully aware of their entitlements or the procedures for obtaining aid. The allocation process for the distribution of fishing boats and nets, and temporary shelters, was not adequately transparent to the beneficiaries. This appears to have subsequently led to misunderstandings and helped to fuel rumours and allegations that were often unfounded. It also left many beneficiaries vulnerable to potential abuses of power by local staff in positions with resource power.

That said, Medair did try to involve stakeholders and beneficiaries much more actively in the second half of the programme. Of particular note was an attempt to improve the coverage of the distribution of shelters by enlisting the aid of the local mosque committee in identifying eligible persons who had been missed in the earlier rounds of shelter allocation. Medair has also sought to involve the local authorities and mosque committee again in investigating complaints. Where involved, the beneficiaries have been appreciative of the fact they were consulted, and the feedback acquired has meant that projects could be fine-tuned and made more responsive to beneficiary needs. Unfortunately, despite Medair's efforts, there were still some criticisms from the community over the lack of engagement. Getting an entire community to feel 'engaged' remains an unattainable ideal.

In the context of the initial 'emergency phase' post-tsunami, the 'top-down' approach was appropriate as needs were apparent, and the scale of needs such that most aid would have been of use. Difficulties have arisen since then as the circumstances transitioned from the 'emergency phase' to the 'post-emergency phase' where more bottom-up developmental approaches are more appropriate¹². Although some may argue that community engagement early on may have been premature, local community and civic structures were mostly intact and in a position to be involved had the opportunity arisen. Failure to do so was flagged up by a local mosque committee as a reason for disenchantment with the aid process as they felt it took away some control over their lives and community. The mosque committee strongly voiced their desire to be more fully involved in the aid process, and potentially could have been a useful resource.

5.3.2 *Beneficiary Feedback from Community Interviews*

In general, the beneficiaries were very satisfied with the aid provided by Medair. They noted that the aid had been timely in coming and of good quality. They were also appreciative of having their views taken into account and of choice in the selection of NFIs. There was some dissatisfaction expressed centred on the aid allocation process. In a few rare instances, there were lapses in the allocation process that have resulted in inequitable distribution at the margins that has divided the community a little. As one respondent said, "The people who were affected (by the tsunami) were not given (aid), and the people who were not affected were given. So there is a problem between the two.'

Another common complaint was with regards to the poor conduct, or 'customer relations', of the fieldworkers at times. Some respondents expressed discontent at the way that they had been treated by a few programme staff, especially the shop workers and 'sociologists', who were at times rude and disrespectful. The poor behaviour by a few of the staff created problems for local community leaders and the authorities as well. A local community leader said, "Because of this problem the public was annoyed. So, they wanted to fight and argue and make problems. I had to speak to them and solve this problem in a peaceful manner." At the same time, the beneficiaries were very forgiving of the expatriate staff, who they described as being "misled by their local staff".

The focus group interviews have been extremely useful in identifying various issues:

- a) Continuing development needs, e.g. livelihood programmes (especially for women),
- b) Unmet needs, e.g. psychosocial trauma (see below)
- c) Programme delivery issues such as the need to better inform, communicate with and involve the local community,
- d) Reasons for dissatisfaction with the programme (e.g. poor behaviour of fieldworkers)
- e) The tsunami disaster appears to have left previously independent communities in a state of powerlessness and vulnerability that may potentially be abused by unscrupulous staff members, and
- f) Potential exacerbation of local tensions, mistrust and division (see below) within the community

The focus group interviews also served as an unofficial feedback mechanism for beneficiaries to voice any dissatisfaction. It has allowed clarification of programme issues to be made with

beneficiaries where appropriate and erroneous rumours to be corrected. For example, some members of the public mistakenly thought that Medair was distributing cash to beneficiaries.

5.3.3 *Complaints*

Initially, many of the beneficiaries had little or no means of voicing any queries, concerns or dissatisfaction to programme staff. Part of the problem was due to the stringent and necessary security requirements at the office where the beneficiaries were turned away by security personnel. In addition, many aggrieved individuals are unable to express their grievances due to the language barriers. Consequently, the expatriate staff, though aware of the presence of the discontent, were possibly unaware of its full extent and seriousness. Complaints that were inadequately addressed could fuel further grievances towards the organisation.

The need for a complaints mechanism was identified by programme staff recently and has been acted on. At the time of the evaluation, a 'Complaints Evaluation Committee' (CEC) was set up with the input and cooperation of the local divisional secretariat. The committee would comprise of representation from the local mosque, the DS and Medair. Complainants would be able to submit their complaints to either the DS or Medair in English or in Tamil. Criteria for the investigation of complaints were in the process of being drawn up with the purpose of filtering out serious and genuine complaints for the committee to look into. From the focus group interviews, it appears likely that most of the complaints will be from eligible beneficiaries who have not received aid. The total number of genuine cases is not expected to be high.

The need for a system for beneficiaries to feedback grievances or queries is an often overlooked aspect of many programmes. As such, the CEC represents an interesting field trial of just such a measure. At present, the CEC is in its infancy and it is too early at this juncture to determine how successful the committee will be, but it represents a step in the right direction.

5.4 **Gender issues**

There were many elements of 'gender sensitivity' in the programme. For example, the health promotion project specifically used women health promoters in order to target the women in the community. The temporary shelters had two rooms in them which gave a degree of privacy. Privacy, which was culturally essential in this predominantly conservative Muslim area, was also protected at communal wells by placing tin-sheet walls around them. The provision of NFIs distributed through the Medair shop was also responsive to the needs of women; the list was devised following a consultative process with beneficiaries, and included items such as sanitary pads as well as domestic appliances included at the request of women (e.g. *kudams* and *puttukulals*). Women tended to represent beneficiary families, as the male members would often be at or in search of work during the day, and as such had control over what was obtained at the shop.

The programme's gender sensitivity could have been further enhanced had there been some mechanism of prioritisation of shelter allocation for widows, pregnant women and elderly women. Furthermore, there is a real need for the provision of livelihoods or vocational training to women to earn a living (especially those who are from single-headed households). Many of the survivors, especially widows, women-headed households and the elderly, have no means of generating any income. They are wholly dependent on government financial and material aid, that in recent months have all but dried up.

5.5 **Impacts**

5.5.1 *Local Socio-Political Situation*

In a recent report by Frerks and Klem¹⁴, it was observed that the 'distribution of resources has traditionally been a major issue of contention, with ethnic-, regional- and caste differences as the determining factors. This tradition provided the tsunami with a fertile soil for social dissent

... The clientelistic attitude, type of governance and patronage politics characterising Sri Lanka's political system may seriously compound or undermine the required even-handed approach.' Indeed, much of what they describe has been borne out in Addalaichennai.

Due to the availability of substantial amounts of aid, this has led to many individuals ('disaster entrepreneurs') opportunistically trying to manipulate the distribution system to their advantage. As one humanitarian worker observed, "...today you will come representing me, tomorrow I will come representing you." Another local aid worker agreed that, in the community, corruption and favouritism was a big problem. The attempts at manipulating the system was not limited to Medair but permeated the local government and community hierarchy. One local imam disgustedly recalled how he had received a long list of applications of which only 34 were from genuine eligible victims of the tsunami. There have also been the occasional instances where the GS has inflated the number of eligible beneficiaries for his area. As a result, obtaining a true reflection of beneficiary numbers has been problematic.

Programme staff have also encountered significant difficulties in trying to verify the legitimacy of applications. One action taken was to have teams of 'sociologists' to conduct the verification process. The 'sociologists' held a significant degree of resource power in the selection process and, unsurprisingly, have encountered a lot of hassle and pressure from the community. One sociologist recounted how his family had been harassed by neighbours in an attempt to pressure him to provide the shelters to them although they were ineligible. In the field, the sociologists felt pressure 'to adjust' the selection criteria and met with verbal abuse and occasionally physical assault when they refused. The situation was not helped by allegations of extortion and corruption coming from the community.

Generally, it appears that the verification system in place (sociologist screening) has worked to an extent, but there were the rare lapses that have unfortunately contributed to local dissent and fuelled further allegations and problems of its own. For example, some beneficiaries have complained that they feel paralysed and unable to leave their shelters for fear that the 'sociologists' would find the dwelling empty and dismantle them. Many rumours have also arisen, alleging that the 'sociologists' have sought to extort money from beneficiaries or shown favouritism. Interestingly, the local community apparently expect this phenomenon and view it as part and parcel of 'normal' Sri Lankan life.

It has been difficult to substantiate the allegations, but the few that have been checked out by management staff have turned out to be false. When the community was asked to corroborate the allegations in the focus group interviews, many allegations could not be substantiated. It was also observed that because of their illiteracy and ignorance, some individuals were more easily convinced of rumours. In particular, there was a sense that "if you don't understand something, it must be bad". So pervasive was the atmosphere of rumour-mongering and mistrust that there is now a saying in the village that "if 2 peacocks (Rs1000 notes) flies, one file (application for aid) will fly".

There was further mistrust and division in the community between Tamils and Tamil Muslims, locals and non-Addalaichennai residents, and, 'tsunami-affected' beneficiaries and 'non-tsunami-affected' groups. In particular, the latter group who were often from a very poor subgroup of the community and had also suffered in the flash floods (that occurred after the tsunami) were not entitled to 'tsunami-aid' and consequently felt hard done by. The situation has not been helped by misinformation as a result of inaccurate local media reporting of programme activities.

This problem was not confined to Medair alone. One INGO worker described how it was the local practice to 'take revenge on other people by making (false) accusations', i.e. 'deliberate interference with someone else with the intention to damage'. Even within the community itself, there was a deep sense of mistrust. As one community leader describes, "we cannot talk about (certain allegations) because it is dangerous for our lives according to the situation in the country ... there are two communities, Tamil and Muslim, and it might be dangerous for our lives.'

Aid seems to have brought out the worse in people, especially greed. Although there were some genuinely impoverished families, there were a lot of instances of opportunism (as mentioned above) with ineligible persons applying for aid. One village headman astutely observed that poverty was a factor in this. Many knew Medair would leave incipiently and sought to get as much aid as they could before Medair departed.

5.5.2 *Economic effects*

The area of operations is a relatively deprived area with socially isolated communities that have been blighted by Sri Lanka's chronic conflict and left bereft of development aid. Many respondents reported that apart from Medair, no other governmental or non-governmental agency had rendered any significant aid to the area both before and after the tsunami. Recent flooding as well as the tsunami disaster has accentuated further local vulnerabilities to poverty and its adverse impacts on human health. Thus, the selection of Addalaichchennai as Medair's target area of operations has been inspired as it meets what was previously a serious unmet need.

The presence of Medair and the investment of roughly US\$2.5 million in aid will have had a significant impact on the economic condition of the local area. In the month of May, US\$600,000 was spent with US\$50,000 in salaries alone. By opting to source most of the aid materials required locally, this has supported the local traders. Unfortunately, the 'benefits' of the financial transactions tended to be limited to a few contractors, suppliers or other individuals, whose assets also tended not to have been damaged or destroyed by the tsunami. The area suffers from chronic unemployment. As such, by sourcing most of the manpower locally, Medair has helped alleviate this need significantly. However, as the biggest single local employer at present, the departure of Medair would result in unemployment for some 400 Medair employees. This may have serious ramifications for the local economy.

The provision of employment, livelihood restoration, and local trade has benefited a sizeable portion of the community. But not all groups have been equally covered and there is the risk of aid worsening income inequalities in the area that may persist in the longer term. Although attempts have been made to ensure a fair distribution of aid by programme staff, equity of distribution has been hard to achieve. However, in fairness, such was the scale of pre-existing inequalities in the community, in the current context and with the current resources, it would not be possible to rectify this problem sufficiently.

One of the main concerns with any relief programme that involves large sums of aid money is the potential for inflation to occur in the area of operations. There has been some inflation in the prices of building materials due to high demand from NGOs in Ampara of around 10% as estimated locally. The cost of food items in the markets and other domestic items fortunately remains at pre-tsunami prices.

5.6 **Miscellaneous issues**

5.6.1 *Psycho-social needs*

The focus group interviews also uncovered significant unmet need with regards to the psycho-social needs of survivors, many of whom suffer post-traumatic stress-related symptomatology such as anxiety attacks, flashbacks and somatic symptoms (see Excerpts).

Excerpts of interviews: Psychological trauma

"This area is vulnerable for any attack (tsunami). There is no way to escape. The past unpleasant experience often comes to my mind. I can't live here. We spend the day here. When night falls, we spend the night somewhere else to sleep'.

"We get the fear very often. Sometimes when we get the fear, we leave our things and run. The thought of the tsunami comes while sleeping. When the wind is strong, we fear it is the tsunami. One day it

rained heavily. We got the fear and we ran away..."

"The ladies get together and console each other. We talk to each other. We pray five times and ask our God to give us relief and save the people."

"The children ask, "Will the sea invade again?". The children tell us, "You should not go anywhere, the sea will come again!"

Many persons, in particular children, appear to be traumatised. Whilst many of the survivors have attempted to resume some semblance of normal routines, there are several who have not been able to do so. In particular, there was one case of inappropriate shelter siting, that the focus group interviews uncovered, of a man whose shelter was built, in his opinion, too close to the sea. Because of this, he and his family still did not use the shelter overnight for fear of another tsunami. Although Medair's programme has not specifically looked at the addressing these psycho-social needs, a greater degree of sensitivity of shelter siting may have been helpful.

5.6.2 Land ownership issues

One major issue lies with land ownership for the siting of shelter. A few cases have come to light during the course of the evaluation of beneficiaries being evicted from their shelter sites by the landowners. Although the beneficiaries were able to disassemble and take their shelters with them, their other aid provisions such as wells and latrines fell into the hands of the landowners. Further questions of legal ownership of shelters may arise too should the construction be of a more 'permanent nature' (e.g. requirements for cement flooring, electricity and plumbing). This problem may be beyond the control of Medair, but some efforts at advocacy for the beneficiaries may be warranted.

6. CONCLUSIONS

6.1 Effectiveness

Achievement of programme objectives

From the outset, Medair has set itself a bold and lofty goal of ensuring 'that people displaced by the tsunami destruction in Ampara district are able to return to their normal lives'ⁱ. Overall, Medair has run an effective programme that has achieved many of its programme objectives and looks likely to achieve most of them by the end of the project. The shelter project in particular has performed exceptionally well. Few other agencies have matched Medair's performance in this respect (Appendix 3).

In view of the scale of need and the limited time-span before the arrival of the monsoon rains in Ampara, 'timeliness' of aid thus has to be a priority. From certain quarters there were criticisms that several NGOs may have produced shelters too quickly and of inadequate quality. This does not appear to be the case with Medair's temporary shelters; good quality raw materials were used and, when assembled, appear to be of sturdy construction. The shelters have the added benefit of being easily dismantled should the beneficiaries have to relocate elsewhere, which is an essential consideration in the current circumstance where resettlement of returnees remains to be determined conclusively by the government. Furthermore, the provision of shelters to displaced and homeless families enables them to re-establish some measure of normality to their lives. The psychosocial benefits of this are considerable and should not be under-estimated.

6.1.1 Major factors facilitating the achievement of programme objectives

ⁱ Modified Logical Framework, April 2005; Emergency 'Tsunami' Relief and Resettlement Programme in Sri Lanka, Medair.

a) Rapid scale-up of programme

The scale up of the entire programme has meant that Medair has been able to deliver a varied and comprehensive aid package rapidly. A significant degree of economy of scale and scope was attained in the process. This is exemplified by the shelter workshop that accomplished a degree of specialisation and economy of scale, making it technically efficient and allowed increased productivity. As such, it was an indispensable asset for the project.

b) Geographically-focused programme

Concentrating its relief activities efforts solely in a relatively small geographical area has conferred several benefits to Medair. Medair has got to know and understand the community it serves better, and to develop good working relations with the local authorities and community leaders. It has been able to provide a more comprehensive package of aid tailored to local needs and to distribute aid more efficiently as well. By sourcing much of the required materials locally, this has obviated the need for long supply lines, and costly transport and logistic resources. By being based in the division itself, this has reduced programme costs that would have been incurred had a separate administrative office been set up elsewhere, e.g. Colombo or Ampara town.

c) Good Governance Practices

There were several good initiatives at the field level of governance (audits and surveys) that are commendable. The expatriate management team have demonstrated good situational awareness and reflexivity that has allowed them to contend with issues positively and proactively. Many issues raised by this evaluation were dealt with almost concurrently by the team. The effectiveness of the programme will most certainly have been improved consequently through this process of 'fine tuning' as described by one of the Medair project managers. These initiatives however were not a routine aspect of the programme. An evaluative culture should be encouraged.

d) Staff development

By delegating responsibility and encouraging ownership of the programme by local staff, this has provided the opportunity for staff development. The local staff members had a stake in the programme and were consequently motivated to deliver a high quality programme. In the longer term, the investment in staff development means that they will have acquired skills; a vital component of local capacity-building.

6.1.2 Major factors hindering the achievement of programme objectives

a) Technical difficulties and staffing problems

The major difficulties encountered in the watsan project, especially with regards to recruitment of appropriate staff as well as the unforeseen problems with well-cleaning will have hampered the attainment of the watsan targets in the time-frame set.

b) Ambitious water and sanitation project targets

The targets set for the watsan project appear a little too ambitious bearing in mind the contextual difficulties encountered. A longer timeframe for achieving the current targets may be more appropriate. Furthermore, a less 'target-driven' culture may counter the risk of quality being compromised for haste.

c) Shifting requirements

Another challenge has been the continuing revisions of 'shelter requirements' as dictated by the government that will in due course also drive up overall shelter costs. While the temporary shelters currently meet government standards, there is a real and significant risk that they

may not comply should the government revise the standards in the near future. However, as it is now, the shelters are already compliant with SPHERE standards.

d) Inadequate supervision

As a consequence of the large size of the workforce, adequate supervision has been difficult to carry out. This makes it difficult for quality to be assured throughout the programme as well as to mitigate against potential transgressions by employees. If the organisation's size were to be increased further, more management staff would be required to combat growing diseconomies of scale. The cumbersome size of the programme also makes it difficult to provide individual care and attention to each beneficiary, in other words the programme loses its 'personal touch'.

e) Poor handover and record-keeping

The frequent change-over of expatriate management staff has been a hindrance, especially when handovers were not carried out well. One reason for this was poor record keeping especially in the initial few weeks of the programme. This situation has improved since. Conscientious reporting and note-keeping needs to be encouraged and seen as a necessity as it facilitates the smooth handover between management teams. It is also an integral component for transparency and accountability of the programme.

6.2 Impact

6.2.1 Social Impact

Following more than 2 decades of conflict and inter-ethnic tensions, Sri Lanka is a polarized society. A system of political patronage exists that is deeply embedded in the society. There appeared to operate at all levels a system of favouritism and relationships of blood-ties in the community and unsurprisingly some of this was present within the organisation.^{14,15} This was indeed the case in Addalaichennai between the Tamils and Tamil Muslims. There was a palpable degree of mistrust, deception and rumour-mongering between the two communities, as well as between the recipients and non-recipients of aid, that surfaced primarily as a result of the distribution of material aid (i.e. shelters and NFI). This seems to be less of an issue with aid in the form 'services' such as health promotion and well cleaning. It is thus appropriate that Medair is winding down its NFI and shelter distributions, which may have a knock-on effect of dissipating some of the ill-feeling within the community itself. Although a more community participative approach from the outset may have minimised this problem a bit, it is unlikely that it could have been totally prevented. Otherwise, Medair's aid intervention does not appear to have had any long-lasting negative impacts on the local community.

6.2.2 Physical and Environmental Impact

Much of the raw material used for the programme was sourced locally using mainly locally produced material. Although not an issue currently, how the pit latrines are dealt with in a few years' time when they are full remains to be addressed. The disposal of refuse is also an ongoing issue that predates the tsunami. Overall, there is insufficient evidence to suggest that the programme has had a significant adverse impact on the physical environment.

6.2.3 Economic impact

Pre-tsunami, Addalaichennai was a relatively poor division with chronic unemployment, low levels of development aid and investment. The economic situation was aggravated by the tsunami and monsoon flooding soon after. Over the past 6 months, the aid provided by Medair does not appear to have had a detrimental effect on the local economy. Instead, the provision of employment opportunities in large numbers, as well as the volume of transactions locally, will have boosted the local economy. Apart from a small increase in the cost of building materials, price inflation generally has not occurred. The restoration of livelihoods project will also go some way to enabling some of the affected fishing communities to regain economic self-sufficiency in the longer-term. However, significant needs still remain,

especially with regards to provision of employment opportunities for women, widows, and the elderly. Many tsunami survivors still remain unemployed and dependent on governmental or NGO aid currently.

6.2.4 Vulnerable groups

The programme has made some attempts to ensure equitable distribution of aid on the basis of need (for example, shelter allocation to overcrowded households). Coverage also included small marginalised communities, such as the Tamil community in Thiraikeny village. There was no explicit targeting however of other vulnerable groups such as pregnant women, the disabled and the elderly. In general, most of the affected communities received appropriate aid and the aid has benefited many of the more impoverished families in the communities.

6.3 Relevance

The aid provided has been appropriate to the needs of the beneficiaries. This has been assisted by the consultation of the local community during the latter stages of the programme. Both the local authorities and the community served have been appreciative of the aid and there appears to be little in the way of wastage or duplication of aid. Shelter design has been culturally appropriate using local materials. The facility for beneficiary choice in the NFI distribution has meant that aid could be tailored to individual needs. The provision of privacy walls around communal wells erected at the request of beneficiaries has respected the religious and cultural traditions of the local community. Again, in view of the scale of need in the area, there remains persisting unmet needs (e.g. for livelihoods and psychosocial counselling) that Medair's programme, in fairness, did not seek to address. The projects have been compatible with Medair's overall strategy, in targeting a marginalized and impoverished community in Sri Lanka. Effort has been made locally to adhere to international standards and to abide by the organisation's vision and values.

6.4 Sustainability/Connectedness

Most of the projects have focused on addressing immediate needs of the beneficiaries, notably for shelter, clean water, sanitation and livelihoods. Much of the work done has been of good quality and durability and should be expected to last a few years in the first instance. Bearing in mind that the temporary shelters were meant to be temporary, it would be unrealistic to expect them to have the robustness of more permanent dwellings. Much of the implementation of the programme relied on local manpower at all levels of the organisation. Some capacity building did occur in the form of staff development with local staff taking on ownership of the programme. The programme did not seek to increase the beneficiaries' capacity to mitigate against future vulnerabilities. However, the portability of the shelter design does enable beneficiaries to relocate should the need arise. By complying with government restrictions on resettlement within the 200 metre 'buffer zone', this would reduce beneficiaries vulnerability to a further tsunami should one recur. Addalaichchennai still requires significant amounts of development aid. There thus remains a very real opportunity here for Medair to make a longer-lasting contribution to the area.

Secondary Objectives

6.5 Coverage

Considerable effort has been made by Medair to ensure that the distribution of aid has been done so equitably on the basis of need. It is likely that most, if not all, the eligible beneficiaries have received aid. The aid was distributed to all sections of the community including the more marginalised groups (e.g. ethnic minorities). Some attempts were also made to target vulnerable groups in shelter allocation (as mentioned above), and much of the work went to workers locally, including those who had been tsunami-affected.

6.6 Coherence

Thus far, the programme has complied with national requirements, e.g. temporary shelter standards. Programme activities such as shelter, NFI and fishing aid allocation too have been conducted with input from the local authorities. The health promotion campaign's message is consistent with the work of the local Ministry of Health. Overall, the programme has demonstrated good coherence with national and local initiatives.

6.6 Coordination

Programme staff have attempted to coordinate their activities with the local authorities and INGOs. The general consensus among aid workers locally seems to be that inter-agency coordination has been erratic and mediocre at best. Medair has been fortunate in being the sole INGO in Addalaichennai. In view of the circumstances, as well as the imminent departure of Medair from the programme area, the feedback from the local authorities is that more rather than less coordination and communication is desirable to ensure a smooth exit.

6.7 Efficiency

The rapid scale-up of the programme in the last 6 months has been remarkable. With the set up of the workshop, the production of shelters has been technically and economically efficient, i.e. on a larger scale at lower cost relative to the other agencies involved in the provision of shelter. Bulk purchasing locally and adherence to standard procurement procedures have also ensured that better relief materials at lower cost are acquired. The latter is also particularly important for financial accountability. On the whole, in the current context, the programme looks to have provided aid of good quality that is value for money.

Cross Cutting Issues

6.8 International Standards

The expatriate management staff were generally conversant with SPHERE standards and showed a realistic understanding of its application in the field. The shelter project was compliant with SPHERE standards as were the completed watsan aid. Provided that the watsan project achieves its targets, it looks likely that it will meet SPHERE's minimum standards. The principles of HAP-I were not easy to operationalize in the field and similarly difficult to translate into meaningful measures in the evaluation. Conceptually, at the time of the evaluation, the programme appeared to abide by most of the guiding principles of HAP-I. The main weakness initially was on how complaints were handled, as there was no complaints mechanism was available initially. Steps have been taken since to try and address this issue, but it remains to be seen how effective it is. Generally, beneficiaries have had some input into the programme at some stage (e.g. shelter design, NFI distribution), some of which was meaningful, but this has been patchy and limited in most instances. There has been a reasonable attempt to engage the community in many aspects of the project, but not always effectively.

6.9 Participation

There was inadequate beneficiary consultation and participation in the earlier phases of the programme, although the programme has sought to increase participation in the later stages of the programme. As Boyden et.al¹⁶ pointed out, 'because project design and approval does not involve beneficiaries directly, aid recipients have little meaningful role in planning, setting a precedent that is not conducive to sustaining high levels of participation in the later stages of the project cycle.' They go on to stress how 'consultation and timely provision of accurate information are important valued instruments through which agencies can show their respect for beneficiaries and provide them with a greater sense of control over their lives.' This finding is highly pertinent in Medair's situation in Addalaichennai. More involvement has been catered for in the latter part of the programme that has had some meaningful impact on programme implementation. Although more could still be done, at this late stage, it is unlikely

to be of much use in most of the projects now, with the exception perhaps of the complaints mechanism (as stated above).

6.10 Advocacy

This aspect was not directly assessed and consequently no comment can be made on it.

6.11 Other issues

a) Safety and security

Although measures have been taken by the field management team to deal with complaints, the generation and spread of malicious negative rumours in the community continues. The risk then is that this may jeopardize the safety of Medair staff, especially local staff, in the field. This risk will likely escalate as the programme approaches closure and grievances in the community mount up.

b) Dependency

At present, the input of aid into the local economy has had generally positive effects to counterbalance some of the losses suffered due to the tsunami. However, the longer Medair remains in Addalaichennai, the greater is the risk of encouraging dependency in the community. These fears have been echoed by local community leaders.

7. RECOMMENDATIONS

7.1 Better handling of community relations

The handling of community relations throughout the project cycle is important and is critical at this juncture. Some of the misunderstanding and grievances encountered so far may have arisen from the poor handling of community relations. The CEC is a step in the right direction to resolving some of this issue. Adequate resourcing is essential for it to be effective. With the current intention to close the programme shortly, Medair's exit from the division needs to be handled delicately and sensitively. Local community leaders, especially the various Mosque Trustee Boards, and local authorities should be involved as much as possible with regards to the settlement of any disputes and grievances. By doing so, hopefully the closing stages will run smoothly and be trouble-free.

Future programmes could consider allocating a dedicated staff member with responsibility for handling community relations. Tasks that the community relations officer could carry out include dealing with local community leaders (imams, mosque trustee boards and committees) and the community at large to address any misunderstandings, misinformation and miscommunication. The officer could also be tasked with gaining a better understanding of the social and cultural aspects of the community, and to handle the local media.

7.2 A more participative approach

Participative approaches have the advantage of greater 'buy-in' from the community and other stakeholders. It allows participants to have a greater degree of input and control over relief activities that affect them, and confers ownership of the programme. It is also 'widely accepted as crucial to effective social targeting, resource utilisation, accountability, sustainability and impact. For some, participation is also a fundamental right.'¹⁶ As such it should be encouraged whenever possible. However, it may not be appropriate in all situations and programme staff need to make the difficult judgement in the field as to when participative approaches can be practically applied. In the case of Addalaichennai, for example, the community could probably have been involved at an earlier stage of the programme.

7.3 *Addressing complaints*

As mentioned earlier, the need to properly deal with beneficiaries' complaints is essential and is codified in HAP-I principles. Failure to do so can lead to significant levels of grievances and discontent in the community that may poison the NGO-community relationship. Medair should investigate effective means of addressing complaints. In particular, it should try to establish by which mechanism complaints can be voiced appropriately, as well as systems of dispute settlement and redress. It would be useful for a separate evaluation of the effectiveness of the CEC to be conducted. In particular, the CEC and similar complaint mechanisms need to be meaningfully resourced rather than being simply 'an exercise in community relations'. If successful, the CEC may be a useful tool that can be applied in other settings. A cautionary note however needs to be made that complaints mechanisms are likely to be contextually-bound, i.e. are culturally-specific. Allowances and adjustments will therefore need to be made so that the system for addressing complaints is culturally appropriate.

7.4 *Supervision and Investing in Staff*

With any large programmes, getting the balance of supervision right is a challenge. In this programme, the ratio of local staff to expatriate managers was more than 50 to 1. Larger organisations run the risk of being too cumbersome and inefficiencies may arise when diseconomies of scale sets in. Management requirements are consequently increased and a change in organisational structure may be required. The adequate supervision of staff is an indispensable requirement for assuring good quality of work that is maintained throughout. Also, with inadequate senior staffing, the opportunities and potential for training and staff development activities are reduced. Investing in local staff should also be prioritized as it builds local capacity that in the long-run is more sustainable.

7.5 *Facilitating other NGOs*

In view of the scale of need locally, there thus exists a very real opportunity to make a significant positive impact on the unmet needs. Medair has built up significant social capital locally especially in terms of credibility, beneficiaries' trust, goodwill and cooperation. As Medair prepares to exit from the area, Medair should actively advocate for another NGO to continue development work in the area. Efforts should be made to identify and support the entry and set up of another NGO, preferably one with a developmental focus, in the area. Failure to do so could undermine the achievements of the programme so far and represents a wasted opportunity to impart knowledge and insights of the area gained in the past 6 months.

7.6 *Establishing an evaluative culture*

A reflective, evaluative culture, as part of programme governance, needs to be fostered in all programme operations with regular audit of activities to ensure quality of the programme and responsiveness to beneficiaries. Programmes need to conduct not just quality audits, but also equity audits to ensure that the distribution of aid has been equitable and that vulnerable groups are served. This aspect was somewhat deficient in the current programme. Part of this 'evaluative culture' also includes impact assessments (see 7.7).

7.7 *Impact assessments*

Health is not just the absence of disease but describes the complete physical, mental, and spiritual well-being of the individual. Many of the determinants of health extend beyond the realm of disease and health services, and include diverse arenas such as shelter, employment, and the environment. Consequently, any action in these sectors can and often does have an impact on the health and well-being of the local community. This phenomenon is perhaps all the more evident in disaster-settings. As Roberts and Hofmann¹⁷ eloquently state, 'in current practice, the health impact of programmes is too often assumed rather than demonstrated. Efforts to document project impact should be woven into monitoring and surveillance activities, not only to reduce costs but as a tool to improve program quality.'

Many relief activities pay insufficient heed to the ramifications of its actions that may extend beyond what is expected or measured in project log-frames. Indeed, seemingly beneficial interventions may have dire consequences. For example, it is increasingly recognized that aid 'has the potential to fuel war economies and even in some contexts actually prolong the conflict'¹⁸. Although it is often difficult to predict the positive and negative impacts of a programme, impact assessments nonetheless can help inform planning, decision-making and programme implementation. Impact assessments are more likely to provide a more integrative and holistic evaluation of a programme than process or output indicators. Various methods have already been devised, e.g. environmental impact assessment (EIA), and health impact assessment (HIA)¹⁹, that can be adapted for use in the relief setting.

7.8 Organisational learning

The current programme provides a rich and fertile base for organisational learning that can help Medair respond more effectively and appropriately in future programmes elsewhere. There is an opportunity and a need to study what field organisational structures, field management styles and systems, and human resource skill mix are best suited for the task. Further analysis may yield more insights. Medair could also consider additional training for its 'emergency staff' on management skills, handling the media and community, sociological approaches to better understanding local communities, and so forth.

7.9 Better record keeping and handovers

Accurate and pertinent record keeping is an essential activity for accountability to both donors and beneficiaries. It also facilitates handovers to incoming staff, and provides an informative data source for further evaluations and lesson-learning at a later stage. As such, staff need to be diligent in this regard.

Endnote

Medair has performed well and done much to address the immediate needs of the tsunami-survivors in Addalaichennai. However, much more still needs to be done to fully restore the communities to their pre-tsunami conditions. Much has been done, but in the longer term, more needs still remain unmet. ■

8. CONFLICT OF INTERESTS

The author of the evaluation has previously worked for Medair and was also part of Medair's initial needs assessment team sent to Sri Lanka in the first two weeks following the tsunami disaster. The author is also currently a graduate student of the London School of Hygiene and Tropical Medicine (LSHTM). Some of the data obtained in this evaluation will be used as part of a dissertation for an MSc thesis submitted to LSHTM. For the evaluative components used for the MSc thesis, ethical approval has been received from the LSHTM Research and Ethics Committee.

9. EVALUATOR SELF-REVIEW

The evaluation was a challenging exercise to conduct within the actual timescale of 2 weeks with multiple objectives to be covered as set out in the terms of reference of the evaluation. As a result, certain objectives were dealt with in greater depth. In particular, a lot of time was spent on the focus group and key-informant interviews. As such, the findings may be biased towards the perceptions and views of the participants from the local communities (both beneficiaries and non-beneficiaries) as well as key-informants who were not programme staff. It has also not always been possible to convince respondents of my 'independent' status as an evaluator. This may have had positive effects (as respondents often sought to voice their grievances directly to a foreigner rather than local staff member) but may have curbed some of their responses due to the possibility of a social desirability-bias. I am uncertain as to the full extent of this bias, and as to how much of what the participants voiced truly reflected their opinions. Generally, however, the interview participants seemed forthcoming with their views and were appreciative of having the opportunity to voice their opinions. As more time has been spent with the participants, this has meant that the quantitative aspects of the programme unfortunately were less rigorously assessed.

Having been part of the initial emergency team in December 2004 did make it easier to put a lot of what was said by participants into context. In the absence of much recorded information of the programme in the earlier phases, having been present back then meant that I had some understanding of the initial situation on the ground. The conflict of interest as stated above may have compromised the validity of the evaluation through introduction of potential bias but significant effort has been taken through self-reflection to minimize this. If anything, certain aspects of the programme may consequently have been more critically appraised as a result.

I found that the expatriate team in the field was very open and cooperative with the evaluation and did not feel that they attempted to influence the findings of the evaluation. They demonstrated good reflexivity themselves and were open to suggestions and other viewpoints.

All in all, I have tried to provide as balanced an evaluation as possible and have in no way intended to malign any staff member, agency, or member of the local community. The views expressed are my own and do not reflect those of Medair or of the London School of Hygiene and Tropical Medicine.

A.C.K.L
July 22, 2005

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11. APPENDICES

Appendix 1. Interview guides

Key-Informant Interview Questionnaire

Needs, Demands & Expectations

1. After the tsunami, what help did you need?
2. What help did you expect to get?
3. Was it what you needed?
4. What has the quality of the aid been like?
5. What are your needs that have not been met?

Efficiency & Relevance

6. When did the help arrive?
7. Has the aid given been acceptable?

Coverage & Equity

8. Have any particular groups of people (who should have received aid) not received any aid?
9. Has the distribution of aid been fair?

Effectiveness & Impact

10. What do you think of Medair?
11. What has Medair done well?
12. What do you like about Medair's projects?
13. What has Medair not done well?
14. What don't you like about Medair's project?
15. What could Medair have done better?
16. Are there any negative effects/aspects of Medair's projects?
17. Are there any positive effects/aspects of Medair's projects?

Participation & Coordination

18. Do you have any influence on the help given?
19. Have Medair involved local people in the projects?
20. How have they done so?
21. Have Medair coordinated their activities with other agencies?
22. Are the activities in line with the policies of the government or local authorities?
23. In your opinion, whose responsibility is it to give help?

Sustainability

24. Do you think you can cope without foreign relief agencies?
25. Do you think you could cope with another disaster such as a flood or cyclone or tsunami?
26. Has the help and presence of relief agencies have any effect on the peace process?
27. Are things in the market now more expensive, the same or cheaper than before the tsunami?

Other questions/issues

APPENDIX 1, continued

Focus Group Interview Guide

Introductions

Explain purpose of the evaluation & thank participants for their help.

('Ice-breaker' questions to build rapport)

- tell me a little about the history of this village
- tell me about what life is like in the village
- tell me about the seasons here
- tell me what crops are grown here/what fish are caught in the sea here

Aid received:

1. After the tsunami, tell me about the help that you received?
 - a. What help did you need
 - b. What help did you get?

Notes: Looking back, do they assess their needs differently?
Reflect on differences

Distribution of Aid

2. How has the aid been distributed?
 - a. Have any particular groups of people (who should have received aid) not received any aid?
 - b. How was it decided?

Notes: Has the distribution of aid been fair?

Medair

3. What do you think of the help given by Medair?
 - a. What has Medair done well? What do you like about Medair's projects?
 - b. What has Medair not done well? What don't you like about Medair's project?
 - c. What could Medair have done better?
 - d. Are there any negative effects/aspects of Medair's projects?
 - e. Are there any positive effects/aspects of Medair's projects?

Notes: Ask for examples. Explore why.

Participation & Coordination

4. Has Medair involved local people in the projects?
 - a. How have they done so?
 - b. What do you think of that?
 - c. Have you any influence on the projects?

Sustainability

5. If tomorrow all the foreign relief agencies left, what would happen?
 - a. How do you feel about it?
 - b. What would happen as a result?
 - c. What has been done to prepare for future disasters such as flooding?

Appendix 2. Initial assessments in Ampara district post-tsunami disaster.

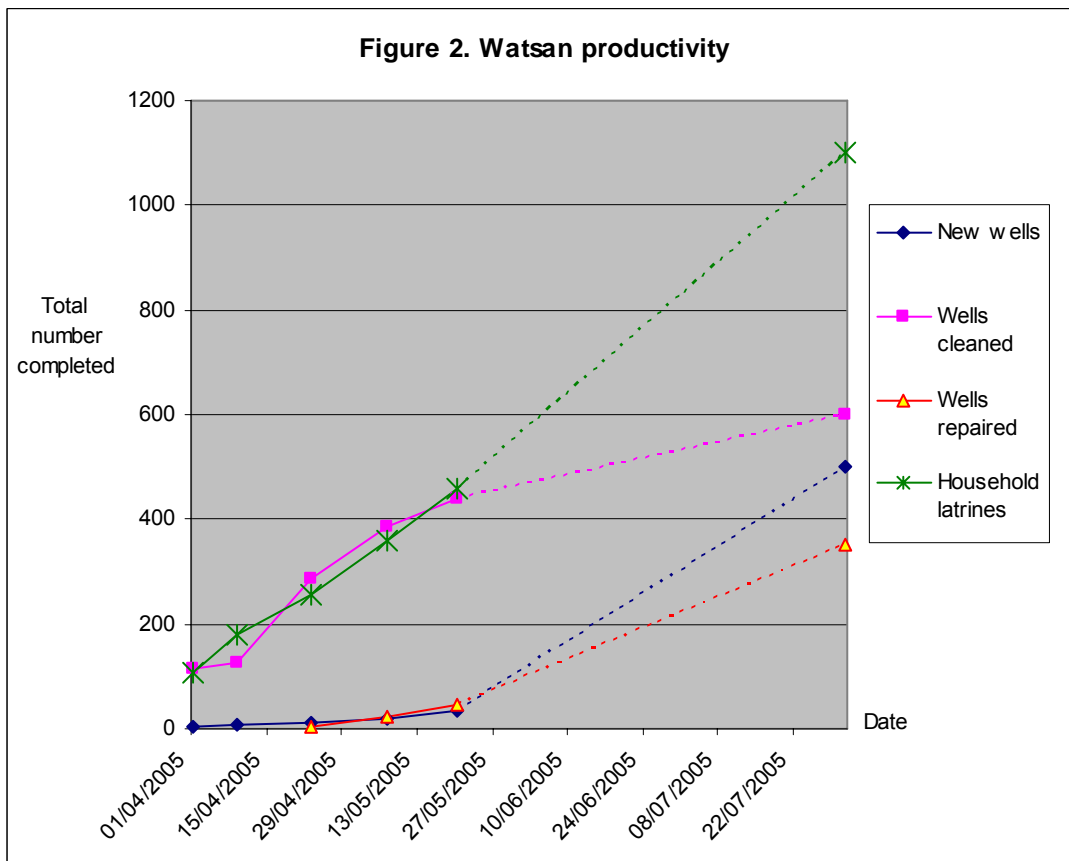
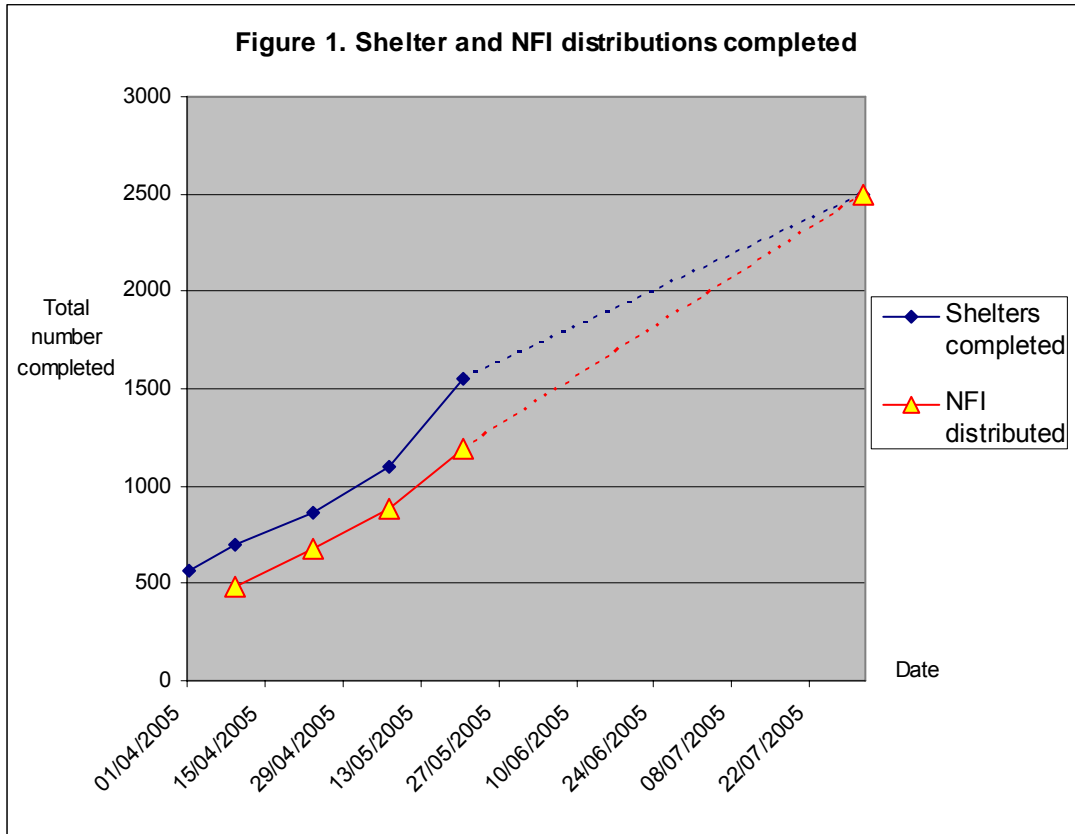
Table 1. Description of Divisions in Ampara District³

Directly Affected Divisions	Population Density	Main ethnic groups
Lahugala	Low	Sinhalese
Pothuvil	Low	Tamil & Tamil Muslims
Addalaichchenai	Medium	Tamil Muslims
Akkaraipattu	High	Tamil Muslims
Alayadiwembu	High	Tamil
Thirukkovil	Low	Tamil
Kalmunai Muslim	High	Tamil Muslims
Kalmunai Tamil	High	Tamils
Ninthavur	High	Tamil Muslims
Karaitivu	High	Tamil
Sainthamarathu	High	Tamil Muslims

Table 2. Numbers of Fatalities and IDPs in Ampara District¹⁰

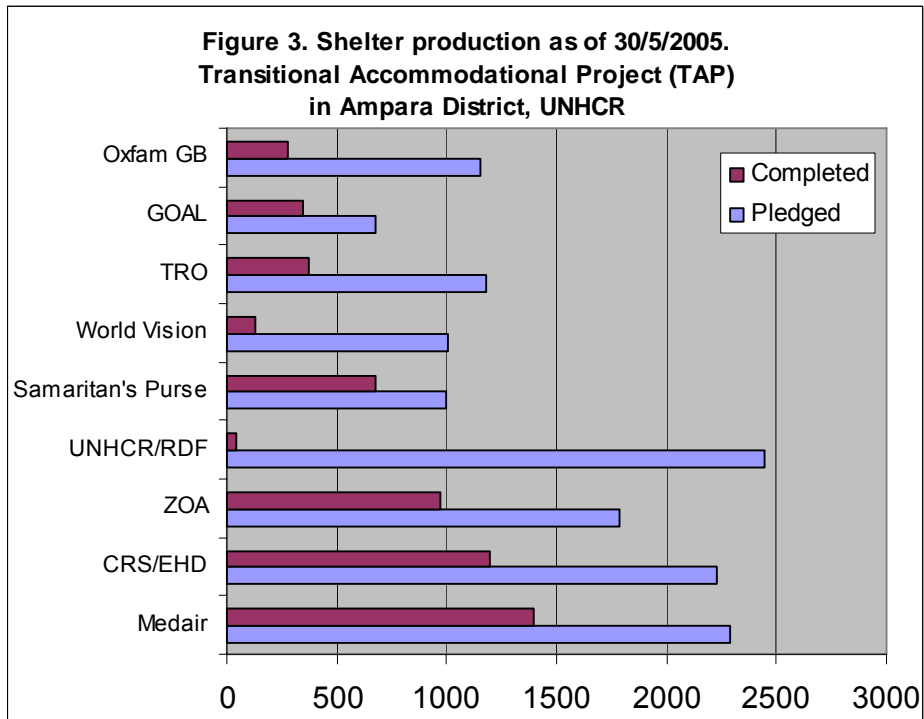
Directly Affected Divisions	Tsunami fatalities	Estimated number of houses destroyed	Number of IDPs	Number of IDP collection centres
Lahugala	1	500	7,000	6
Pothuvil	535	1,000	27,650	9
Addalaichchenai	10	2,000	17,843	14
Akkaraipattu	45	500	5,855	6
Alayadiwembu	100	100	17,000	3
Thirukkovil	645	1,000	4,000	1
Kalmunai Muslim	2,500	5,000	NK	NK
Kalmunai Tamil	2,000	1,500	4,200	NK
Ninthavur	100	2,000	NK	NK
Karaitivu	2,200	2,000	7,700	4
Sainthamarathu	2,300	2,500	25,240	4
Divisions not directly affected by tsunami	0	0	76,455	71
TOTAL	10,436	18,100	188,843	118

Appendix 3. Medair project output graphs.



Appendix 4. Shelter production in Ampara district

As reported 30/5/2005, UNHCR data.



Appendix 5. Terms of Reference of the Evaluation



Terms of Reference v.2
Last Updated 12th May 2005

Project no: LKA01
Confidential: No

Real Time Evaluation of Medair's 'Tsunami Emergency Response' Programme in Sri Lanka, June 2005

Summary

Medair is implementing an emergency relief programme in Ampara district, on the east coast of Sri Lanka, focusing on water & sanitation, essential relief item distributions, temporary shelter and rebuilding livelihoods. The overall size of the project over 7 months is \$2.5 million USD.

Evaluation team: Evaluator – Andrew Lee, plus translator
Desk Officer: Robert Schofield

1. BUDGET

Total budget available is up to \$6,000

Evaluator, 10 days of evaluation at no cost	\$0
International flights; briefing in Switzerland and travel to Sri Lanka	\$2,000
Domestic flights in Sri Lanka	\$300
In-country travel	\$300
Accommodation and sustenance for 15 days@ \$25 per day	\$375
Visas, UK travel	\$150
Translators	\$1,000
Contingency; report printing costs etc	\$1,000
Total	\$5,125

2. BACKGROUND

2.1 Programme Title

Emergency Tsunami Relief and Resettlement Programme in Ampara District, Sri Lanka, Dec 2004 – Jul 2005

2.2 Background to the Programme

On Sunday 26th December 2004, at 6.58am Sri Lankan time, a huge earthquake, measuring 9.0 on the Richter scale, erupted off the coast of Sumatra, Indonesia. The enormous force created a huge Tsunami (tidal wave in Japanese), which built up towering waves by the time it reached the shores of Sri Lanka at 9.10am local time. The tidal waves, 10 metres in height, caused tremendous devastation and destruction and at some points went as far as 2 kilometres inland. The coastline across South Asia was devastated.

Medair decided to focus its attention on the emergency needs in Sri Lanka, whilst continuing to monitor the humanitarian situation across the wider region. Operational staff were in Colombo within 24 hours of the disaster and since 1st January 2005, a full Medair emergency

team have been based in Akkaraipattu (east of Ampara town on the east coast), initially surveying a 60km stretch of coastline from Kalmunai to Pottuvil and now implementing an emergency relief and resettlement programme in Addelaichenia division

The whole eastern coast of Sri Lanka, as well as parts of the south west coast and the Jaffna peninsula were devastated by the Tsunami tidal wave. 38,195 people died and half a million people were made homeless. The disaster was compounded by torrential rain and flash flooding on 30th December 2004. The worst affected part of Sri Lanka was Ampara district on the east coast where 10,436 people died and 100,000 people have been left homeless. Ampara is one of the most logistically remote districts in Sri Lanka, being situated on the far side of the central mountains from Colombo, and in an area that is relatively underdeveloped owing to the recent conflict. Medair identified Addelaichenai division, in Ampara, as particularly underserved by local and international NGO's and Medair is currently the only International aid agency working in this area. ***See Appendix A, Operations Update, for further details***

Medair launched an appeal for funds from supporters at the beginning of January as well as contacting institutional donors. The programme is fully funded, principally by Swiss Solidarity, as well as Tearfund New Zealand/Government of New Zealand, Tearfund Switzerland and Dorcas Aid International

Medair strategy for Sri Lanka is to focus on the immediate and medium term relief, recovery and resettlement phase. Concentrating on key competencies in water & sanitation, shelter and NFI's

An exit strategy has been developed with a view to withdrawing from Sri Lanka at the end of July, on completion of the project. ***See Appendix B, Sri Lanka Exit Strategy***

2.3 Summary findings of previous reports, evaluations

The first Interim Report is attached as Appendix C. Monthly and Weekly Situation Reports will be available for review during the briefing at Medair HQ

Previous reviews include:

- Lessons Learnt from Deployment to Sri Lanka, Dec 2004
- Sri Lanka Learning Review, Feb 2005.

2.4 Medair profile and history

Medair is an International relief organisation, established in 1988. The mission of Medair is 'to respond to human suffering in emergency and disaster situations by implementing multisectoral relief and rehabilitation projects, in a compassionate and serving attitude inspired by its Christian ethos'. Medair seeks to prioritise interventions in forgotten, neglected and/or under-served areas.

Medair has operational support offices in five European countries and is currently implementing relief and rehabilitation programmes in; North and South Sudan, Angola, Democratic Republic of Congo, Uganda, Madagascar, Afghanistan, Iran and Sri Lanka.

Medair is a signatory to the 'Code of Conduct for the International Red Cross and Red Crescent Movement and NGO's in Disaster Relief'. Medair were a founder member of the Humanitarian Accountability Partnership International (HAP-I) and are seeking to be compliant with SPHERE Minimum Standards. Quality has always been one of the organisations core values and in 2001 Medair was awarded the ISO9001 certification for its worldwide operations.

2.5 Current activities

The Project Proposal, Logframe and budget describe the programme and are attached as Appendix D. In summary, the key goal and objectives are:

The goal of the project is to ensure that the people displaced by the Tsunami destruction in Ampara District are able to return to their normal lives

This will be achieved through the following objectives :

- Ensure safe water supply and adequate sanitation in up to 15 IDP camps in Addelaichenai division of Ampara district with a total population of up to 10,056
- Ensure safe water supply for up to 20,000 people returning to their places of origin or constructing new homes inland.
- To assist with the resettlement of 2,500 households, displaced by the tsunami in Ampara District for 7 months, by providing; temporary shelter, clean water supply, emergency sanitation and essential relief items (Non Food items).
- To restore the livelihoods of 1000 poor fishermen
- To be ready to respond to urgent needs for specific forms of assistance as they arise

2.6 Summary of Country strategy

The overall strategy for the Sri Lanka programme is to address the survival needs of disaster affected populations and to support the return of disaster affected communities to their homes and the restoration of livelihoods.

2.7 How the need for the requested assignment rose

External evaluation is regarded as best practice and is part of Medairs Project Management Cycle. The scope and depth of the evaluation should reflect the size of the programme.

The evaluation is timed for early June, in order that any immediate learning can be fed back into the project cycle before the end of the programme at the end of July 2005.

3. PURPOSE OF THE EVALUATION

Medair sees an evaluation as a joint **learning** and **accountability** exercise. It is undertaken in order to assess the effectiveness of projects and whether the desired changes have taken place. An evaluation therefore looks at whether, as a result of completed activities, objectives have been achieved.

3.1 The goal of the evaluation

The primary goal of the evaluation is; to assess the effectiveness of the Sri Lanka 'Tsunami Emergency Response' Programme in responding to the needs created by the South Asian Tsunami, and in so doing, to increase Medairs' ability to respond more effectively to future disasters.

3.2 Specific Objectives

In recognition of the fact that the Consultant will only be at the project location for around 12 days and will be working alone, the objectives have been divided up into primary and secondary objectives. The primary objectives will form the core of the evaluation.

Primary Objectives

3.2.1 Effectiveness

- To assess the extent to which project objectives have been achieved?

- Review the extent to which outputs have led to the achievement of objectives?
- Major factors influencing the achievement or non-achievement of project objectives?

3.2.2 Impact

- The intended and unintended effects (social, physical, environmental, economic, spiritual), both positive and negative, of the project on beneficiaries and others?
- Has the project targeted the most vulnerable groups and did the interventions reach their target groups?

3.2.3 Relevance

- The validity of the project objectives?
- The relevance of the project with the needs, priorities and vulnerabilities of the target group?
- To assess the fit of projects to Medair's vision, values, strategy and resources?
- Were the projects compatible with the overall Medair strategy?

3.2.4 Sustainability/Connectedness

- Have projects taken the longer-term into account?
- What is the extent to which the support provided built on local capacity?
- To what extent has the project assisted the participants to increase their capacities in order to mitigate against future vulnerabilities, as well as meeting basic needs?
- How has the project contributed towards reducing the root causes of people's vulnerabilities?
- What will be the impact of Medair exiting from Sri Lanka in July 2005?

Secondary Objectives

3.2.5 Coverage

- To assess whether there has been a fair distribution of activities, according to the needs in the project location?

3.2.6 Coherence

- To assess the coherence of the project with National and local policies?

3.2.7 Coordination

- How effectively has the programme team coordinated their activities with other NGOs, local authorities and central government? Has the project been designed within the policy context of the local and national government and international donors?
- To assess the quality and effectiveness of the relationship between Medair HQ and Medair Sri Lanka.

3.2.8 Efficiency

- To what extent has the project provided value for money?
- Were the outputs achieved, with a balance of least cost and highest quality?

Cross Cutting Issues

3.2.9 International Standards

- Are Programme staff conversant with SPHERE standards and have they been applied where appropriate in project design and implementation?
- Have the principles of the Red Cross Code of Conduct and HAP-I been applied?
- To assess the appropriateness of the assessment of needs undertaken in designing project responses. Were baseline surveys undertaken?
- To review the effectiveness of project management procedures and systems, including documentation (proposals, reports) and monitoring procedures.

3.2.10 Participation

- Has consideration been given in project planning and implementation to gender equality?
- To what extent have the beneficiary populations been involved in each stage of the project cycle; design, implementation, monitoring & evaluations.

3.2.11 Advocacy

- Have any efforts been made to pursue advocacy (attempts to influence donors, partners, government, concerning their policies or actions)

4. METHODOLOGY

1 International Evaluator will be responsible for leading the evaluation. The Evaluator will receive all relevant background documentation. The paperwork will include; strategy paper, project proposal, project progress reports, learning reviews and other appropriate documentation.

Prior to the field visit, the Evaluator will receive a briefing from the Emergency Desk Officer at Medair HQ

The Evaluator will visit Ampara District; Akkaraipattu, Addelaichenai, Kalmunai and Pottuvil.

Specifically the Evaluator should aim to undertake *focus group interviews* with a mix of all male and all female groups, as well as the inclusion where possible of vulnerable and minority groups. *Key informant interviews* with; Medair staff, other NGO staff, local authorities and donors, local community leaders and imams.

Translation will be provided where necessary.

The evaluator should share their initial findings with the programme team at the end of the project visit.

5. SCHEDULING

Pre-departure Briefing:	18 th May 2005
Travel & field visit:	27 th May – 10 th June 2005
Submission of draft report:	end June 2005
Submission of final report:	end July 2005

6. MANAGEMENT OF VISIT

The Client who is commissioning and approving the work is John Farmer, Operations Director. The Evaluator should refer to Robert Schofield, Emergency Desk Officer to resolve issues as they arise.

Responsibility for practical arrangements in-country is with Ben Nicholson, Country Director. International travel arrangements will be made by Robert Schofield.

7. EXPECTED OUTPUTS

7.1 Prior to the evaluation:

Consult relevant stakeholders on evaluation and encourage input into Terms of Reference.
Consult Evaluator on methodology

7.2 During the evaluation:

Verbal feedback to programme team, at the end of the field visit, covering initial thoughts and conclusions.

7.3 After the evaluation:

Evaluator to write the draft report and submit to Robert Schofield by the agreed date.
Submission of the final report to Robert Schofield by the agreed date.

Emergency Desk Officer to write an Action Plan addressing the accepted recommendations

7.4 Report Structure

See attached Report format, Appendix E. Ensure outputs from the report include key recommendations and learning points, which can be incorporated into future Medair policy and practise.

The consolidated evaluation report should be **a maximum of 25 pages** (excluding appendices) and must include a comprehensive stand-alone executive summary of **no more than 4 pages**.

8. REQUIRED INPUTS

8.1 Evaluation Team

Evaluator – Andrew Lee

Translator – preferably not from the area to preserve confidentiality and anonymity of participants

Driver and vehicle – locally sourced

8.2 Medair Sri Lanka staff involved during field visit

At least 4 key International and National staff will be selected for interview by the Evaluator

9. EVALUATION OF CONSULTANCY

Feedback on the assignment will take place by email between the Evaluator and Robert Schofield.

John Farmer and Robert Schofield will review the draft report and feedback any comments to the Evaluator ahead of their acceptance of the final version.

10. OTHER RELEVANT INFORMATION

An agreed version of the final report will be sent to ALNAP and posted on the Tsunami Evaluation Coalition Online Forum

Appendix 6. Evaluation itinerary

May 28	Arrival in Colombo. Onward travel overland to Addalaichchennai.
May 29	Arrival at Addalaichchenai (Ad.) Initial meeting with Country Director (CD), Medair Introduction to other expatriate staff members Initial meeting and briefing of translator
May 30	Tour of workshop and NFI shop Pre-test of questionnaire Key-informant Interview (KI) with local NGO representative. Unstructured interview (UI) with beneficiaries at shop Field visit with sociologists Focus group interview (FGI) <i>Ad.Division 9: Non-beneficiaries</i> KI with sociologist KI with government official 1 KI with Medair Watsan project managers
May 31	KI with government official 2 FGI <i>Ad.Thiraikeny division: Mixed sex group</i> Medair team management meeting Field visit to <i>Ad. Division 7</i>
June 1	Field visit to <i>Ad. Oluvil divisions 6 and 7</i> with CD (Investigation of complaints) Field visit to site of local partner NGO activities KI with Medair Fishing project manager KI with chairman of fishing cooperative 1 KI with chairman and secretary of fishing cooperative 2 KI with INGO representative
June 2	Visit to 2 schools in area Meeting with CD FGI <i>Ad. Division 7: Women's group and Men's group</i>
June 3	KI with administrator/finance manager Tour of stores and watsan department UI with Government counsellor FGI <i>Ad. Division 8: Men's group</i>
June 4	Field visit to Sahara Camp Field visit to <i>Ad. Kochipatti division</i> , unstructured interviews locally Translation and transcription of interviews Field visit and meeting with local imam, <i>Ad. Palamunai division</i>
June 5	Translation and transcription of interviews
June 6	KI with Medair shelter/NFI project manager FGI <i>Ad.Palamunai division</i> Mosque Trustee Board KI with Medair health promotion project manager
June 7	Translation and transcription of interviews Feedback of initial findings at Medair management team meeting Travel to Colombo
June 8	KI with INGO representative in Colombo
June 9	Departure from Sri Lanka

Map of Sri Lanka

Source: Perry Castaneda Library Map Collection, University of Texas at Austin

